Deployment of a pan London cardiac elective care virtual ward
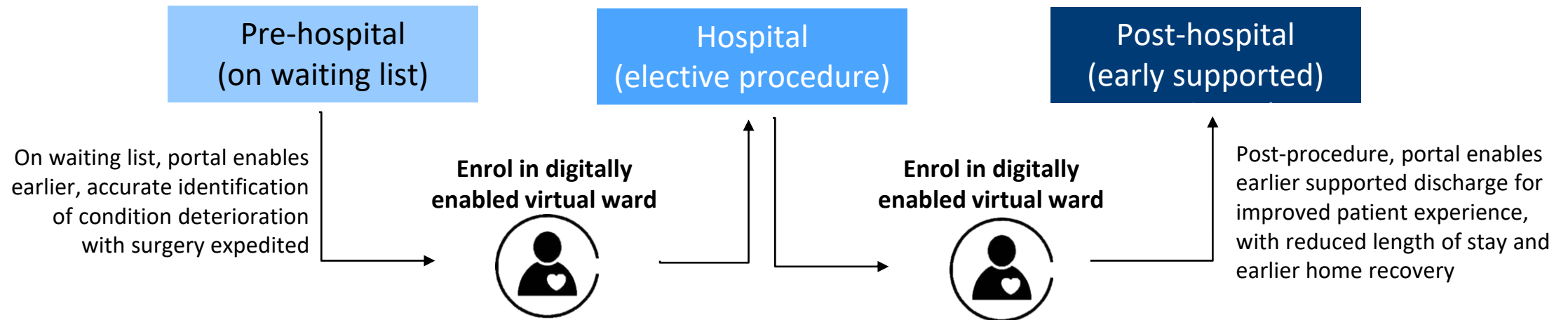
HSJ award category:
Supporting elective recovery through digital

On behalf of the North London and South London Cardiac Operational Delivery Networks

Ambition

NHS

8,000+

patients awaiting cardiac surgery – creating an increased **risk of morbidity and mortality**

Pre-hospital (on waiting list)	Hospital (elective procedure)	Post-hospital (early supported)

On waiting list, portal enables earlier, accurate identification of condition deterioration with surgery expedited

Enrol in digitally enabled virtual ward

Enrol in digitally enabled virtual ward

Post-procedure, portal enables earlier supported discharge for improved patient experience, with reduced length of stay and earlier home recovery

Aim: Reduce these risks by **implementing remote monitoring** of patients through 1-year pilot funding secured from NHSX elective recovery fund.

Strategic thinking: *Scoping, mapping, engaging*

Engagement   Cardiac surgery clinical leads, OneLondon

Feedback   Collected from patients and clinical teams

**Mapping**   Selecting desired outcomes and measures of success

Ambition

Aim: Procure a pan London virtual ward software to reduce deterioration of patients on the waiting list and inform clinical prioritisation of patients.

Real-time monitoring to identify early warning signs and intervene before patients deteriorate

Comprehensive and configurable tool for **clinical prioritisation** of patients.

Digital portal review of PROMS, symptoms, and observations.
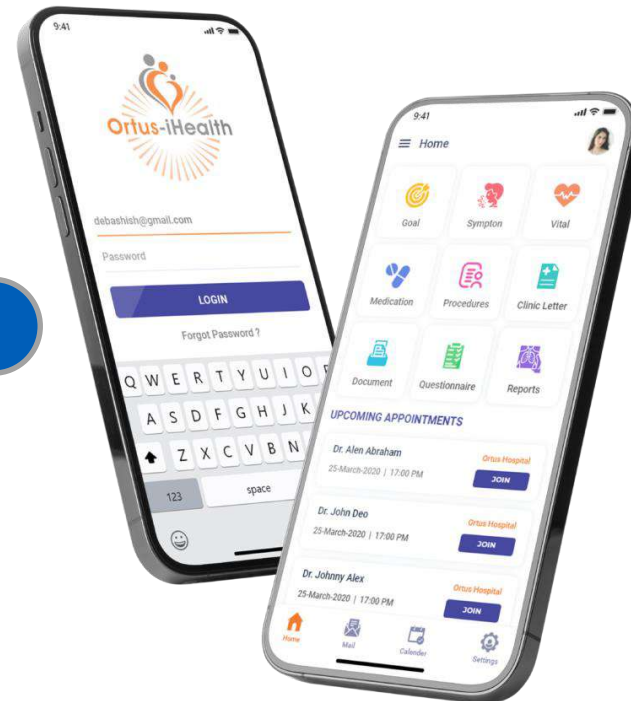
Procured

Ortus iHealth,
a condition-agnostic,
comprehensive remote
monitoring tool.

