

Enhanced Health in Care Homes (EHCH)



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Enhanced Health in Care Homes (EHCH)

- ▶ 1 in 7 people aged 85 or over permanently live in a care home
- ▶ People living in care homes account for 185,000 **emergency admissions** each year and 1.46 million **emergency bed days**, with 35-40% of emergency admissions being potentially **avoidable**
- ▶ Evidence suggests that many **people living in care homes are not having their needs assessed and addressed** as well as they could be
 - ▶ unnecessary, unplanned and avoidable admissions to hospital
 - ▶ sub-optimal medication regimes.

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Enhanced Health in Care Homes (EHCH) Outcomes

- ▶ **Improve the experience, quality and safety of care** for people living in care homes, their families and their carers
- ▶ **Reduce avoidable ambulance journeys, A&E attendances and emergency admissions to hospital** for people living care home residents
- ▶ **Improve sub-optimal medication regimes** in care homes
- ▶ **Support more people living in care homes to die in a place of their choosing.**

Did you know...
pharmacist-led
medicine reviews
have been shown to
lead to a reduction in
the number of falls in
care homes

 **Captivating** Training Solutions

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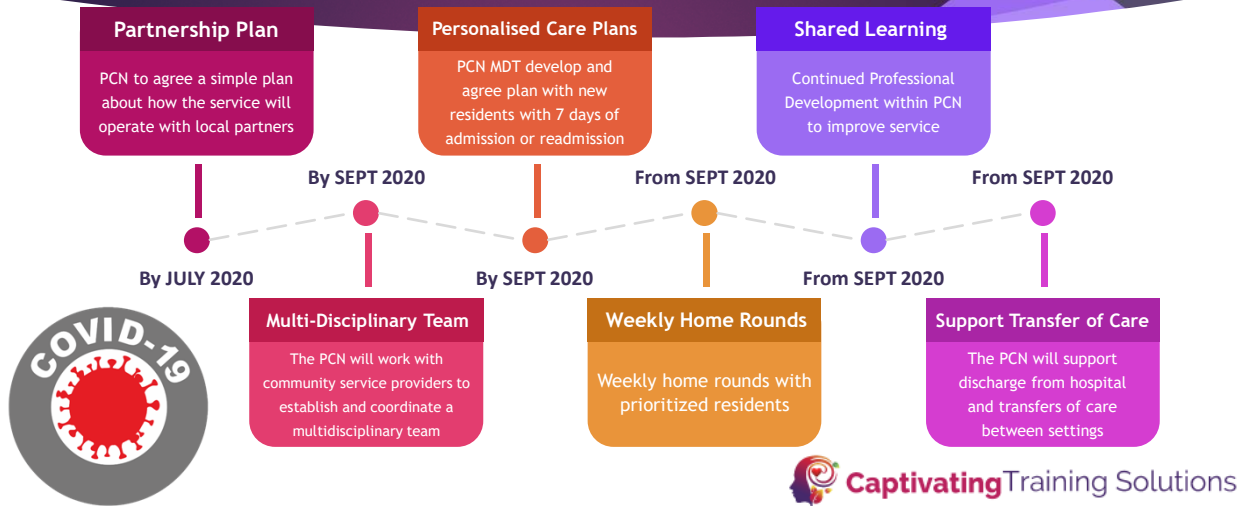
Enhanced Health in Care Homes Metrics



- ▶ The **rate of emergency admissions** for people living in care homes
- ▶ The **rate of urgent care attendances** for people living in care homes
- ▶ The proportion of people living in a care home who have a **personalised care and support plan** in place
- ▶ The number of people living in a care home who receive an appointment as part of the **weekly care home round**
- ▶ The number and proportion of people living in a care home who receive a **structured medication review**
- ▶ The number and proportion of people living in a care home who receive a **delirium risk assessment**

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EHCH Timeline & Objectives



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Breakout instructions

- ▶ Each group will get to review the target patient groups and metrics for each service
- ▶ The facilitator in each group will ask coaching questions to encourage the group to generate ideas on **how Community Pharmacy could collaborate with the PCN on the service**
- ▶ The facilitator must remind the group that they cannot agree initiatives on behalf of the other pharmacies without their consensus and not use their position for competitive gain
- ▶ At the end of the breakouts the facilitator will present back the main ideas and suggestions from the discussion to the wider group

Captivating Training Solutions

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Suggested Facilitator Question

- ▶ Who has experience working with care homes?
- ▶ What role do you think Community Pharmacy will play in this service?
- ▶ What can Community Pharmacy do to support Enhance Health in Care Homes?
- ▶ What expertise does Community Pharmacy have that would be beneficial to this service?
- ▶ What are the pros and cons of Community Pharmacy collaborating with PCN's for EHCH?
- ▶ What training/resources will Community Pharmacy need to support this service?
- ▶ How does the PCN benefit from collaborating with Community Pharmacy (vice versa)?
- ▶ What concerns do you have about this service?
- ▶ What opportunities are there for Community Pharmacy to be involved in this service?