

# South Eastern Trust Virtual Ward (Colligan 2015)

## Inputs

### Investment

- › Funding - total set-up cost for the Virtual Ward was £32,975
- › Direct – £32,975 broken down:
  - Case management course x 2 staff,
  - Nurse back fill to enable attendance
  - IT equipment
  - Development of leaflets
  - Service development, implementation
- › Indirect – no extra cost as recruitment of 2 wte Co-ordinators from within Trust
- › Office space, desks available in Trust

Running / operational costs  
Direct - £566,273 over 3 year period  
Indirect – Non-medical prescribing, included in the PC prescribing budget

### Resources

- › Staff - 3 x Band 7 Virtual Ward Co-ordinators
- › Additional DN and AHP input, particularly Physio Band 7

### Other Resources

- › Overheads and on-going management costs
- › Mobile phone costs

## The Service

### Journey through Service

- › Patients with long-term chronic conditions respiratory, heart failure and diabetes identified by GPs and referrals from AHPs, DNs and Social Care
- › Patients enrolled onto Virtual Ward
- › Case Co-ordinator conducts initial screening to assess suitability and gets verbal consent.
- › Personalised care plan developed in partnership with the patient.

### Practical support

- › Single point of contact for care / advice
- › Patient 'flagged' so easily identifiable as Virtual Ward
- › If Patient becomes acutely unwell contacts Virtual Ward Co-ordinator who provides a timely response and clinical assessment and contacts GP
- › Treatment management and case planning
- › Intensive home support through integrated Health and Social Care service

### Activity/delivery

Over 3 year period there were 447 episodes of care with 6,053 contacts recorded by the Virtual Ward Co-ordinators

## Summary of Benefits

### For service user i.e. patients with long term chronic diseases

- › Avoidance of hospital admission
- › Reduced risk of potential HAI
- › Improving patients' quality of life by remaining at home and positive impact on carers
- › Patient Satisfaction Survey indicated a very high percentage satisfied with quality of care and greater confidence in managing their own condition.

### For South Eastern Trust

- › Reduction in A&E attendance
- › Avoidance of hospital admissions
- › Facilitation of earlier hospital discharge, improving patient flow
- › Saved bed days, 4547 over 3 year period
- › Saving in running costs of £8,804,529 over 3 years

### For staff

- › Increased expert knowledge and clinical skills in supporting patients with complex chronic disease
- › high level of satisfaction at being at the forefront and developing this innovative service

### Opportunities for service development

- › Learning from Virtual Ward taken forward to develop 24/7 Enhanced Care at Home Model (ECAH) through Integrated Care Partnership
- › Model funded by Local Commissioning Group
- › Working with IHI using a Triple Aim approach