TAMESIDE AND GLOSSOP DIGITAL HEALTH SERVICE

Creating a culture for large scale Digital change

Peter Grace – Clinical Nurse Lead for Digital Health
Sara Derbyshire – Director of Intermediate Tier Services
LOCAL CONTEXT

- Highest premature death rate for heart disease in England
- Premature deaths from cancer - T&G ranked 133rd out of 150 Local Authorities in England
- T&G life expectancy at birth currently 57.9 years for males and 58.6 years for females - significantly lower than England average.

- In adults, recorded diabetes prevalence, excess weight and drug and alcohol misuse are all significantly worse than the England average
- Smoking related deaths and hospital admissions for alcohol related harm - significantly higher than the England average
The Tameside and Glossop Integrated Care NHS Foundation Trust vision is to:

“Improve health outcomes for our population and influence wider determinants of health, through collaboration with the people of Tameside and Glossop and our health and care partners”
THE PLAN

In the knowledge of local context, how could we…

• Allow people to receive care in their own home? (wherever this may be)

• Reduce unnecessary attendances to the Emergency Department?

• Reduce NEL admissions?

• Support timely discharge from hospital – particularly older people and those at end of life?

• Build culture and relationships to provide clinical advice to health and care professionals in care homes and the Community Response Service (CRS)?

• Link with other care services for older patients in Tameside and Glossop to help support independent living?
PLANTING THE SEED

Road trip to Airedale – To see how they did it!

• Six month pilot (Microsoft Skype technology)

  Limited Funding
  ↓
  One nurse
  ↓
  3 Residential homes, 1 nursing home

• Local instance of Skype hosted at the hospital
• Hospital tablets installed in each home
• Dependency on the care homes own Wi-Fi solution
THE EXPERIENCE

https://vimeo.com/228233865?ref=em-share
WHO ARE WE?

Digital Health - A team of 9 experienced senior nurses with varying clinical expertise, creating a unique blend of knowledge with a digital service.
HOW DOES DIGITAL HEALTH WORK?

- A single virtual door into the many doors of the health service
- A team of Nurse assessors and clinicians based on the hospital site
- Allows CRS, individuals and their carers, care home residents and staff to contact the digital health service using Skype technology
- Facilitates remote, visual consultations for a variety of conditions
- Allows individuals to be treated in their own home where clinically appropriate
WHO ARE WE?

Community Response Service (CRS)

- 35 staff (3 Service Coordinators, 2 Operational Support Officers, 19 Community Response Workers and 11 Emergency Control Operators)
- Over 400 years’ experience between them

Age profile of 3532 Service Users:

- 18 - 64: 11%
- 65 - 74: 18%
- 75 - 84: 36%
- 85+: 35%
HOW DOES CRS WORK?

**Aim:** To support people to remain living in their own home for as long as possible

Research indicates that between 80 and 90% of older people say they want to live in their own homes

- CRS monitors **3532** Clients
- **73.46%** of these individuals have CRS **only**, with no other involvement from Adult Services
- From March 2017 – March 2018, CRS Wardens physically responded to **10,891** emergency calls
- **320** calls from CRS to Digital Health - **117** ED attendances and **158** GP call-outs avoided
WHAT IS TELECARE?

An enhanced monitoring system that supports and complements a package of personalised care
Local partnership working between Digital Health, CRS & Care Homes has reduced demand for urgent care services, particularly for frail older people.

- Digital Health currently provides support to 45 of the 46 Care and Nursing homes in Tameside and Glossop

Since March 2017 the service has

- Received 5000 calls
- Avoided 1518 unnecessary ED attendances (30% reduction)
- Avoided 1398 GP call outs (28% reduction)
SUCCESS TO DATE

• Very successful – **Quality** and finance

• Saved an average of **8** hospital beds per month; financial benefit in excess **£485K**

• Self funding service

• Additional indicative savings circa **£82k** across the Health Economy - preventing the need for use of other services, e.g. GP; District Nursing

• **Future Plans** - How to ‘scale up’ but retain detailed local knowledge?
By working together Digital Health are upskilling CRS & local care home staff;

- Undertake basic observations and take part in health assessments
- Access an Instant directory of services, freeing up time that can be re-provided as direct care for patients/residents
- Reduction in ED attendances from care homes, releases care home staff time
- Reassurance and accepting accountability
- Support with hospital discharges, information and medication
- Reduction in unnecessary NWAS call outs
THE SEED BECOMES A TRIFFID!

March 2107 - Three Residential homes & one Nursing home

May – 6 Month pilot Scrapped - Lets expand, Community response joins

November - 45 of 46 homes now using the scheme

December –GP Call handling
- Ambulatory care OP Clinics

Jan-Reverse Skype service

February 2018 Telehealth For chronic disease Management
- Extensivist service

June-UCP, NWAS 111-999 Pilot

July- rolling out a lifting service with CRS

April 2018 – Migration to local Skype to cloud, TEAMS

scalability
CREATING THE CULTURE

• GP’s and Care Home Managers /Staff
• Engagement events
• Visits to every care home
• Regular meetings
• Open channels of communication
• Listening to concerns – before and during pilot; Ongoing
• Acting on Feedback
• Patient at the Centre of Every Decision
Thank You For Listening