

Introduction

- Blackpool Teaching Hospitals [BTH] NHS Foundation Trust is a large district general – teaching hospital with two tertiary centres [cardiac and haematology] in north-west England.
- BTH is responsible for offering healthcare services within acute and community to a population of 440,000 [plus 12m tourists annually].
- Futuristic model of commissioning in NHS is aimed at developing patient centred services and taking care closer to patient.
- Most hospitals in UK offer outpatient parenteral antibiotic therapy [OPAT] services from hospital / clinic based models.
- Clinical Commissioning Group [CCG] – acute – primary care have worked collaboratively in developing a very successful community based [IV clinic based within a large primary care centre] OPAT service – as a PILOT, that offers both a CLINIC or HOME intravenous therapy [based on patient's mobility restrictions].
- COMMIT – COMM**unity/home Intravenous Therapy service is the brand name for the BTH – OPAT services has been a pilot since June 2012 – till date.
- The service specifications allow 365/7-days a week 8am – 8pm working model allowing up to 40 infusions a day from clinic / home setting.
- The operational structure includes:
 - Acute hospital based:
 - Consultants: Two Microbiologists; One Infectious Diseases and One Respiratory Consultants
 - Pharmacists: Antibiotic pharmacist, ward pharmacist
 - Nurse
 - Primary care centre IV Clinic based:
 - 5 member nursing team
- Referrals to COMMIT are received from:
 - Direct GP referrals to service
 - Wards
 - A & E
 - GP – led primary care assessment unit [based in acute as an extension to the urgent care centre]
 - Diabetic foot MDT clinic
 - Community podiatrists
- Microbiologists are the first point of contact to conduct patient suitability and assessment.
- The patient specific management plan is jointly agreed by Microbiologist – primary consultant or Microbiologist [for GP / podiatry referrals] alone.

Methods

- The challenges for an effective working of the services include:
 - Referral letter – for patients from acute & from primary care
 - Patient Management System
 - Patient Management Plan
 - Nursing governance assurance
 - PICC / mid line referral
 - Patient review communication
 - Patient feedback
 - Communication between acute based and community based teams and members of the entire team.
- BTH has an effective Web designing Department.
- The web designing department has worked with the COMMIT team and designed several e-tools to address these challenges [as above].

Results

- COMMIT [COMMunity/home Intravenous antibiotic Therapy] service – a PILOT, has continued to refine and grow [nursing staff appointments] since its inception in mid – June 2012.
- The highlights over last 22-months include:
 - 225 patients benefited from COMMIT
 - 2959 bed days saved
 - Oldest patient = 92y old
 - Longest duration = 121 days
 - Very good – excellent patient feedback
 - Highest – 298 bed days saved in a month
 - Up to 20 patients benefitted in a month

- E-tools:
 - Highlights:
 - These are all accessible from trust intranet page – with links using patient identifier.
 - Draws data from Patient information system
 - Completed forms are in trust approved printable format [for filing in case notes]
 - Completed forms are emailed to team members
 - Audit trail / governance requirements met
- E-referral from trust intranet page link [images 2]
- Intranet based links for COMMIT policy; patient pathway; Microbiologist – consultant – patient management plan; [image 1]
- Patient management system [located on intranet page [provided by commercial company associated with BSAC – OPAT group]
- New e-patient management plan with restricted access to roles in patient pathway: [images 2-5]
 - Section 1 [to be completed by primary consultant]
 - Section 2 [to be completed by Microbiologist]
 - Section 3 [to be completed by ward nurse / COMMIT nurse]
- In development:
 - Patient weekly review/assessment report form
 - Patient end of treatment form

