

BLMK Footprint

- Our 'footprint' is Bedfordshire, Luton and Milton Keynes (BLMK)
- We have 12 NHS organisations and 4 local councils working together
- Our population is just under 1 million
- In 2016/17, our combined annual budget for health and social care is £1.43bn



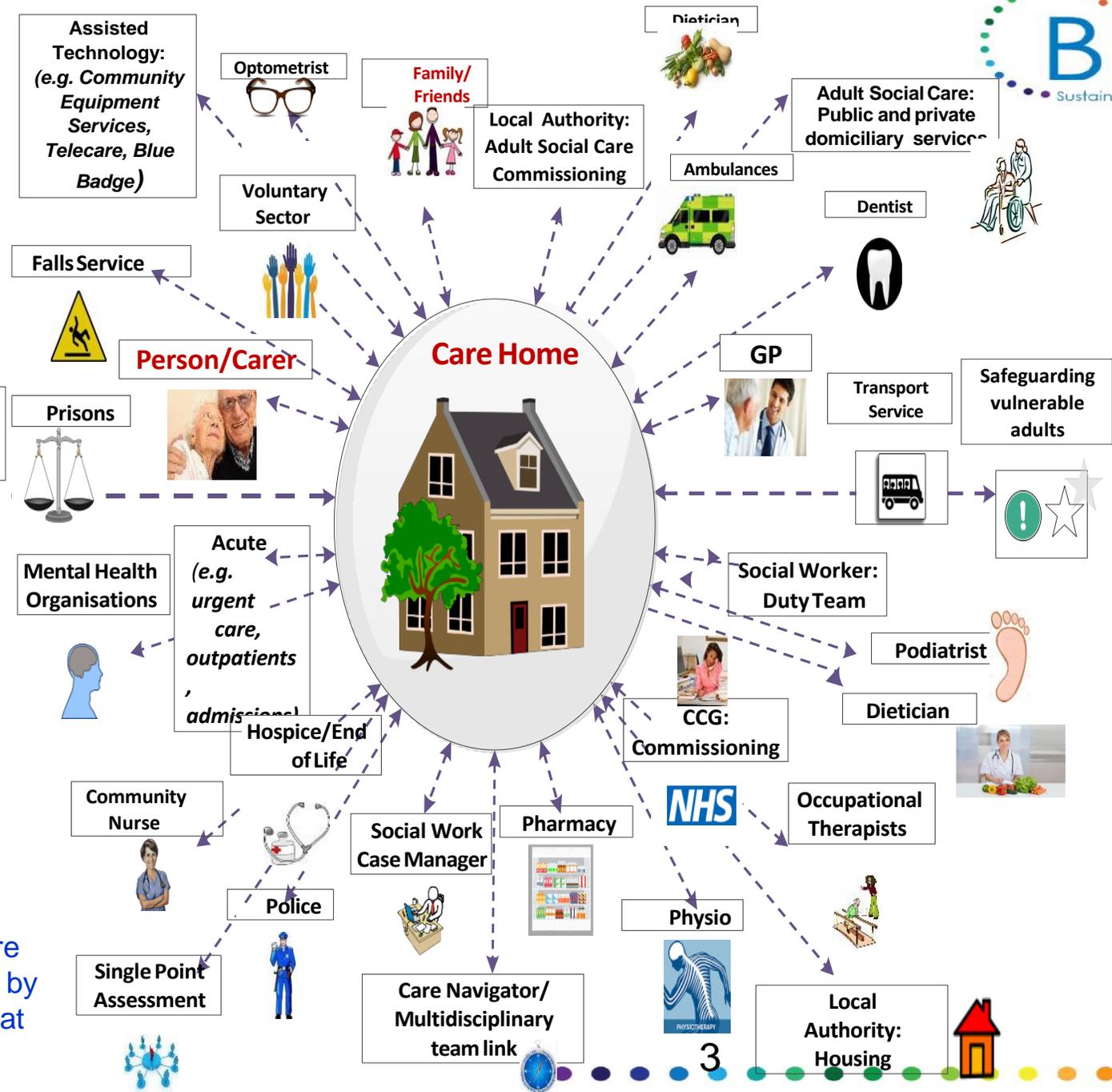
Enhancing health and care in Care Homes

– a system priority

- Getting a common understanding
- Visibility in health and social care system, that the nursing and residential care home sector is a crucial. It is often poorly supported by the NHS.
- In BLMK there are 227 residential and nursing care homes, with 5,799 places, **almost four times the bed capacity in BLMK’s hospitals.**

