


NHS Vale of York CCG, Overview of Care Home Project


Becky Allright, July 2014

Why is the NHS focusing on care homes?

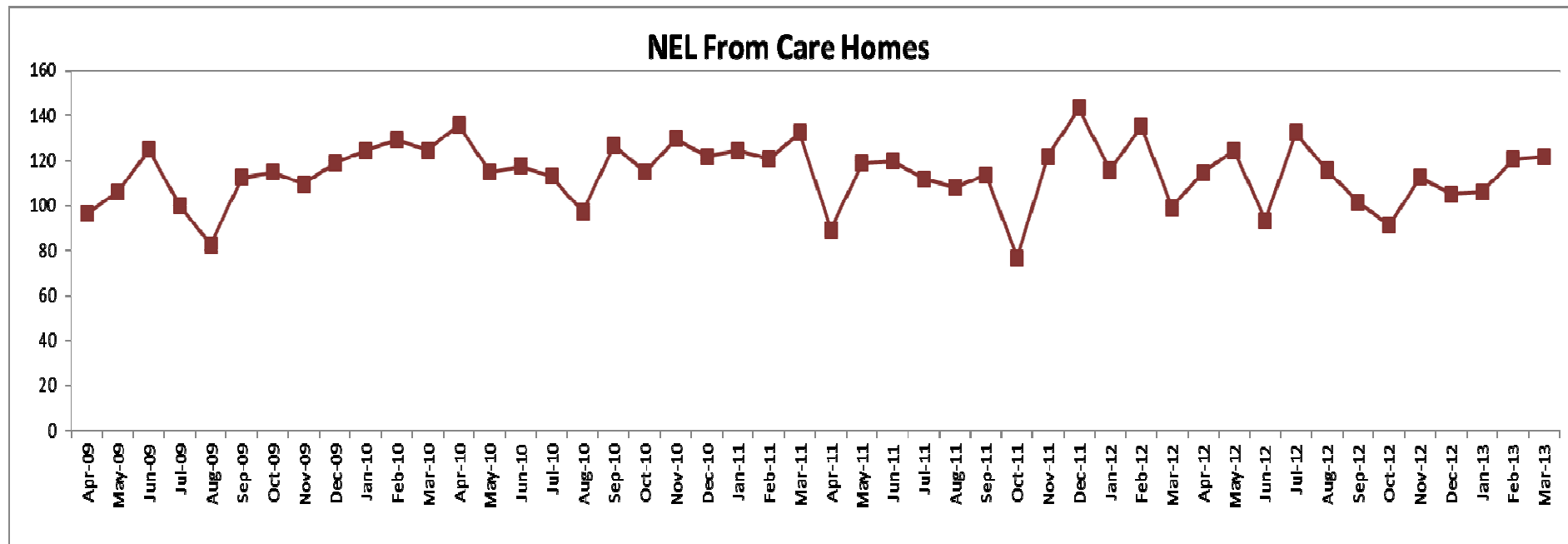
NHS spent over £20 million in 2012-2013 within the care home sector:

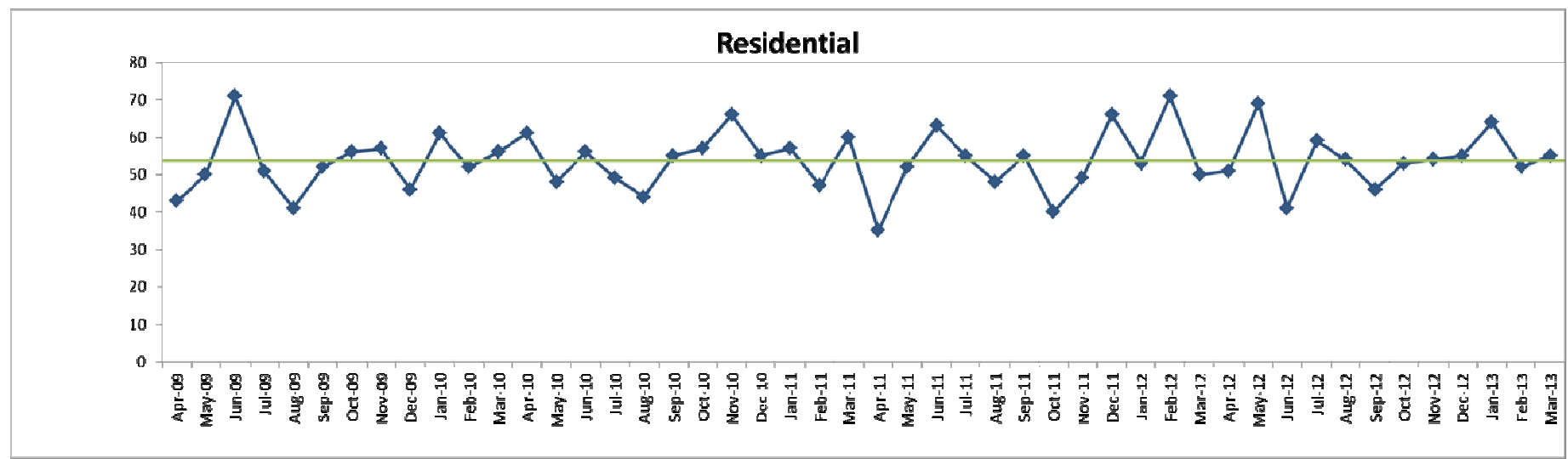
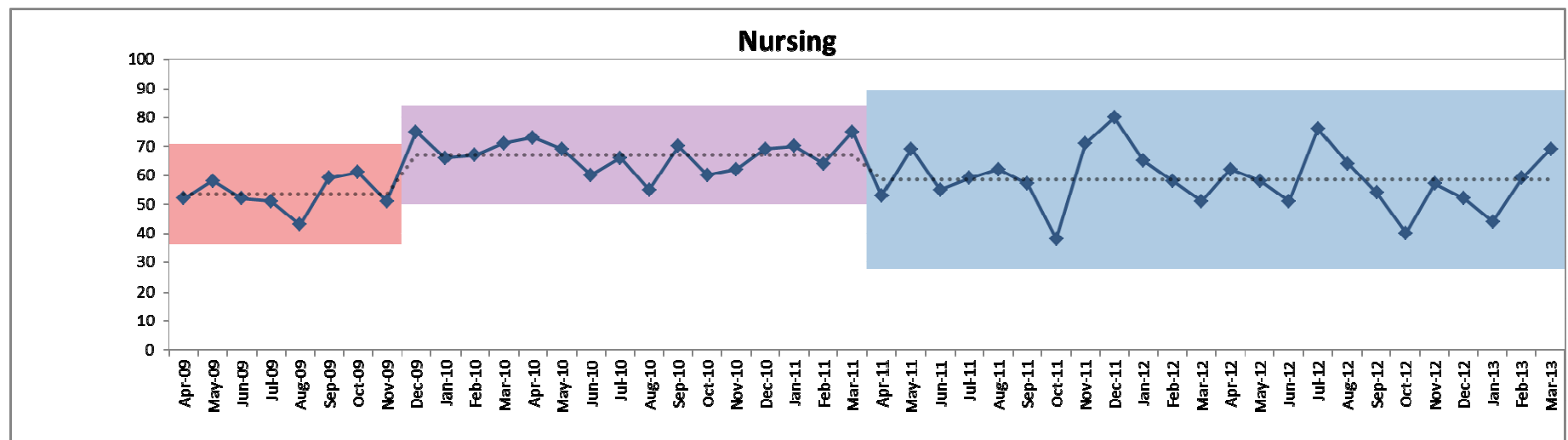
- £288 per emergency ambulance call out, over 1300 admissions (minimum of £374,000)
 - £10 million on Continuing Health Care
 - £4.5 million on Funded Nursing Care
 - £4.0 million Non-elective Hospital care
 - £0.5 million on Fast Track in care homes
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Progress to date

