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Sheffield Teaching Hospitals NHS
NHS Foundation Trust

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In hospital and in the community

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GP Local Enhanced Service (LES) for Care Home Residents

April 2010

Care Homes LES

Outline

1) Background – Sheffield Care Homes
2) Key features of Care Homes LES
3) Context
4) Monitoring
5) Integration

Sheffield Care Homes

- 88 Care Homes
- 3,800 residents

- 88 GP practices
- 1 Acute trust

Why did we need a different service?

2) Key features of the LES

- One GP, one Care Home model
- Weekly surgery
- Annual review
- Reflection and audit

One GP, one Care Home

- Residents offered option to change

- Some large homes have two practices
- Sometimes two GPs share

Weekly surgery

- Regular and convenient time
- Same GP (or 2)
- Unwell residents
- Planned follow ups
- Residents discharged from hospital
- Discuss those seen by A&E, ECP, OOH GP

Annual Review

- Relatives invited
- Long term conditions
- Medication review
- Depression / Cognitive screening
- End of life care planning
- Leads to a written care plan

Reflection and audit

- Discussion of hospital admissions with senior care homes staff
- Change practice if required
- Share learning / feedback centrally if required

- Audit – 30% of payment

How much does it cost?

- £220 / bed nursing, £200 / bed residential
- £154 / £140

- Approx 2 hrs of GP time/ bed/ year
- Less than the cost of a first OPD visit

3) Context

- Seminars for GPs 3 / yr for 2 years
- Community Geriatricians
- Strategic Quality in Care Homes Board
- Care Homes Best Practice Group
- Care Home Support Team
- Clinical Governance - ‘Concern Forms’

Context - restructure

- Primary Care Trust (PCT) 4 → 1
- GP Practice Based Commissioning Groups, 4 → 1
- GP Consortia, 4 → 1
- NHS Sheffield
- Clinical Commissioning Group (CCG)
- Community Services to Acute Trust

4) Monitoring the Enhanced Service

- How is the service working
- Hospital Admissions
  - Challenges of collecting care homes data
- End of Life Care

Monitoring the Enhanced Service

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Annual reviews

- No data available from before the LES

- March 2013
- 91% of residents had an annual review
  (2,811 residents, 4% temporary)

- 3 providers outliers 6%, 31%, 57%

Annual reviews

- 63% have dementia (18 – 100%)
- 87% without had a cognitive assessment

- 30% depression, 81% without screened

- 54% mobile, 73% had standing BP
- 84% medication review in last 6 months

Monitoring the Enhanced Service

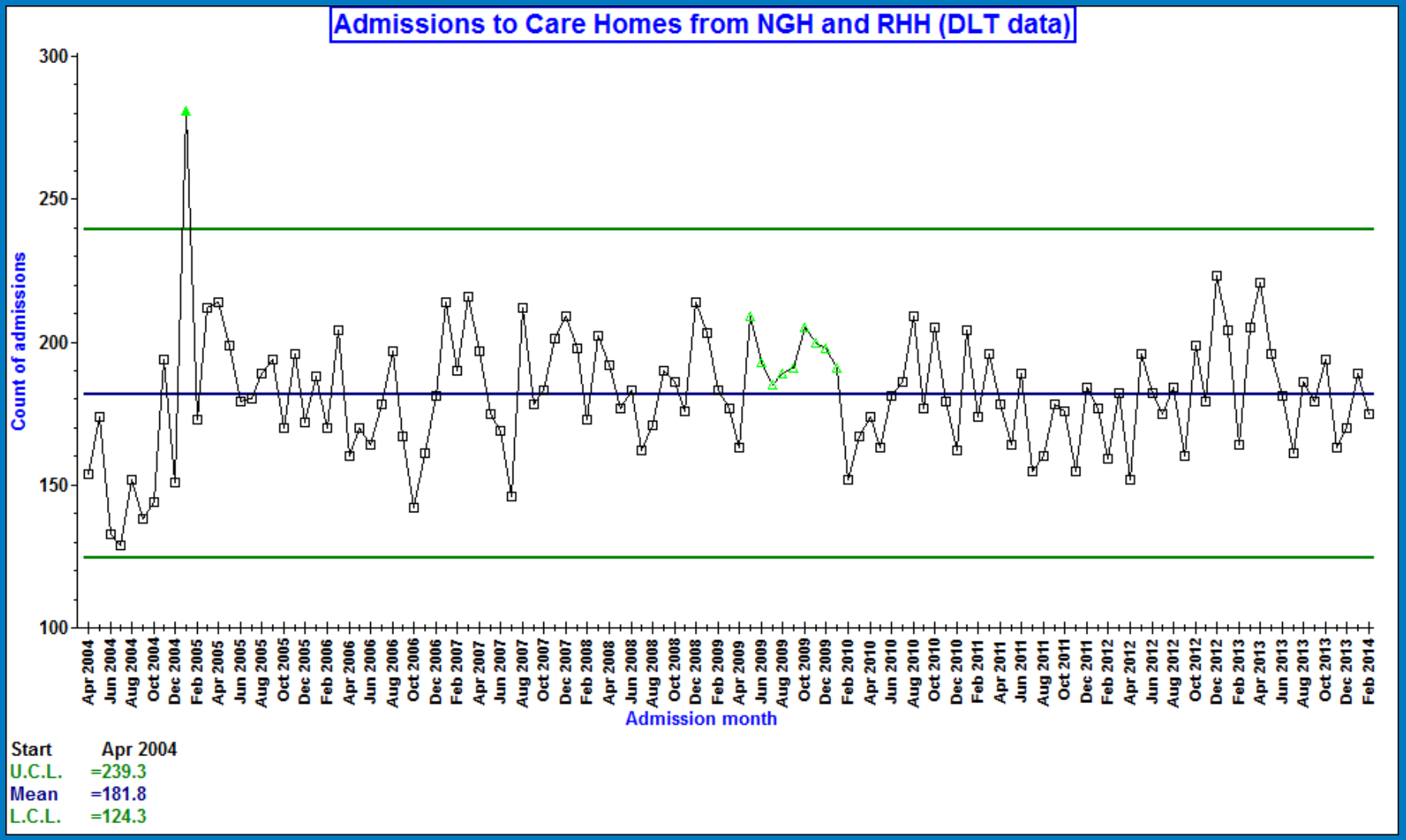
- How is the service working
- Hospital Admissions
  - Challenges of collecting care homes data
- End of Life Care

