



Leicestershire Partnership
NHS Trust

LLR Virtual Wards Programme



www.leicspart.nhs.uk

What is a virtual ward and how do they work

Virtual wards allow patients who would otherwise be in hospital to receive acute care, monitoring and treatment at home

Admission avoidance and/or early assisted discharge



Set up

Patients are given **personalised support to set up and use the technologies**, including a patient user guide, a demo session as part of their hospital discharge, telephone and video calls and even socially-distanced, face-to-face training at home if more help is needed.



Monitor

A management plan is discussed and agreed with the patient and they submit answers to **a set of questions and take vital measurements relating to their condition**. They upload this data which feeds through in real-time to the platform's central dashboard.



Alert

Parameters for individual patients based on their baseline data informs an algorithm in the system which **automatically flags patients who may be at risk or who are deteriorating using a red, amber, green health status**.

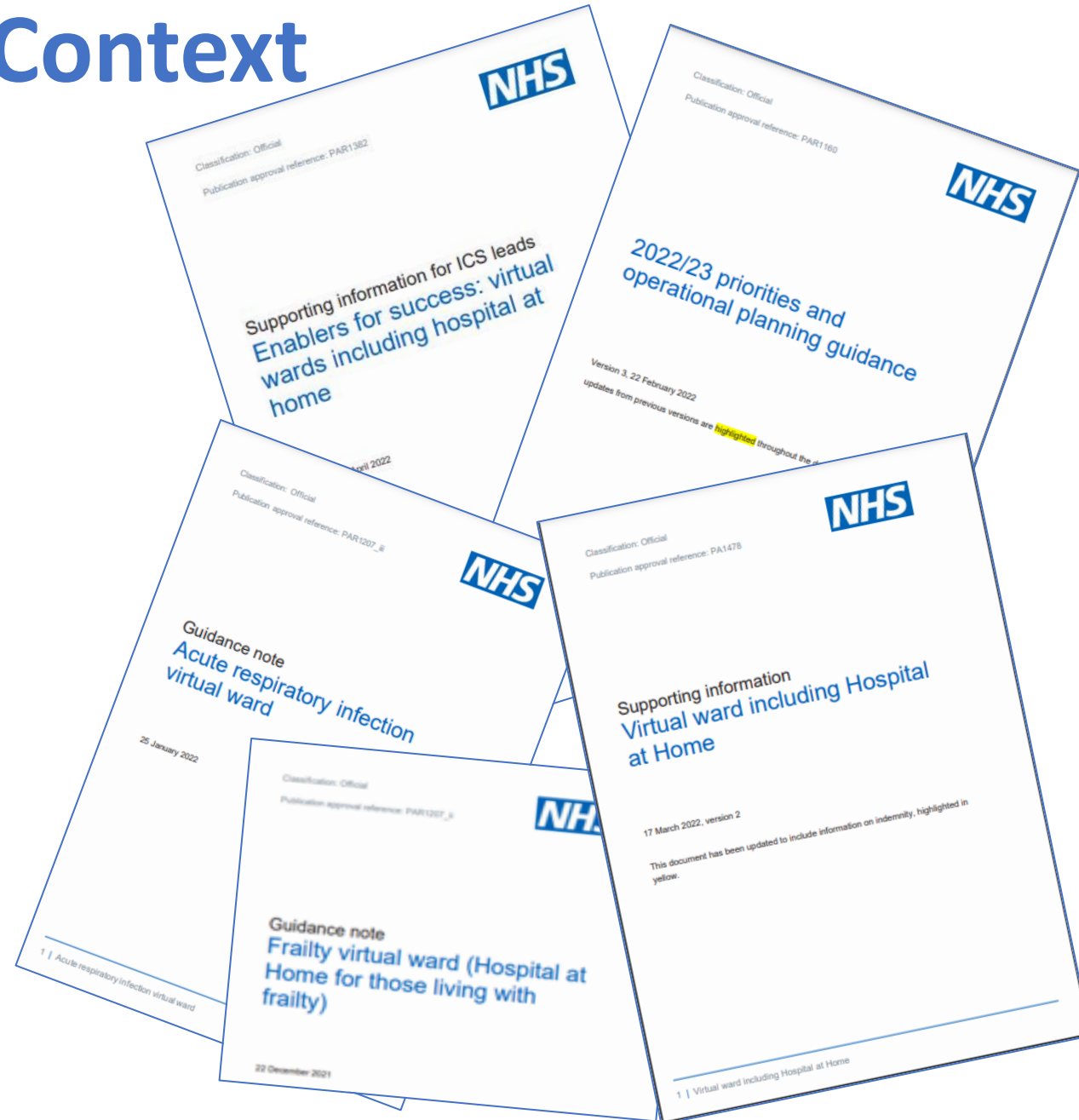


Intervene

A **multidisciplinary team**, made up of clinicians, nurses and physiotherapists, then work together to diagnose and treat the problem and prevent an unplanned hospital admission wherever possible.

