# Addressing the logistics of delivering H@H care - what can we learn from OPAT services

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## The logistics challenge in paediatrics

- Patient selection & safety netting
- Medicines supply
- Workforce & scheduling
- Alignment across services



Ceftriaxone infusion: 10 mins vs 30 mins

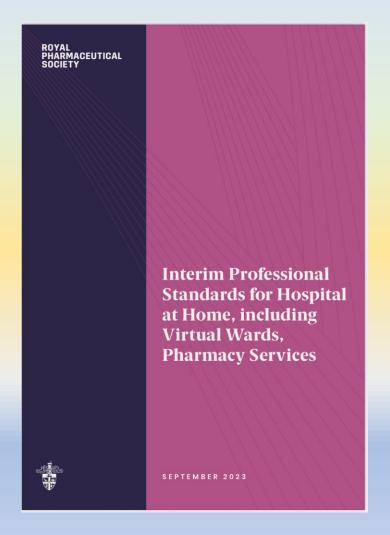
→ Needed alignment across all teams





## Governance, stewardship & standardisation

- Clear protocols and pathways
- Data on outcomes & safety
- Alignment with RPS Virtual Ward Standards







## What is different in a paedatric H@H service?

- Patient selection & safety netting
- Medicines supply
- Workforce & scheduling
- Alignment across services

OPAT	Hospital at Home
Outpatient service focused on IV antimicrobials	Inpatient service delivered at home
Delivered by specialist nurses in the home or via outpatient visits	Substitutes for a hospital admission
Governance rooted in antimicrobial stewardship	Broader scope





# Take home messages

- Logistics matter as much as clinical decisions
- OPAT gives us strong lessons in governance
- H@H is broader than OPAT