- Urgent Care: Review of Non-elective Admissions
 - End of Life Care: Audit of hospital deaths from care homes
 - Community Care: Development of care homes nursing team: SBAR, Emergency Care Plans, ACP Training
 - Integrated working: Telecare/MDT Working/Priory Medical Group
 - Quality and Improvement: NHS clinical skills audit
 - Workforce Development: ACP Training
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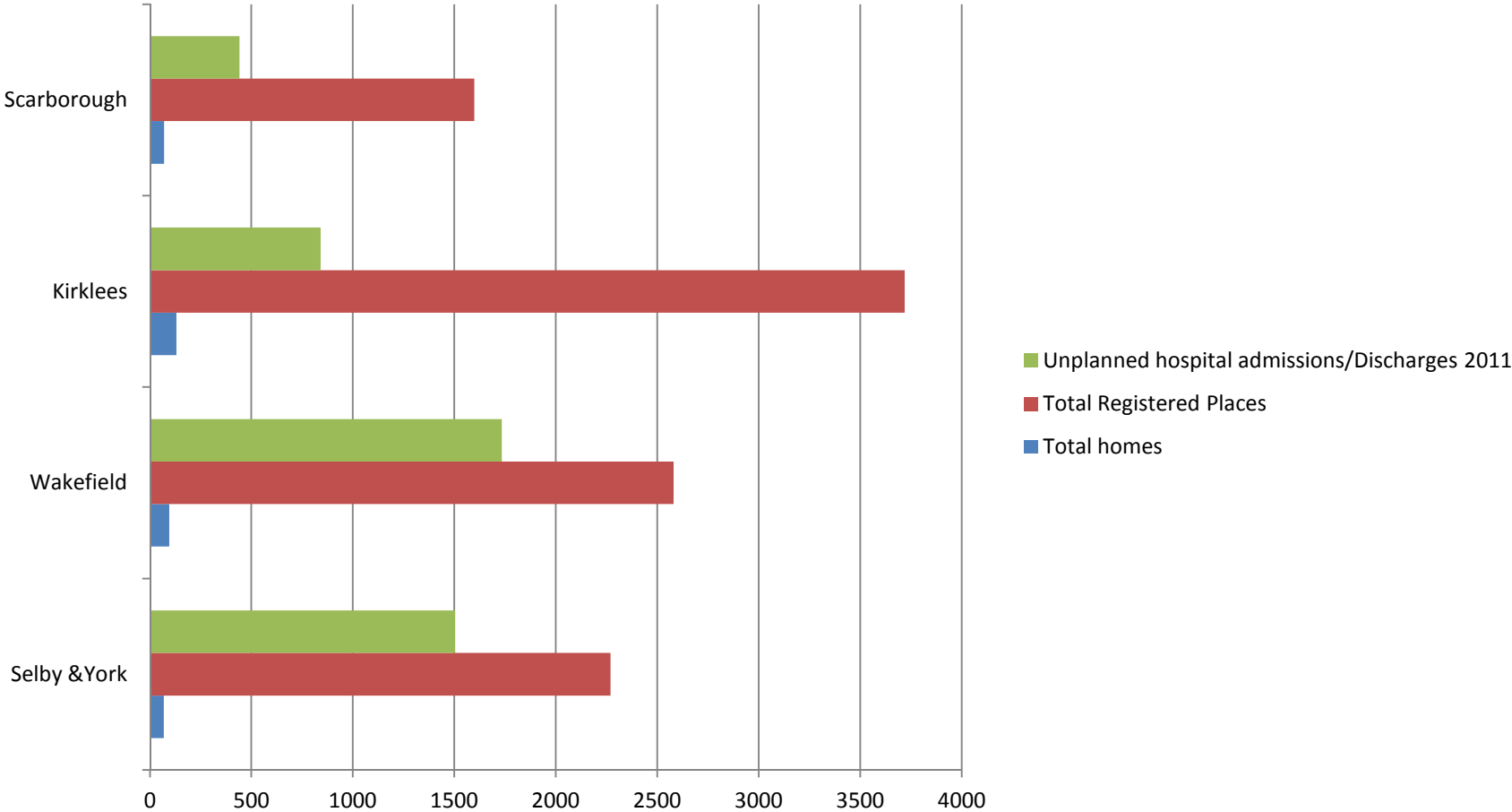
Non Elective Admissions: all care homes 2009-2013





