A Community Virtual Ward Model to Support Older People in the community who have complex medical & social care needs

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In 20 years, 1 in 5 people walking down Grafton Street will be over 65
By 2050, Healthcare costs relating to older people will rise from 6% to 11% of GDP.

Every year from now until 2021, an extra 818 additional people will need nursing home care (only 300 places created in 2015).
The Problem:
Hospitals have become the default solution
50% of bed days are for older persons

- An average length of stay for a frail older person with complex care needs >70 days
- 11% increase in >75s presenting to ED 2016 in North Dublin
- 2015 21% increase in trolley waits

An unsustainable model of care
Solution: Connected Community Care

€69-100 per day
€485 per week

€800 per day
€5,600 per week

Home care approx. 10% of Hospital Care costs
Why a Community Virtual Ward (CVW)

- Assists in identifying those at risk of a hospital admission and those at risk of deterioration
- Supports the client to remain at home
- Supports integration of care
- Aims to encourage MDT engagement/interaction
- Able to be implemented within the service infrastructure
- Could be overseen by a Case Manager
Working Across Service Boundaries

Primary Health Care Teams
Community Intervention Team
Home Care Agencies
Community Pharmacy Services
Voluntary Organisations

Community Virtual Wards
Day Hospital Older Persons
Community Palliative Care
Community Psychiatry

Acute Services
Frailty Intervention Team
Emergency Department
Bed Management
Specialist Gerontology
Specialists Chronic Disease
Community Virtual Ward Model

Gerontology Services → Clinical Case Manager → Assessment

- High Risk: Red
- Mod Risk: Amber
- Green: Low Risk

Virtual Ward Admission → Triage

Community Virtual Ward Model

Clinical Case Manager
Results:
- 81% reduction in bed days
- 87% reduction in ED presentation.
- 52 Admission avoidances (82% were in the red VW)

Total saving for 2015 - €1.6 million
Community Virtual Ward

**CVW Advantages**
- Efficient
- Streamlined
- Connected
- Integrated
- Safe
- Reliable
- Cost Effective
- Robust

**CVW current problems**
- Delay in information (up to 2-4 weeks)
- HCP unable to share real time information
- Out of hours services not connected (unnecessary hospital admission)
- ED unable to see VWs
- Longer LOS than needed in the VWs
- Predictions of risk (events driven rather than risk score driven PhD research examining this within RCSI)
Solution VW digital health care technology

Virtual Wards

TRIAGE

RED

AMBER

GREEN

Timely risk stratification

Team clear on primary interventions & long term plan

Trend overtime

Assist in Decision Making

Response & ongoing interventions

Safe for discharge usual care

Shared Care Record
Thank You

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