IMAGES

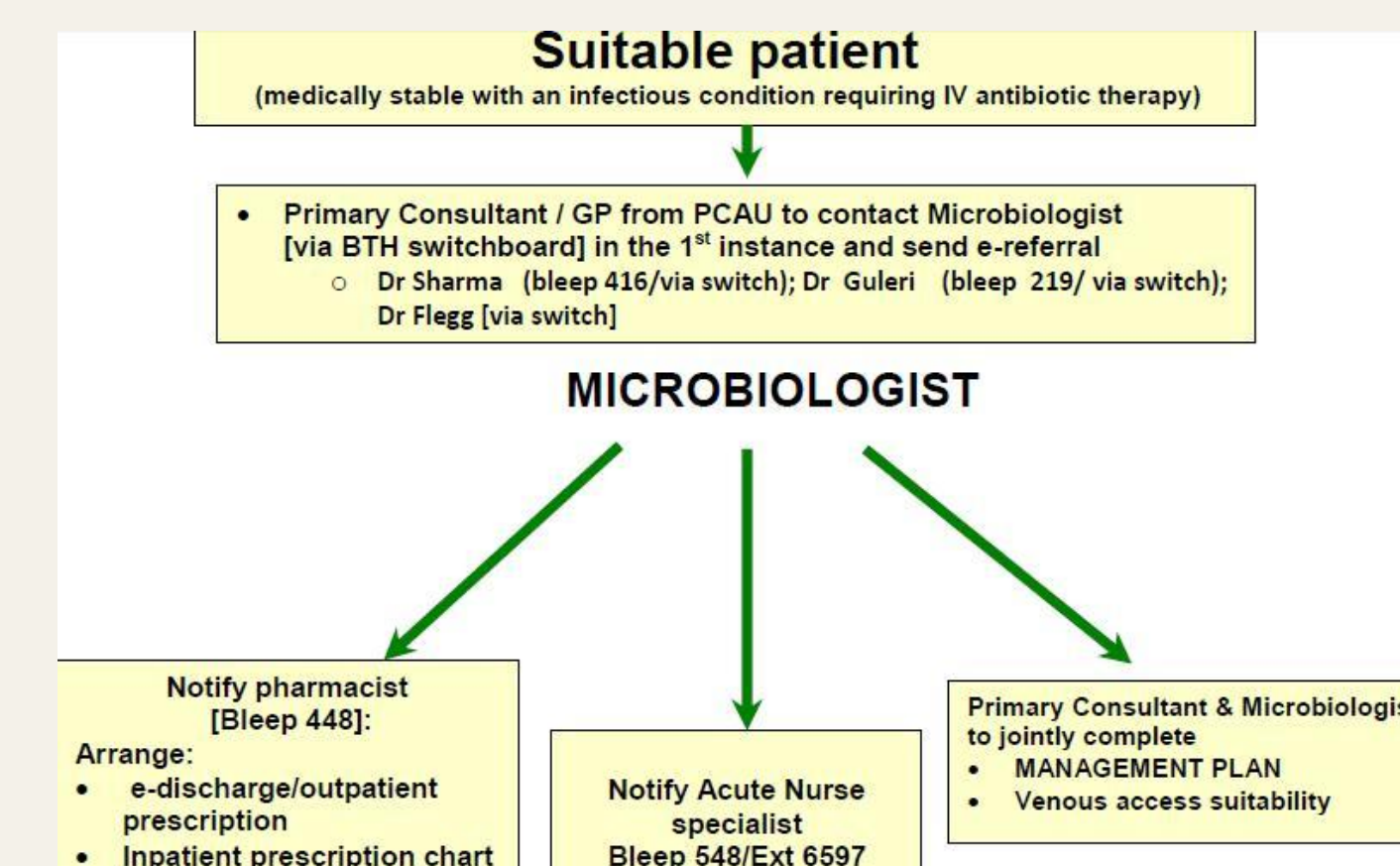
