

Patient at Home Service – Successfully maintaining a Shared Care agreement to release bed capacity



Project aim

Our aim was to improve the management and flow of patients with long –term IV antibiotic requirement. We wanted to support the management of their care in the community by The Patient at Home Service and the Community Nurses under a shared care agreement .

Project team

Thilo Pillay (Senior Pharmacist)
Noriko Conday (Pharmacist)
Professor Sefton
Patient at Home Doctors / Nurses
Community Nurses

Timeline for delivery

From: Jan 2018 To: Present – On-going

Measures

Previously the patients that were discharged were transferred to the district nurses with a complete course of IV antibiotics but missing the monitoring in the community. Now we can achieve weekly monitoring and supply medication on a weekly basis hence reducing waste.

Tests for change

We have achieved a better experience for the patient because we are able to provide a comprehensive holistic care package and a dedicated clinical point of contact . We are able to release bed capacity , reduce the occurrence of complications , thereby reducing re-admissions and support the patient with health education.

Results

We are continually enhancing continuity of care, improved patient experience, maintaining beneficial communication between all practitioners involved in patients care, monitoring patient compliance with treatment, facilitate earlier discharge and achieve admission avoidance for chronic conditions. To date we have managed 54 patients in the community. One example where we have supported an outstanding change in alignment to the shared care agreement, is the beneficial outcomes related to diabetic foot patients. In this patient cohort we have supported the reduction of amputations because we have successfully managed their antibiotic care in the community.

Learning and next steps

Our next step would be to support the training and enhancement of skills sets of District Nurses to enable them to see a wider cohort of patients in the community from PAH with long IV requirements .

