**REPORT TO:** Health & Wellbeing Board

**DATE**: 5<sup>th</sup> July 2017

**REPORTING OFFICER:** Director of Adult Social Services

PORTFOLIO: Health & Wellbeing

SUBJECT: Halton Rapid Clinical Assessment Team

WARD(S): Borough-wide

#### 1.0 PURPOSE OF REPORT

- 1.1 To receive a presentation from Damian Nolan, Divisional Manager for Urgent Care on the development of Halton's Rapid Clinical Assessment Team (RCAT).
- 2.0 RECOMMENDATION: That the Board the contents of the report and associated presentation be noted.
- 3.0 SUPPORTING INFORMATION
- 3.1 Older people become unwell for a variety of complex reasons and sometimes require hospital attendance / admission for consultant led diagnostics and assessment.
- 3.2 Moving older people out of their home environment to hospital, particularly frail older people aged 75+, poses a number of significant issues and risks to their health and well-being including disorientation, confusion, falls, functional decline and risk of hospital acquired infection. Finding clinically suitable alternatives to hospital admission is important for this group.
- 3.3 The development of the RCAT service arose from an approach by a Care of the Elderly Consultant, Professor Bhowmick, to the medical team at Warrington and Halton Hospitals NHS Foundation Trust (WHHFT). Professor Bhowmick had developed, in 2 locations in Wales, a rapid assessment model for older people in the community who otherwise would be admitted to hospital for consultant assessment, diagnostics and review of non-life threatening illness.

From August 2015 to April 2016 a model was developed drawing on nursing resources in the Rapid Access and Rehabilitation Service (RARS) and Community Matrons.

3.4 The RCAT service commenced on the 4<sup>th</sup> April 2016.

GP led Primary Care Teams have the opportunity to refer to RCAT for an enhanced Rapid Clinical Assessment, including access to associated/necessary diagnostics, providing appropriate treatment to patients in their own home thus

helping to prevent hospital admissions in the frail/elderly population of Halton.

The referral criteria is as follows:-

- Age 75+. However the team are flexible and if a GP feels that a patient would benefit from an intervention irrespective of age, then they can contact the team to discuss this; and
- Not critically ill (e.g. Myocardial Infraction, stroke or severe sepsis etc.).

The service accepts referrals Monday to Friday 9am – 4pm and the aim is for the service to undertake an initial assessment within 2 hours

Access to rapid diagnostics runs through the existing access in the Urgent Care Centres (UCCs) and the departments at Halton, Warrington and Whiston hospitals.

3.5 From 4<sup>th</sup> April 2016 – 31<sup>st</sup> March 2017, 194 referrals have been made to the Service.

Of those referrals made, a total of 165 admissions where avoided during 2016/17.

For NHS Halton Clinical Commissioning Group, the average cost of an emergency attendance and admission via ambulance in 2015/16 was £2,786 (Age 75+).

Based on this figure, a total saving of £459,690 was made in hospital avoidance.

If this saving is then offset against the annual cost of the RCAT service, which is circa. £350k, then in 2016/17 a total saving of £109,690 was made.

### 4.0 **POLICY IMPLICATIONS**

4.1 None identified.

#### 5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 Funding for the service is within the existing Pooled Budget between Halton Borough Council and NHS Halton Clinical Commissioning Group

### 6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

# 6.1 Children & Young People in Halton

None identified

### 6.2 Employment, Learning & Skills in Halton

None identified

### 6.3 A Healthy Halton

The Service delivers improved access to healthcare for older adults within the community.

## 6.4 A Safer Halton

None identified

# 6.5 Halton's Urban Renewal

None identified

# 7.0 **RISK ANALYSIS**

7.1 The sustainability of the model moving forward remains a challenge and work is ongoing with the local Acute Trusts to explore options for securing the delivery of the service for the Borough.

# 8.0 **EQUALITY AND DIVERSITY ISSUES**

- 8.1 There are no identified equality and diversity issues
- 9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972
- 9.1 None under the meaning of the Act.