Region/Local Authority	Care Homes	Care Home Places	% Population +65	Care Home Places/1,000	Care Home places/1,000 population +65
England	16,716	416,597	16%	8.7	53.3
Central Bedfordshire	58	1,589	16%	6.2	39.8
Bedford	77	1,630	16%	10.4	65.5
Luton	42	1,129	12%	5.6	47.3
Milton Keynes	50	1,451	11%	5.8	52.7
BLMK total	227	5,799	N/A	n/A	N/A

Some of the information flows with Care Homes.



Collated from numerous Care Home workshops undertaken by the Social Care Programme at NHS Digital.

Una's story



- Una lived in a care home and had dementia
- She had a number of complex health needs
- Una was taken to A&E six times in the months before her death. She found these visits distressing and disorientating, and on many of those occasions she could have been care for more effectively elsewhere.

We are working closely with care homes to better coordinate health and social care for their residents to ensure they receive appropriate, timely care closer to home. This includes developing care plans and medication reviews for residents to ensure we manage and treat illness better.



Care Home Digitalisation

Bronze

- Establish baseline of care technology
- Ensure all care homes have good WiFi access, to enable care professionals remote access to their clinical systems on site at a care home and use of telecare facilities.
- Roll out secure email (nhs.net), to enable secure basic sharing of information to/from care homes, GPs, Community, Acute, Ambulance

Silver

- Access to a clinical system (e.g. SystmOne) for care home staff and care professionals including Hospital, Ambulance
- Better use of technology eg telemedicine - how could we utilise models such as Airedale model, across STP.

Gold

- **Electronic access to shared care records, sharing care plans and EOL advance care plans, linked health & social care datasets etc**

Investment

- Initially joint bid with Central Bedfordshire Council to LGA
- Better Care Fund
- ETTF (NHS Digital)

Funding will allow BLMK to move from 10 in Luton, 3 in Central Beds to every home in BLMK

Progress In Luton

- **Progress with Bronze Level for Luton**
 - **Access to secure email**
 - All nursing and residential care homes in Luton have undergone IG Training.
 - IG Toolkit has been submitted for 10 targeted homes
 - Secure email (NHS net) rolled out to 7 of 10.
 - Care home site audits have been carried out to populate an inventory of WiFi access and hardware needs
- **Next StepsSilver**
 - Access to SystemOne for care home staff and care professionals including L&D Hospital, Ambulance
 - Better use of technology eg telemedicine –

Lessons learnt so far

- Homes want to engage
 - take time and use all the usual networks
- Part of an overall approach to enhancing health care in care homes
 - have a narrative (resident story)
 - technology doesn't deliver the change without a systematic approach
- Partnership working
 - CCG, Council, STP
 - Overarching approach for BLMK with every 'place (Council boundary)' developing plan



Lessons learnt so far

- IG toolkit – need to support
 - Dedicated training with on-going support
 - Peer support network for care homes

Problems

- IG toolkit
- Change of management and ownership of homes
- Delays in the module from the GP system
- Technical solutions too costly and need for dedicated secure networks

Successes

- System focus and co-ordination
- Clarity of direction – investment
- GPs engaged in change – organising differently and utilising digital solutions such as e-booking of appointments
- Technical solutions that are simple to use

Sustainability

- One off investment with homes
- On-going support for technical solution from CSU
- On-going IG help from Quality Assurance team
- Homes expected to pay on-going costs
- Part of contract and monitored by Quality Assurance team

Conclusion

- Have we made a difference?
 - Some emerging evidence it's making a difference to resident transfer to hospital.
 - Homes increasingly enthusiastic
 - GPs increasingly supportive