



Central Manchester University Hospitals



NHS Foundation Trust

Managing Complex Continuing Healthcare Patients

-

A Cohorted Approach





Like many we were...

- Struggling to achieve and sustain the Emergency Access Standard
- Having increasing attendances at A/E inconsistent with national trends
- Had some concerns over patient experience





A New Approach Needed

- Overhaul of the Urgent Care Model
- Weekly meetings to discuss individual patients LOS
- Continuing Healthcare (CHC) system introduced 2008, with a predicted increase in length of stay





A New Approach Needed

- Undertook work to establish the number of patients falling into the CHC requirement
- Negotiated and secured accommodation with a local trust
- Made it fit for purpose





Implementation

- Agreement with commissioners to fund a cohorted approach to complex discharges with CHC issues
- 10 beds opened in April 2008 and a further 26 opened in August 2008
- A dedicated unit





Implementation

- A dedicated multi-disciplinary team with a Lead Consultant and Lead Manager/Lead Nurse
- Training and specialist knowledge focused in one place
- Active management of patient group/length of stay





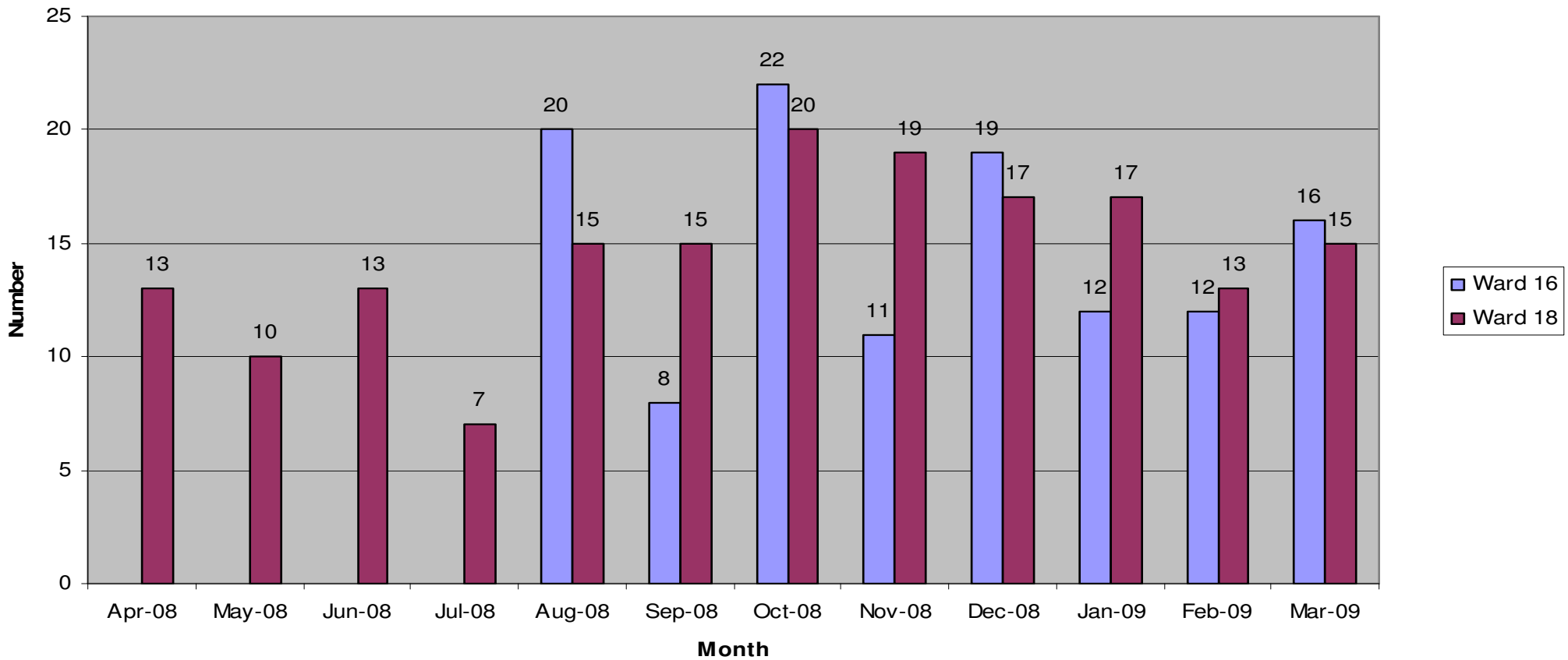
Access Criteria

- No longer requiring Acute Medical care or awaiting a Clinical Specialist service
- Not suitable for Intermediate Care
- Unable to be discharged within 48 hours



