|  |
| --- |
| **The Respiratory RAPID Access Program**  |
| Jane Neill1,Keryn Carter2 |
| *1 Respiratory Care Team, Sunshine Coast University Hospital, Sunshine Coast, QLD* |
| **Introduction/Aim:** Emergency Department (ED) congestion is a well-recognised issue. The Respiratory Rapid Access Service has been designed to offer known patients a safe alternative to presenting to ED, whilst offering specialist level care in a timely manner. **Methods:** RAPID is aNurse Led triage service for patients who are known to the Respiratory Team. Suitable patients are given a direct phone number for RAPID ensuring that there is always a number to call for assistance with symptom and disease management. RAPID provides triage for the Respiratory Acute Discharge Service (RADS) which manages patients with COPD exacerbations in the community, allowing escalation of treatment by the the Nurse Practitioner or SMO as required. Where pleural effusions are identified in outpatients, thoracentesis can be organised directly and swiftly. Patients with complex infection on a background of bronchiectasis can be admitted via RAPID for a PICC and IV antibiotics. This is a mere example of cases. **Results:** The RAPID Service is now business as usual and receives 20+ calls a week from patients, carers, GP’s and SMO’s. Respiratory RAPID has reduced emergency presentation by 54%, there is an average of 1 less presentation a day, and 1 hour less per patient in DEM when comparing financial years pre and post the start date. Consumer satisfaction with service provision has been 100%. The RAPID pathway is 17.5% more cost effective than the traditional presentation via ED. **Conclusion:** The Respiratory RAPID service has provided a conduit across the Sunshine Coast Respiratory Team, community staff, GP’s and patients. It can be hard to get a timely GP appointment which can make DEM seem like the only option, RAPID provides reassurance for our patients.  **Grant Support:**  |