

973 The Effect of Implementing A Proactive Care of Older People Undergoing Surgery ('POPS') Team on Length of Stay in Older Surgical Patients

J.M. Bayram, D. Rangar, J. Dikiciyan, I. Smith

Medicine of the Elderly department, Royal Infirmary of Edinburgh, Edinburgh, United Kingdom

Introduction: POPS is a well-established service which supports care of older surgical patients across multiple UK hospitals. POPS teams have been shown to reduce peri-operative medical complications, reduce length of stay (LOS) and improve multiple other patient outcomes.

Method: A POPS team consisting of two consultants, one foundation doctor and one nurse practitioner was implemented to provide dedicated care to older surgical patients on the general and vascular surgery wards of a large urban teaching hospital. Data were collected over 8 weeks from June 2020 - July 2020 following implementation of the POPS team and compared to pre-POPS data from March 2018 - March 2019. All inpatients were screened by age and Clinical Frailty Score (CFS) for appropriateness and received POPS input based on clinical need. Prior to the POPS team, liaison geriatric input was provided by a sole consultant.

Results: The 36 patients from the POPS group had an average LOS of 15.9 days, which was significantly lower than the LOS of 37.4 days in the 537 patients in the pre-POPS group ($p < 0.01$). There were no significant differences in demographics between the two groups.

Conclusions: The implementation of a POPS team significantly reduced length of stay in older surgical patients.