

5.10 Pilot study of a Virtual Ward for Covid-19 and non-Covid-19 acute respiratory conditions in Our Lady of Lourdes Hospital

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Background: The Remote Monitoring programme for Covid-19 provided early supported discharge, reducing length of stay and facilitated admission avoidance. The aim of this pilot study was to expand the programme and evaluate the feasibility of a Virtual Ward for Acute Respiratory Conditions.

Methods: Over a six month period, 25 patients were enrolled in the Virtual Ward. Ages ranged from 16 to 93, with an average age of 55. Referrals came from Respiratory inpatient wards, ED, Respiratory Outpatient Clinics, Staff hub and AMAU/Day wards. Patients were referred for various acute respiratory conditions: Covid-19 (48%), exacerbation of severe asthma (16%), pneumonia (16%), pneumothorax (12%), and exacerbation of pulmonary fibrosis (8%).

Results: Patients were enrolled for an average of 11 days, monitored daily through a clinician portal and provided with education regarding self-management of their condition. Of the patients enrolled, 36% were discussed with the Respiratory team and 12% readmitted to hospital. Upon discharge from the programme, 48% required no further follow up and 36% followed up in Respiratory clinics.

Conclusions: A Virtual Ward for Covid-19 and non-Covid-19 acute respiratory conditions is feasible. It provides a safe and effective option to facilitate early supported discharge and can enable admission avoidance for this cohort.

Keywords: Acute respiratory conditions, virtual ward, early supported discharge

Conflict of interest: The authors declare that they have no conflict of interest.