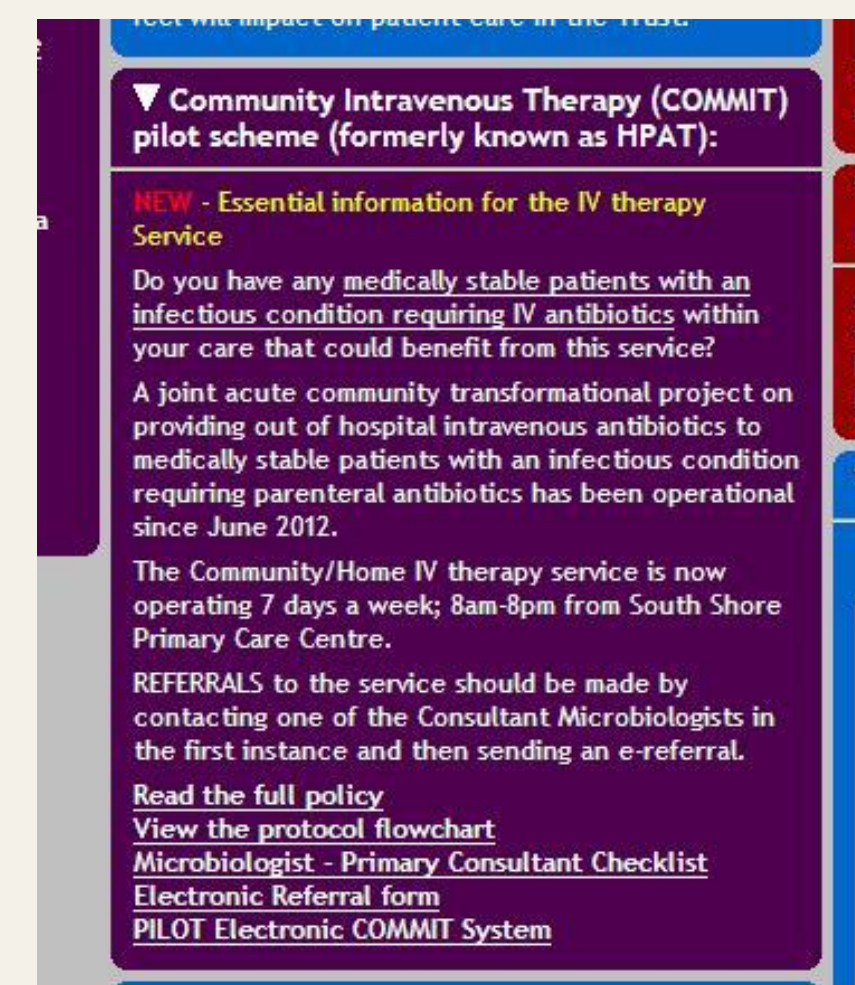


