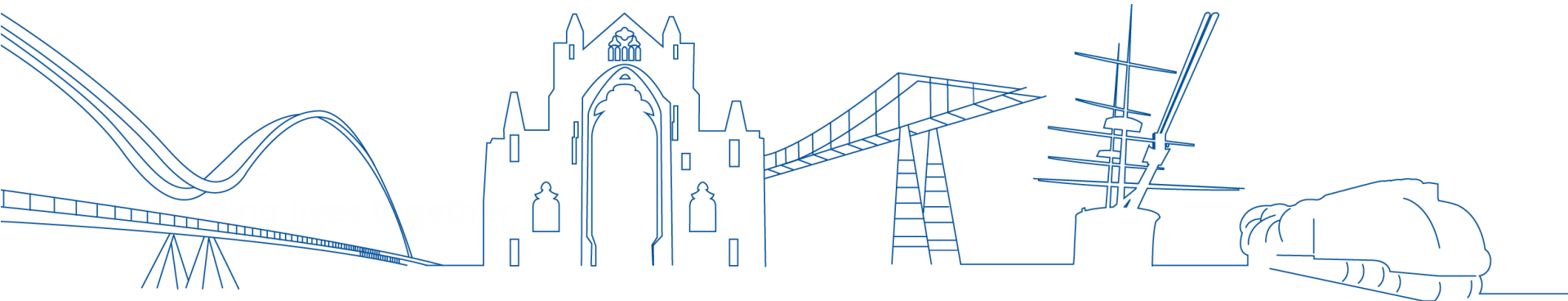# COVID-19 Virtual Ward
(COIVD Care@Home)

Dr Janet Walker

Background

- The Tees Valley has seen some of the highest infection rates in the country; with Middlesbrough having one of the highest infection and death rates

- Some patients were presenting late,

- Some had 'silent hypoxia'- low oxygen levels with patients not realising how unwell they were,

- Some can be very sick by the time they present in hospital; and those presenting late have a poorer prognosis.

NHS
Tees Valley
Clinical Commissioning Group

- Tees Valley CCG chosen as one of 3 NHSE Vanguard sites
- Implemented home monitoring to detect deterioration of 'silent hypoxia' and enable earlier intervention to improve outcomes
- Our COVID Virtual Ward – 'COVID Care@Home '
- Evaluation ongoing before national roll out

Our COVID Virtual Ward – 'COVID Care@Home '

- Provided by alliance of the 3 GP federations (ELM Alliance, Hartlepool & Stockton Health, Primary Healthcare Darlington) Service delivered 7 days per week

- Clinician supervised, nurse led monitoring

- Pulse oximetry and physiological remote monitoring - using digital app (for up to 14 days)

- App has inbuilt safety netting, so that if a patient enters deteriorating saturations it automatically generates advice around action required, including 999 or 111 for in and out of hours as needed in addition to the telephone monitoring, and face to face assessments where appropriate

Referral Source

- GP COVID-19 Hot clinics – primary care access clinics
- Emergency Departments/Urgent Treatment Centres
- On discharge from Hospital
- After paramedic assessment
- Test and Trace – COVID-19 positive patients can self refer
- Care homes

Referral Criteria

- Adult patients registered with Tees Valley CCG practice

- Symptomatic COVID-19 positive patients or suspected COVID-19 suitable for home monitoring

- Referral criteria for pilot are very broad to gather data to determine whom to monitor. The referral criteria will be reviewed post evaluation in September.

Exclusion Criteria

- Children (under 18)

- Patients with chronic hypoxia, (lower than 'normal' oxygen saturation level related to another respiratory or other long term condition)

- Emergency health care plan in place where care would not be escalated to hospital admission

The Challenges

- Changing incidence of covid infection
- Complexity to identifying patients testing positive
- Delays in test results reaching GP practices
- Data Sharing – developed a data sharing agreement with Public Health England
- Communications – using the right words to describe the service to encourage people to come forward, developed leaflets in top 9 languages across the Tees Valley, developed Easy Read leaflets
- Low number of referrals (29 as of 17/9/2020)

Patient Story

- My name is Jessica, I'm 30 and I'm from Redcar. I live with my husband and step daughter.

- I never felt poorly, but track and trace contacted me after a visit to a local restaurant. 4 days later my symptoms started and I went for a test. The results came back by email and text and I was positive. Self-isolating hasn't been too bad really as I have a few home based hobbies to keep me busy.

Patient story

- I ended up going to the Covid Clinic in Middlesbrough and they referred me to the Virtual ward. It was easy to join and I have remembered to do all my readings easily.

- The app and the equipment are simple to use, and it has been a good experience for me. It was very reassuring and I needed that.

- I had a couple of questions and the nurse got back to me very quickly. It made a difference because it was very scary at first in isolation but it was a comfort to know that there is a medical team there who are easy to contact.

-

Perceived Benefits

- Provides patient reassurance and safety

- Offers innovative approach for good clinical care in the community.

- Earlier detection of deterioration, allowing earlier intervention, that gives better patient outcomes.

- Embraces digital technology that enables clinicians to focus on the patients most in need of input

- Expected to reduce length of stay in hospital.

- Reduces pressure on Emergency Departments, primary care and secondary care with patients self caring at home.

NHS
Tees Valley
Clinical Commissioning Group

Any Questions?