Southern Trust Acute Care at Home Team

Southern Health and Social Care Trust
Dr. Patricia McCaffrey & Eamon Farrell
WHAT IF?
Strategic Drivers

- Fastest growing over 65 population in NI
- Increasing pressure in ED and Acute care
- Increase in people living with LTCs

- Need to think differently about how we use available resource.
- Shift left of resources from acute to community care.
- Partnership work across acute and community, primary and secondary care, voluntary agencies
- No compromise on care delivery

Transforming Your Care 2011
“The right time, the right place”
Donaldson Report 2014

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Southern Trust Approach

- Develop a Consultant led community service to deliver acute, non-critical care in community setting.
- Available to older patients in their own home or Nursing or Residential Home
- Response target of 2 hours from referral to assessment
- Comprehensive Geriatric Assessment based on Silver Book guidelines
Partnerships are the key!

- GPs and GP Out of Hours, Community Pharmacists
- Service Users and Carers
- Acute Services, Laboratories and Diagnostics
- Private Care Homes and Domiciliary Care providers
- Community and Voluntary Sectors
- Acute Care at Home Team
- Northern Ireland Ambulance Service
Meet The Team

Acute Care at Home Team

- 1.0 WTE Consultant Geriatrician / 0.8 Associate Specialist
- 5.0 WTE Specialist Nurses / 0.8 WTE Band 5 Nurse
- 1.0 WTE Physiotherapist
- 1.0 WTE Occupational Therapist
- Support Staff 3.0 WTE HCA 1.3 WTE Clerical
- 0.8 WTE Pharmacist
- Rapid Access to Community Psychiatric Nurse
- As and When Band 5 Bank IV Nurses

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Service Delivery

- Medical cover 8am to 6pm Monday to Friday, new referrals accepted
- Specialist Nurses 8am to 6pm Monday to Friday, on-call to 11pm each evening
- As and when Bank IV staff 8am to 11pm, 7 days a week
- OT, Physiotherapy and Pharmacy Cover Monday to Friday, 9am to 5pm.
- Specialist Nursing cover 8am to 4pm Saturday and Sunday and Bank Holidays and on-call from 4pm to 11pm for review of existing patients only.
Outcome

Acute treatment will be provided and patient will be discharged

Patient will receive comprehensive Geriatric assessment, on-going care needs addressed and onward referrals to appropriate service

Referral Process (Non-Critical Acute Care)

GP Phones 999 and waits for ambulance

GP phones Acute Care at Home and speak directly to RR Medic, triage decision immediately

Care Delivery

Patient taken to ED via ambulance, waits in ED, transferred to MAU prior to admission to ward.

ACHT will assess patient within 2 hours and provide treatment as appropriate

Existing Patient Pathway

Acute Care at Home Pathway
Activity Update

Referral rates per month

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<tr>
<th>Month</th>
<th>Redirected</th>
<th>Accepted</th>
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<tr>
<td>Oct-14</td>
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</tr>
<tr>
<td>Nov-14</td>
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<td>18</td>
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<tr>
<td>Feb-15</td>
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Estimated Acute bed days saved per month

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<tr>
<th>Month</th>
<th>Bed Days Saved</th>
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<tbody>
<tr>
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<td>Jan-15</td>
<td>201</td>
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<tr>
<td>Feb-15</td>
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Key Factors to Success

Clinical Leadership and Partnership working

- Simple Referral process
- Rapid Access to Labs, Diagnostics & Medications
- IT and Electronic Solutions, POCT
- Partnership working with GPs
- IV Bank staff
- Senior Management Support
- Commissioner Buy in
- Effective Clinical Leadership
- Close review and monitoring against agreed KPIs
Service User Feedback

“The Acute Care at Home service has been the best service development in years” Carer’s Forum representative

“Very Rapid Response, within a matter of hours, we were very impressed and felt well supported” Patient’s daughter

“To be treated in her own environment saved my sister’s mind from all the mental turmoil of being moved to hospital” Patient’s Sister

“We found the staff always extremely helpful, they were very attentive to each of the patients the cared for in the Home” NH Manager

“Excellent service, reassuring for GPs to be able to discuss cases with Consultants” GP

Southern Health and Social Care Trust
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