IMAGE 1: [left] INTRANET LOCATED LINKS FOR PATHWAY; POLICY; E-REFERRAL; [right] COMMIT PATIENT PATHWAY

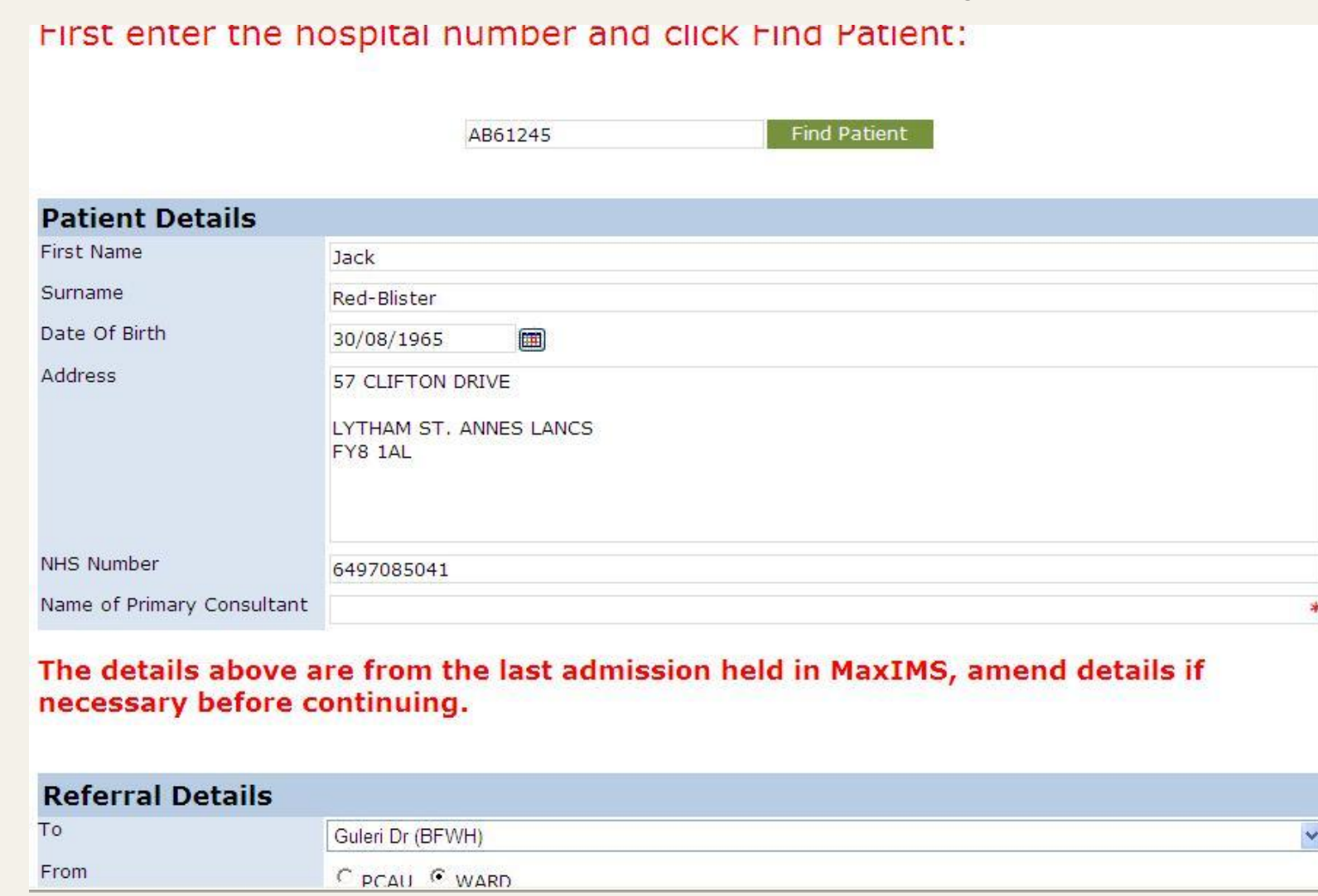


IMAGE 2: E-REFERRAL THAT GETS EMAILED TO CONSULTANT MICROBIOLOGISTS

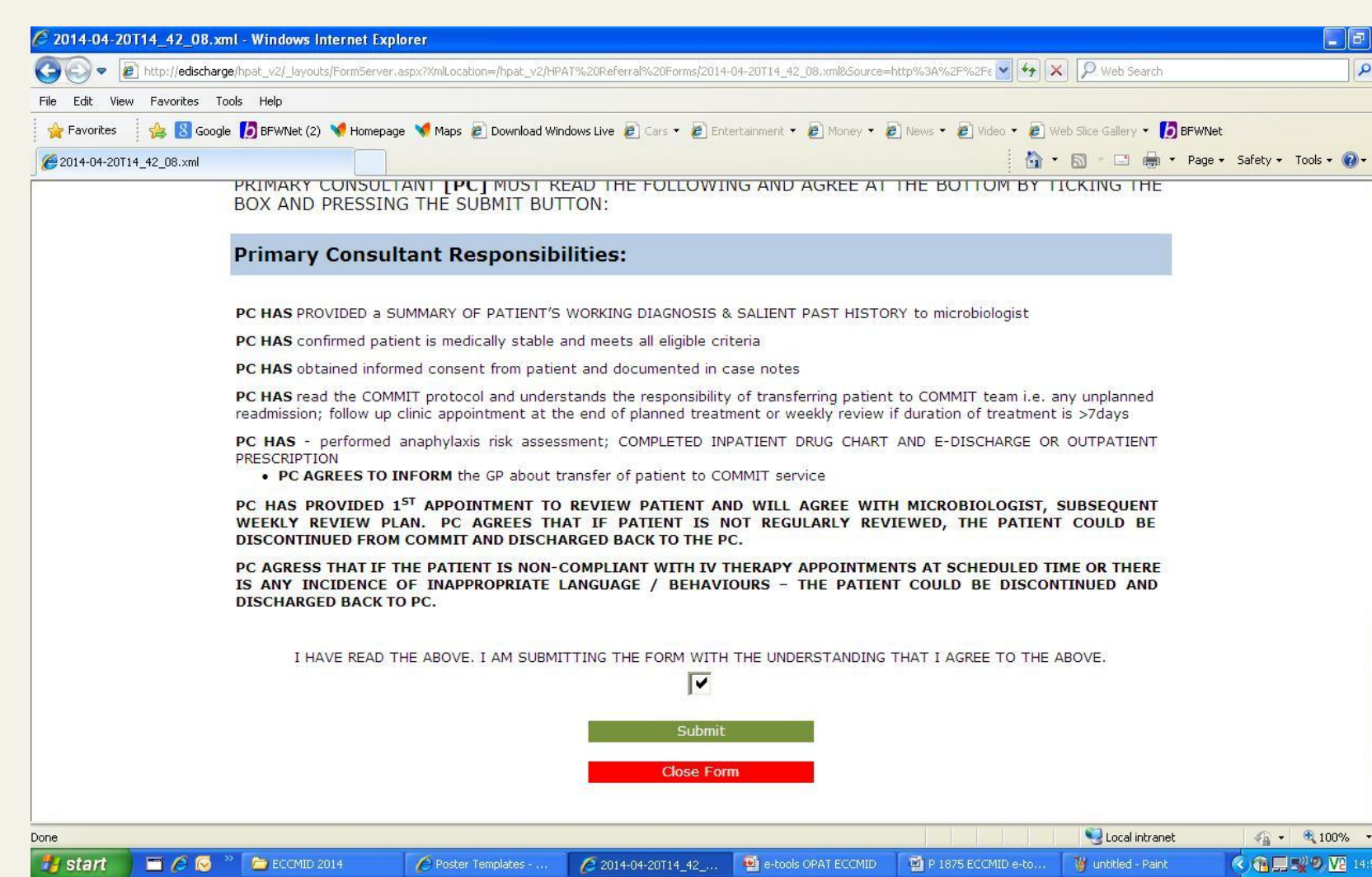


IMAGE 3: PATIENT MANAGEMENT PLAN – Section A for primary consultant to complete [incl uding PC responsibility]

IMAGES

IMAGE 4: PATIENT MANAGEMENT PLAN: Section A – primary consultant to complete; Section B – Microbiologist to complete; Section C – Nurse to complete