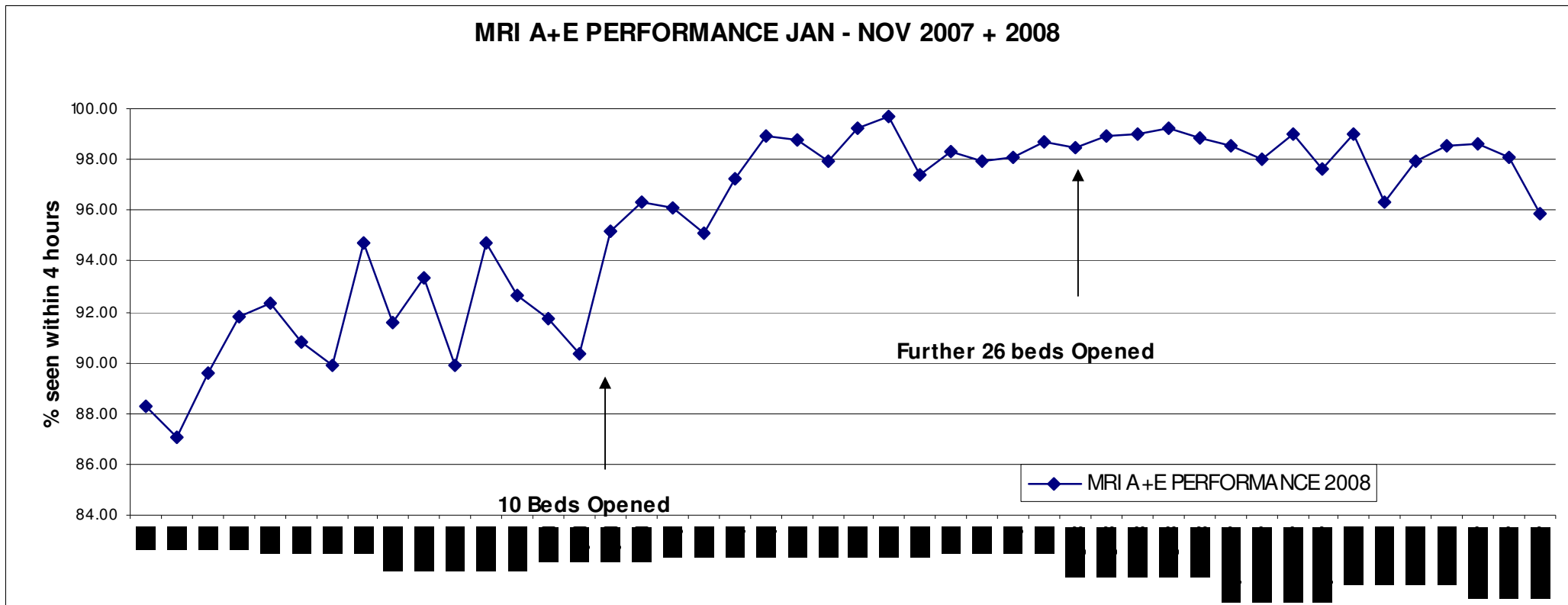


Admissions to the Unit





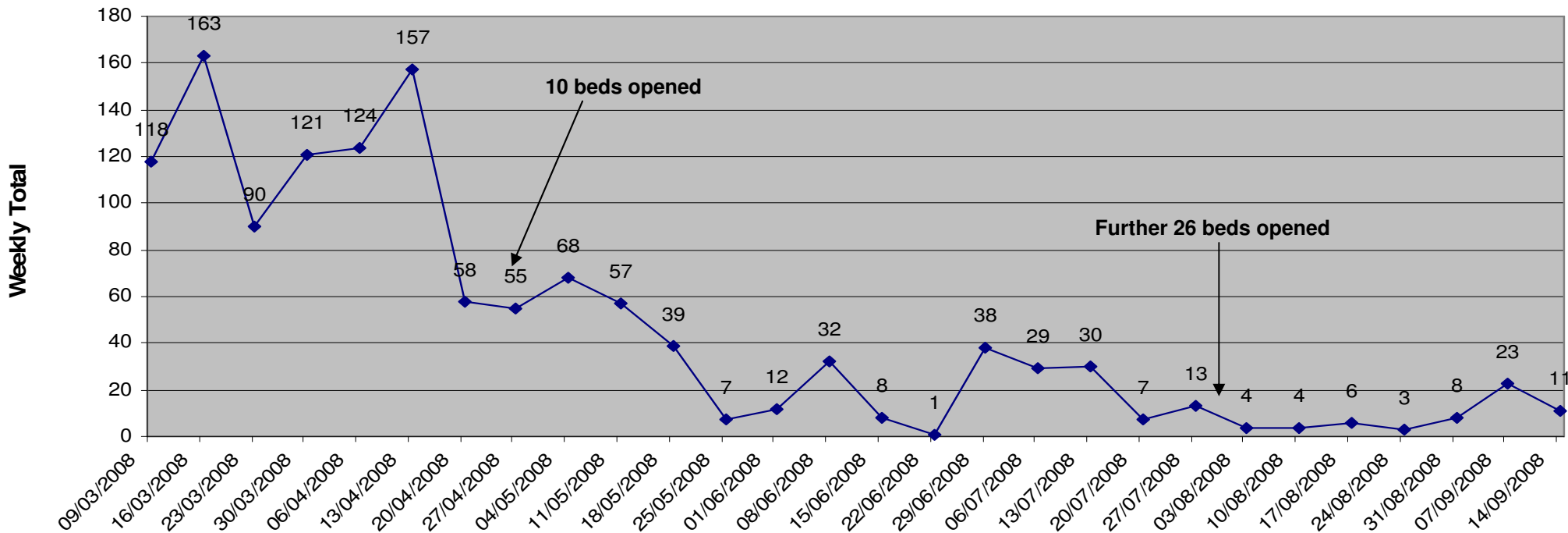
Effect on the system





Effect on the System

MEDICAL BREACHES 3-3-08 to 14-9-08





Conclusion

- Urgent care access standard performance linked to the management of these beds
- Focused expertise in one area has benefitted patients, carers and the organisation
- Excellent feedback from patients, relatives and other Health Professionals in terms of care provided

