

# New care models programme – workforce redesign Integrated workforce models case study

# Airedale and Partners – Enhanced health in care homes vanguard

## Telehealth technology and virtual learning

Population: 7,687 residents living in nursing homes and across Lancashire and Yorkshire

### Workforce issues

- Ensuring care home staff were confident using new technology
- Introducing and embedding new ways of working at care homes
- Initial limited senior level 'buy-in' from all partners including budget sharing

#### **Healthier communities**

- Care closer to home
- Minimising attendances

# **Happier patients**

• 40% of patients treated in their home offering timely and convenient service

## Reduced healthcare spend

Potential savings of £3m in 2016/17 (circa 220 Care Homes, 7,500 residents)

#### Motivated workforce

 Care home staff more confident using new technology, which supports them to perform better in their caring roles

## **Background**

Introducing staff to new technology to improve patient care and support their work

In Airedale, the introduction of telehealth technology is improving the quality of life and end of life care for more than 7,000 nursing and care home residents across Yorkshire and Lancashire.

This initiative combines two ways of integrated working:

- 24 hour clinical support to care home patients via a video link to the Airedale digital care hub, and other monitoring equipment
- Virtual training of care home staff to implement a telehealth or telemedicine programme.

Our values: clinical engagement, patient involvement, local ownership, national support

## The challenges...

Care home staff were consulted as to which training modules should be delivered virtually or remotely, these covered:

- Balance classes
- Falls prevention
- Pressure ulcer care
- End of life
- Inhaler technique

There were some initial reservations about this arms-length training, but 63 staff members have now successfully completed the training and can see the benefits of quick easy access to advice for both themselves and patients.

Face-to-face training with an assistant practitioner was also provided to some homes to support them in competency assessment and documentation as well as hands on clinical training on phlebotomy, cannulation and ECG recording.

## Impact on staff and patients...

Telehealth support has produced a sustained reduction in care home referrals to GPs by 40% and ambulance calls by almost 30% over a 12 month period in those homes that use the system. To date, more than 7,500 patients in 220 care homes have benefited from the scheme with a potential roll out to a population of 14,000 in up to 475 care homes across the local health economy.

40% of existing patients are effectively assessed and treated in their place of residence avoiding unnecessary journeys for themselves and clinical staff.

Potential savings for 2016/17, which will be confirmed through the evaluation measurement process of the vanguard programme, are approximately £3 million. This includes £332,800 in GP visits, £1m through fewer ambulance callouts, £1.5m through reduced non elective admissions and £200,000 through reduced A&E attendances.

# Learning and advice...

The virtual training delivered in care homes highlighted some simple but important learning for anyone thinking of taking a similar approach:

- Ensure you have buy-in from all the relevant organisations and they are clear about what telehealth is and the benefits it can deliver, both directly and indirectly. Don't make assumptions about what you think people do and do not know.
- Start 'small' by introducing telehealth in a handful of care/residential homes before expanding, although this will only result in 'small' outcomes.

- Engage with and foster a good relationship with care home staff so they feel part of a collective team
- Agree to pool training budgets and resources as virtual training and learning ultimately benefits everyone, freeing up time and resources
- Ensure contractual levers are used by Local Authorities and CCGs to support the changes ensuring staff make full use of the system and are comfortable using the relevant IT and video link equipment.
- Equipment must be fit for purpose as a number of homes initially complained about connectivity problems as the reason for not taking part in training

# What do health and care professionals say?

Staff at one care home made an urgent video call to the Digital Care hub based at Airedale General Hospital after an 86 year-old resident suddenly collapsed and developed left sided weakness, a facial droop and slurred speech.

Rachel Ford, the nurse on duty at the hospital, said: "I could see immediately from his symptoms it was highly probable the patient had suffered a stroke."

Hospital staff confirmed the patient had a stroke and successfully administered clot-busting treatment and made a full recovery.

Rachel added: "The prompt action of the care home staff meant the patient was given an early diagnosis and subsequent treatment, which prevented a lifelong severe disability."