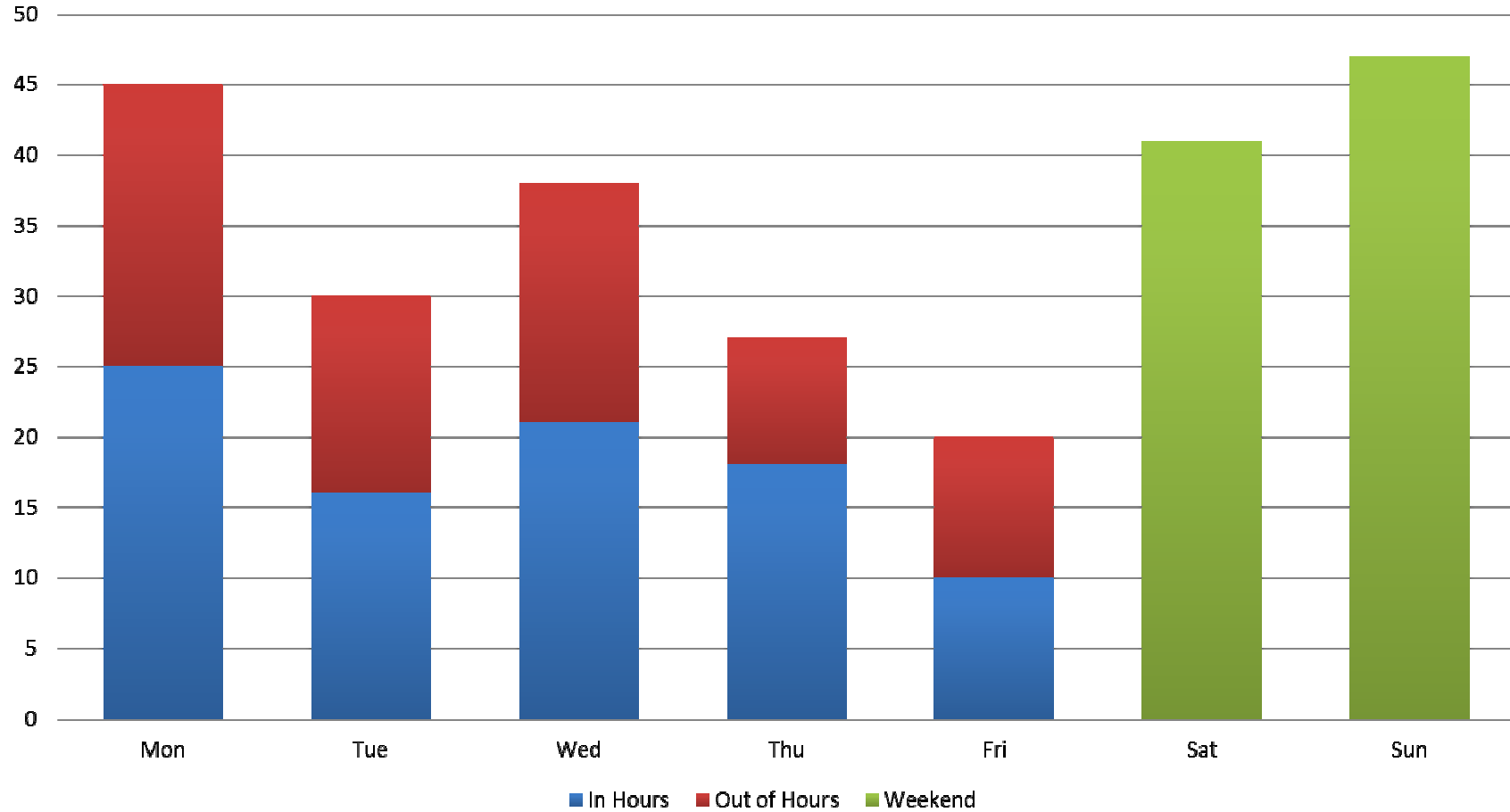
- Graph available for each individual home

CQC 2011 Data



Annex C


Admissions via A&E by day and in/out of hours (Apr – July 2012/13)




Hospital Audit

- December 2012 – November 2013 there were 177 admissions into York Hospital from care homes that resulted in death.
 - In order to analyse the data in more depth a small sample size of 62 case notes were reviewed for deaths occurring between July 2013 – November 2013.
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Findings:

- Average age on admission was 83 and average length of stay was 6 days
 - 45% had a diagnosis of pneumonia or sepsis as a reason for admission
 - 74% of admissions had diagnosis of additional long term pathologies e.g. COPD and cardiac
 - 41% of those admitted had a long-term diagnosis of dementia
 - 43% of admissions were out of 9-5 core hours
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End of Life Care/Dementia

- The CQC's Care Update report in 2012 found that in 78 out of 151 CCG's people with dementia who lived in care homes were more likely to be admitted to hospital for an "avoidable reason" than people without the condition.
 - Four out of five people living in care homes have dementia or severe memory problems, Alzheimer's Society report, "Low Expectations".
 - End of Life care for people with dementia is not always a clear-cut prognosis
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Feedback from End of Life Care Forum with Care Homes

- Education for staff is vital on end of life care
 - Need to agree on “what does good look like”
 - Practical considerations such as equipment, medication, transport are key
 - Avoid outpatient appointments where possible
 - Improve access for care homes to specialist advice out of hours e.g. Scarborough PalCall system
 - Better Care Fund looking at opportunities for integration and development of care hubs e.g. Priory Med Project
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Community Care:

- Booklet developed for staff in care homes to access NHS community services
 - Social Care, CCG and partners now meeting regularly through the care home working group
 - Community Matron service has been developed in 2013-2014 to roll-out SBAR tool, Emergency Care Plans, ACP Training across nursing homes
 - NHS Clinical Skills Audit
 - Medicines Management
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Integrated working to support Care Homes

- Trial of telecare in residential homes to look at falls prevention and improving skincare/tissue viability
 - MDT working group identified pink passport as a way of improving communication
 - Care Homes now a key part of development of York Care Hub, being developed by Priory Medical Group
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Workforce Development

Continuous education programme running currently including:

- NHS Clinical Skills Audit
 - Medicines Management
 - Advanced Care Planning
 - Tissue Viability
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