Virtual Wards National Context

- Recent NHSE guidance expects all ICS to extend or introduce virtual wards
- Ambition of delivering 40 to 50 virtual ward 'beds' per 100,000 population by December 2023
- As a minimum systems need to implement virtual wards for acute respiratory infection and frailty
- £200 million of funding available in 2022/23 and then a contribution of £250 million match funding in 2023/24
- Systems required to develop and submit two-year delivery plans including proposed virtual wards, financial plans, projected workforce staffing and expenditure



LLR Virtual Ward System Plan

The LLR virtual ward plan has been submitted and approved by NHSE for £3.4million funding in 2022/23 and £5 million in 2023/24

The proposed LLR virtual wards are:

| Virtual Ward | Start Date | Initial Beds | Total Beds |
|----------------------------|-----------------------|--------------|------------|
| Atrial Fibrillation | Operational | 5 | 15 |
| Diabetes | Operational | 7 | 30 |
| Acute Respiratory*^ | Partially Operational | 60 | 150 |
| Heart Failure* | September | 5 | 40 |
| Colorectal Surgery | October | 16 | 16 |
| Haematology | October | 10 | 10 |
| Ambulatory Jaundice | October | 10 | 10 |
| Frailty* | November | 20 | 100 |
| Palliative Care* | November | 10 | 10 |
| Post-MI | November | 8 | 8 |

* Integrated LPT virtual wards

^ Includes COPD*, Covid-19*, Asthma*, Community acquired pneumonia and Bronchiectasis



LLR Virtual Wards – Current CHS Position

COPD and Covid Virtual Ward

- Fully operational (see outcomes slide)
- Working to develop step up model from SDEC / CDU

Asthma Virtual Ward

- Recruitment in progress for LPT nursing/AHP staff
- Asthma Consultant in post
- SOP completed and question set created and being tested
- Will be operational next month

LLR Virtual Wards – Current CHS Position

Heart Failure Virtual Ward

- SOP in development and question set being adapted following testing
- All LPT staff in post
- Will be operational next month

Palliative Care Virtual Ward

- Recruitment in progress for LPT nursing and admin staff
- Consultant post out to recruitment (LOROS post)
- SOP in development and question set being created
- Will be operational in November

LLR Virtual Wards – Current CHS Position

Frailty Virtual Ward

- Weekly clinical and operational project group established
- Current clinical model and number of beds under review
- Unable to recruit to consultant geriatrician post
- New Advanced Clinical Practitioner posts in LPT being advertised
- All other recruitment in LPT (nurses/AHPs/HCSWs/admin) to commence
- Still aiming to be operational in November
- **Main risk for the LLR VW programme**
- Alternative ideas for further VWs also being sought

CHS Virtual Wards – Outcomes

| COPD Virtual Ward | | Number |
|-------------------------------------------------------------------------------------|-----------------------------|--------|
| Patients currently active | | 11 |
| Total number of patients who have accessed the COPD Virtual Ward (since March 2022) | | 140 |
| Discharges | Completed | 107 |
| | Patient requested discharge | 16 |
| | Non-concordant | 4 |
| | Not suitable | 2 |
| | Death | 0 |

- Focus now on increasing bed utilisation
- Developing “step up” pathways
- Specific respiratory winter planning work underway across LLR

CHS Virtual Wards – Outcomes

Covid Virtual Ward

- **393** patients have accessed the CVW
- In the initial cohort (218 patients) the re-admission rate was reduced by **50%**
- **319** acute bed days saved in the oxygen weaning cohort with an estimated **£127,600** cost saving to the system
- Average patient satisfaction score in this cohort was **9.9/10**

<http://dx.doi.org/10.1136/thorax-2021-BTSabstracts.128>

- Mean savings of **£1700** per patient and net savings of over **£500,000** on the CVW

<https://doi.org/10.1101/2022.06.27.22276736>

Embedding Virtual Wards and the Future in LLR

Plan to increase virtual ward beds across all specialities to have approx. **280** beds by October 2022

Mobilise further beds to have **500** virtual ward beds across all specialities by October 2023

With the bed days saved from the virtual wards they are expected to release **138** acute hospital beds

Full review and ongoing analysis of the existing proposed virtual wards and their effectiveness

Questions