Data Challenges

- Routine data vs. research
- Pilot vs. citywide
- Accuracy of data
  - Postcode
  - Registering too early
  - Respite / intermediate care
- Number vs. cost of admissions

Admissions data

- Pilot (2008/9, 14 homes, 580 beds)
  - 9% reduction in admissions compared to 07/08
  - (3% reduction in matched homes)
- Citywide 2010
  - Apr - Oct 2011 15% reduction in admissions compared to 2009
  - Costs reduced by only 8%


Admissions to Care Homes from NGH and RHH (DLT data)
Count of admissions
300
250
200
150
100
Admission month
Apr 2004
Jun 2004
Aug 2004
Oct 2004
Dec 2004
Feb 2005
Apr 2005
Jun 2005
Aug 2005
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Aug 2012
Oct 2012
Dec 2012
Feb 2013
Apr 2013
Jun 2013
Aug 2013
Oct 2013
Dec 2013
Feb 2014
Start Apr 2004
U.C.L. =239.3
Mean =181.8
L.C.L. =124.3

Monitoring the Enhanced Service

- How is the service working
- Hospital Admissions
  - Challenges of collecting care homes data
- End of Life Care

EOLC information

- Year 1 2010(review 10 plans, 420 residents)
  - 62% residents had EOLC discussion
  - 57% DNA CPR form
- Year 3 12/13 (review current residents, 2,811)
  - 80% residents had EOLC discussion
  - 60% preferred place of death recorded
  - 72% DNA CPR form

EOLC information

- Increase in proportion of deaths in care homes (12% in 2006 to 17% 2013)
- Data from 2004 – 08 on place of death
  - Median of 71% of residents dying in the nursing home
- Plan to repeat for 2010 - 2014

EOLC information

- Hospital admissions 11/12
  - 17% died
  - 6% died within 3 nights
- Of those that died
  - 30% of deaths within 2 days
  - 55% within a week

Integration

- Massive improvement in working relationships
- Ownership
- Increased understanding of the challenges faced by the care home

Thank you

How did we start

- One practice, 2 care homes
- 2008 Pilot, 14 care homes, 2 years
- 2010 Citywide, 88 care homes
- Funded until 2016

How has the scheme changed

- 2010/11 £250/ bed, audit at 6 months
- 2011/12 audit, prescribing, change to paperwork
- 2012/13 reduced payment, 15% linked to reduction in hospital admissions, audit
- 2013 SystemOne template
- 2013/14 Palliative Care, Medication meeting, hosp admissions reflection

Care Homs Support Team

- Citywide Training Programme
- Individual support to homes
- Care Homes Best Practice Group
- Quarterly Newsletter
- Managers Forum
- Task groups / link worker groups

What else do we know about admissions?

- Analysis of 2011 /12 admissions
  - 74% of residents admitted had only one admission
  - 100 people ≥ 3 admissions
  - 8% of residents account for 20% of admissions

What else do we know about admissions?

- Notes review admissions Apr – May 07
  - 20% 999 calls, Health care advice in 79%

- Event forms Feb – Jun 2010
  - 24% 999
  - 66% Health care advice (34% ECPs)
  - 7% considered inappropriate