CliniTouch vie

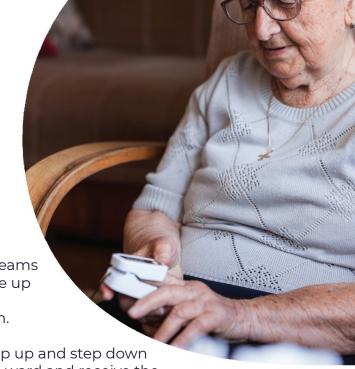## USE CASE
Frailty virtual ward goes live, supporting patients at home

Background

In an East Midlands NHS trust, community and acute teams came together to look at a frailty pathway. To help scale up and digitise the pathway, they enabled remote patient monitoring using Spirit Health's CliniTouch Vie platform.

In April 2022, the teams worked together to make a step up and step down frailty pathway live. Patients are admitted to the virtual ward and receive the support they need at home or their usual place of residence.

Aims & Objectives

✓ To provide patients with frailty in the community with clinical support and prevent hospital admissions

✓ To ensure patients with frailty are safely discharged from hospital to home with the support they need and reduce re-admissions

✓ To avoid patients with frailty deteriorating while in hospital by being safely discharged

	STEP UP PATHWAY	STEP DOWN PATHWAY
What is it?	**Admission avoidance** Patients with frailty are monitored remotely in a community setting. Helps reduce hospital admissions and supports patient wellbeing.	**Assisted discharge** Patients are safely discharged from hospital and remotely monitored at home. Supports patients with frailty and reduces re-admissions.
Who's it for?	Patients with frailty in the community at risk of exacerbation and deterioration.	Patients with frailty that can be safely discharged from hospital.
Who monitors the patient?	Community team	Community team pick up from acute team
What questions are patients typically asked?	Questions include how patients feel, whether they are steady on their feet, activity levels, any urine or bowel issues and medication taken. Patient records clinical observations including oxygen levels, temperature, blood pressure and pulse reading.	Questions include how patients feel, any pain, any urine or bowel issues, fluid intake and medication taken. Patient records clinical observations including oxygen levels, temperature, blood pressure and pulse reading.
Average length of stay	Ongoing until patient discharged	Approx. 2 weeks

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How does it work?

Patient

Patient answers specific frailty questions and records observations on CliniTouch Vie daily or as advised.

Training and equipment provided.

CliniTouch Vie

The platform has unique algorithms that automatically analyse and risk-score the data.

It will highlight when any patient moves outside the agreed parameters.

Clinical Team

Clinician monitors dashboard on CliniTouch Vie which features a prioritised patient list with a red, amber, green rating to highlight where action may be required.
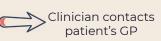
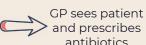If a patient is flagged as amber or red interventions are made.

An example of hospital admission avoidance

Patient completes questions and observations on CliniTouch Vie → Clinician monitors patient and sees red flag on CliniTouch Vie, patient has urine issue → Clinician contacts patient's GP → GP sees patient and prescribes antibiotics → Patient recovers and potential deterioration / admission to hospital is avoided

> *Implementing the frailty pathways has meant vulnerable patients with frailty can be supported in familiar surroundings and kept out of hospital. The remote monitoring reassures patients whilst empowering clinicians with the information they need to better support patient care and experience*

Dr Noel O'Kelly
Clinical Director
Spirit Health

Noel's 5 stages for successfully launching a frailty virtual ward:

1. **Identification** - identify where it will have the most impact

2. **Engagement** - engage with all stakeholders in health and social care

3. **Consensus** – agree on what is going to be done

4. **Planning** – include co-design, clinical models, SOPs, workforce requirements

5. **Implement** – utilise an iterative and flexible process

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