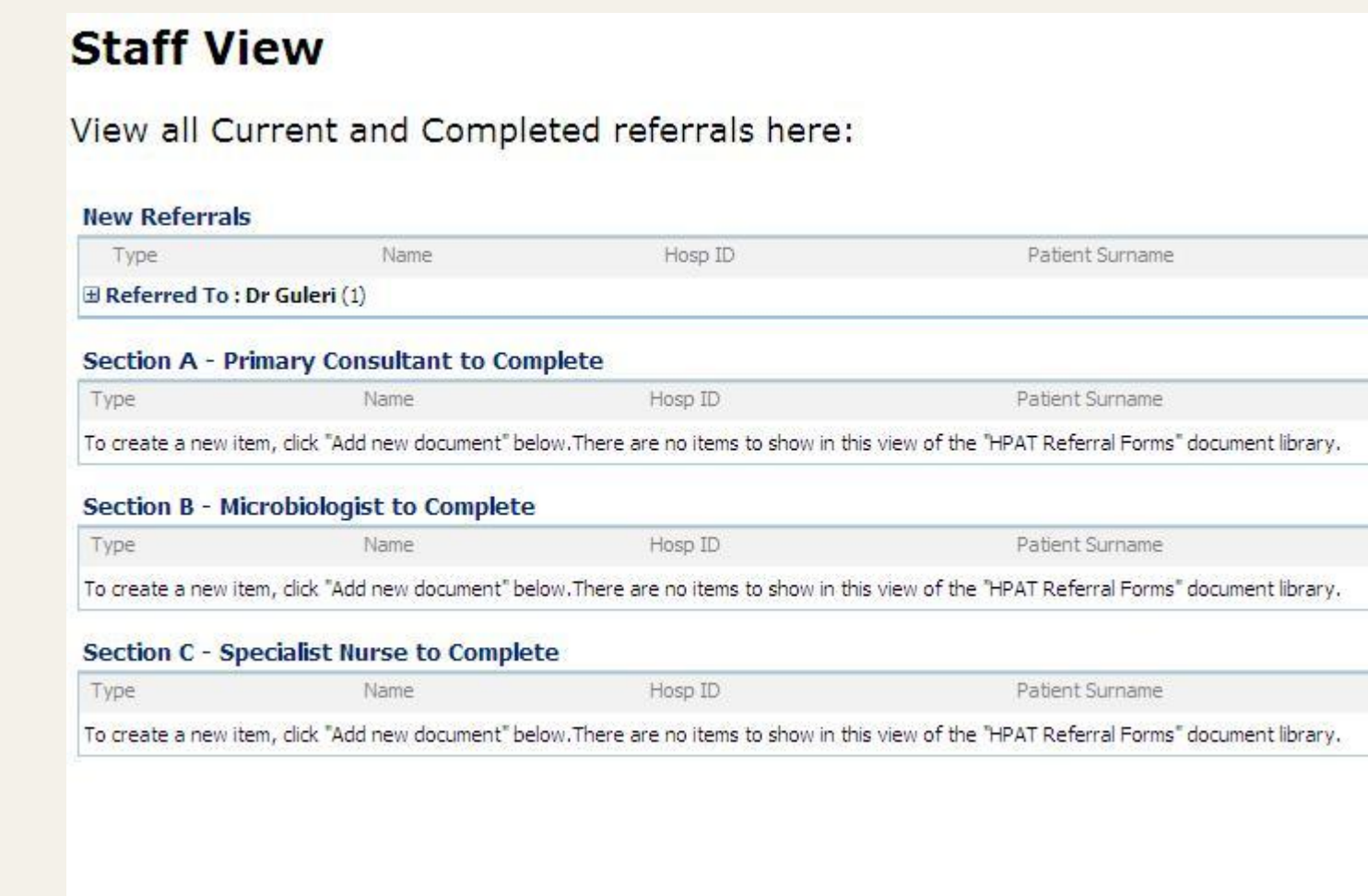
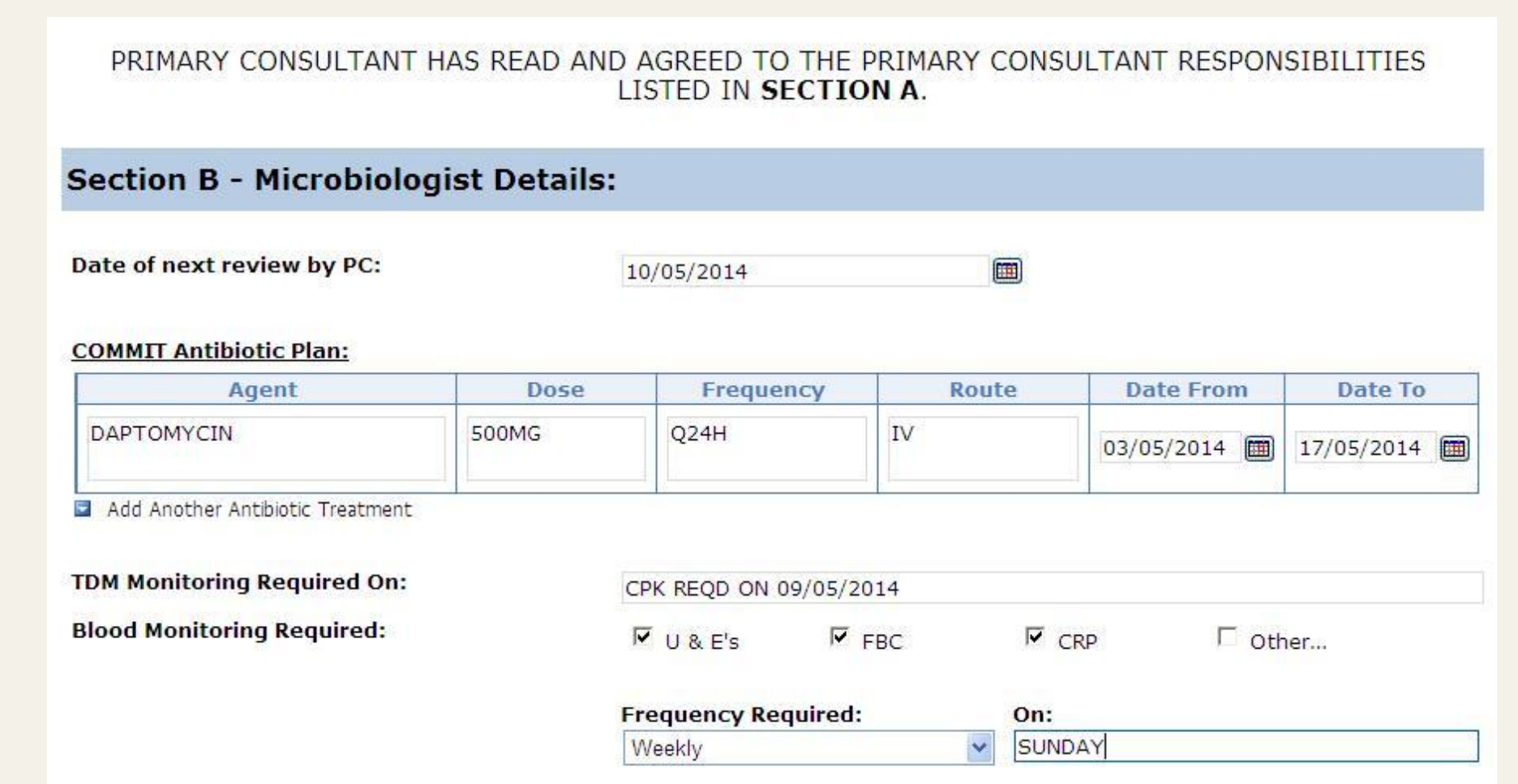


IMAGE 5: Section B [Patient Management Plan] – Microbiologist to complete



Conclusions

- NHS trusts are amidst financially challenging times.
- There are several business cases from across various specialities for investments on new IT solutions. Funding is challenging, restrictive and requires prioritizing.
- Good communication; governance assurance and satisfactory audit trail was crucial for our COMMIT service that has teams liaising across two sites [acute hospital & community based – primary care health centre]
- Trust Web designing department is extremely competent and has been innovative in addressing the requirements of the service.
- The extra-ordinary feat is that they have used currently available IT technology within the trust to create these excellent e-tools.

Acknowledgement

- The Blackpool Victoria Hospital Web Designing Department are thanked and acknowledged for these excellent developments.

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COMMunity / home Intravenous Therapy [COMMIT] Team

