COORDINATE MY CARE
Advance care planning processes that transforms patient care

www.coordinatemycare.co.uk

Prof Julia Riley
Agenda

CMC – what it is

How CMC works

CMC Governance and safety

CMC outcomes and evidence

CMC cost savings

FUTURE CMC National – big data, research platform
CMC **is** an **NHS** clinical Advance Care Planning service that is **centred on the patient**: their clinical needs and personal preferences.

CMC **is unique**: care plans are shared with all urgent care services.

CMC **is** underpinned by a digital solution.

- **Teaching** training, with online modules of how to have difficult discussions and create quality care plans.
- **Governance** – all clinical incidences investigated, reported, and learning applied to training modules and software changes made to mitigate further occurrence. Monitors information governance. Monitors patient safety and risk.
- **Reporting** – quality and outcomes in real time.

CMC **is not** an IT product. It is not an APP.
• **NHS service** for Advance Care Planning

• **Patient centred** The clinical needs and personal preferences are recorded with input from patient and clinician.

• **Unique inter-connectivity** care plans are shared *in real time* with all urgent care services.

• Underpinned by a robust and **secure digital solution**.
  • **Viewed and modifiable** on hand held devices, desktops and mobiles by patient and clinician
  • **Teaching** training, with on line modules of how to have difficult discussions and create quality care plan
  • **Governance** – all clinical incidences investigated, reported and learning applied to training modules and software changes made to mitigate further occurrence. Monitors information governance. Monitors patient safety and risk.
  • **Reporting** – quality and outcomes in real time

• **CMC is not just** an IT product. **CMC is not just** an APP.
Shared Decision Makers

**Patient** Initiates, Edits, Views plans

**Clinician** Adds clinical details + Approves plan

Shared Information
Advance Care Plan

Shared Decision Makers

Patient Initiates, Edits, Views plans

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Shared Information

GOVERNANCE

BIG DATA AI
Patient in control: patient views same urgent care plan on smartphone as seen by all urgent care services e.g. paramedic in the ambulance vehicle.

Patient 111, 999, OOH GPs, GPs, EDs
CMC Governance and safety

- Investigation and reporting of all incidents
- Audit and feedback – driving up creation of quality care plans

<table>
<thead>
<tr>
<th>CMC</th>
<th>Preferences &amp; Prognosis</th>
<th>General wishes/awareness /spiritual</th>
<th>Advance Treatment Plan</th>
<th>Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Plan Fields</td>
<td>1 - PPC</td>
<td>4 - Patient Wishes</td>
<td>7 - CPR Decision</td>
<td>10 - Personal Contacts</td>
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<td></td>
<td>2 - PPO</td>
<td>5 - Family Awareness</td>
<td>8 - Ceilng of Treatment</td>
<td>11 - Contacts - Professional</td>
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<td>3 - Prognosis</td>
<td>6 - Cultural/ Religious</td>
<td>9 - Symptom Treatment Plans</td>
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CMC outcomes and evidence

55,082 CMC plans have been created since August 2010

19% of patients with CMC plans died in hospital (compared to 47% Nationally and 53.6% in London)

Urgent care viewed 37,658 CMC plans (1,099 views in May 2018)

76% of patients with a CMC plan died in their preferred place

Data: 8/06/2018 CMC data warehouse
Patients with a CMC record die where they want to die

- 33976 patients with CMC plan
- 14619 deceased
- 11839 place of death recorded
- 9027 Preferred Place of Death Recorded

Modifiable factors that influence where people die:
- Resuscitation status
- Documentation of Preferred Place of Death

Favours dying out of hospital

Favours dying in hospital

Adjusted Odds Ratio (95% CI)

1.80 (1.61-2.01)

1.84 (1.64-2.06)

Age
- <70
- 70-80
- 80-90
- ≥90

Gender
- Male
- Female

Recorded PPD
- PPD
- No PPD

Resuscitation Status
- Not for resuscitation
- For resuscitation

WHO Performance Status
- 0-1
- 2
- 3
- 4

Preferred place of care
- Hospital
- Home
- Hospice
- Care Home
- Other
CMC cost savings

On average, CMC plans save £2,100 per patient

484,860 patients die per annum in England

Potential savings with CMC

Without CMC

46.9% die in hospital
227,399 patients

With CMC

19% die in hospital
92,123 patients

135,276 x £2,100

£284,079,600

Frontier Economics Evaluation Report
Clinical research data + Patient reported outcomes – Collected via patient portal on CMC

Routinely collected data

Patient identifiable data – connected to the NHS spine

RESEARCH DATA COLLECTION
- Phenotype
- Genotype
- Longitudinal PROMS

Collecting patient data safely and securely
KEYS to success are:

1. **Shared Decision** – Advance Care Planning Commissioned

2. **Shared Information** – Digital and in real time to all urgent care services

New England Journal by Jacey Fortin Dec 4, 2017

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