Deployment

Introduction of **site and regional SOPs** to share **best practices** with phased deployments

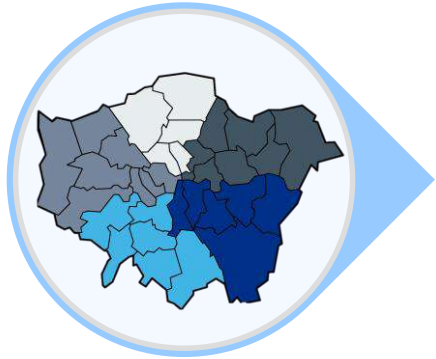**Standardisation of pathways** and reporting across sites

Task and finish groups to identify / counter issues

Templated documentation for approvals (eg, information governance)
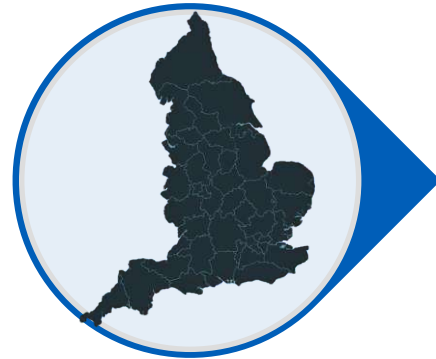
Integration into the shared **OneLondon Care Record**

Spread

Sharing learnings across and beyond

London

- Sharing with ICBs looking to procure remote monitoring across specialties
- Trust level advice across multiple specialties
- Discussions with clinical teams
- Sharing our procurement framework

England

- National cardiac meetings
- National virtual ward conferences
- Shared learning and successes with other regional teams
- Focus of Manchester AHSN case study

Other pathways

- Heart Failure @home
- Aortic dissection
- Hypertension
- Early discharge cardiac pathways
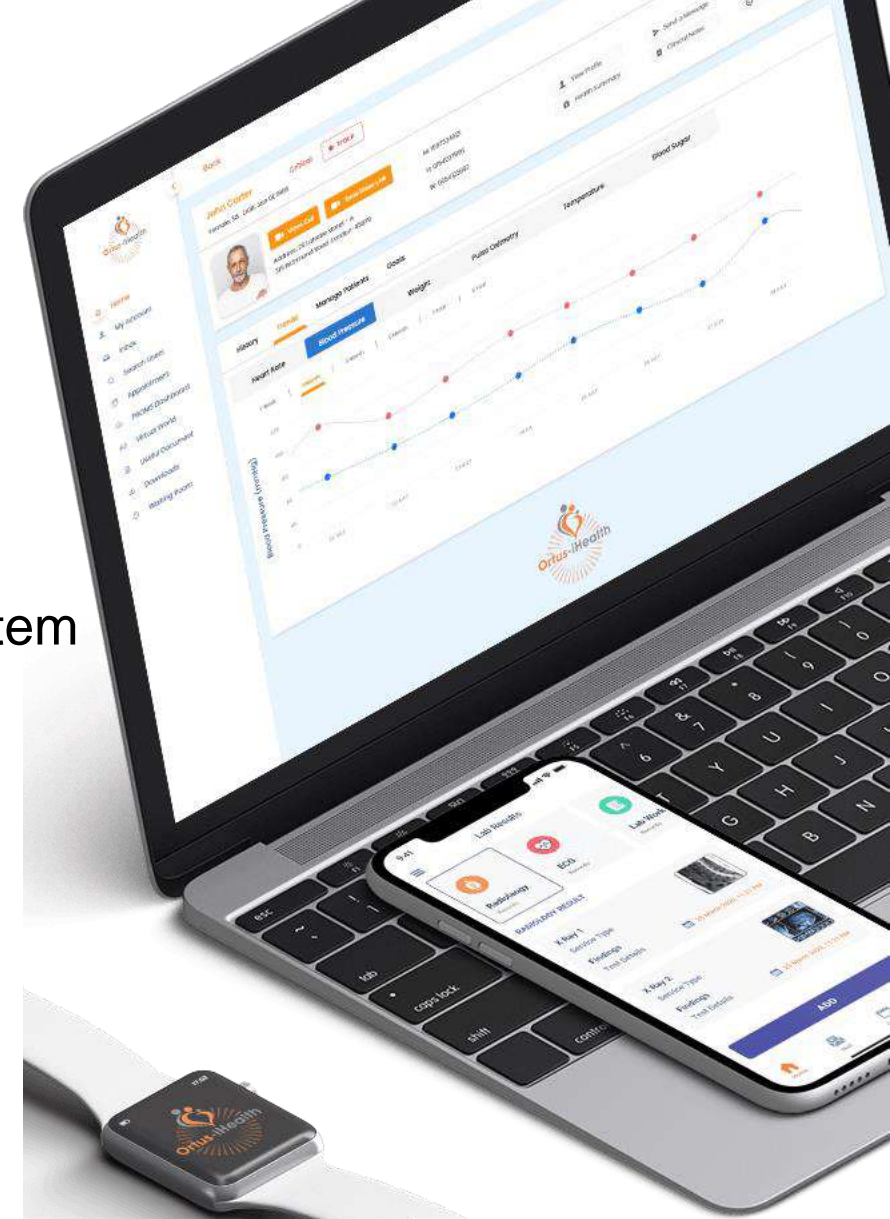
Value and impact

Improving patient access, outcomes and experience

- **Reduced deterioration** of patients on the waiting list
- **Increased clinical prioritisation** of patients
- Better **integration and coordination** of care across the system
- Reduced patient **waiting times**
- **Improved patient satisfaction** and feedback

184 admissions avoided

270 patients had care escalated

£1.6M system savings*

*	Cost of unplanned admissions	£3,150-£4,500
	Average length of stay	7-10 days
	Admissions avoided	184
	Total system savings potential	£1.1M-1.6M (full year)

Value and impact
Patient and staff experience improvements

- Direct patient-to-clinician contact

- Rapid clinician-to-clinician escalation

- Faster patient care – even beyond cardiac

- Greater efficiency in the pre assessment process

- Provides greater security to patients as their conditions are monitored

"It helped me get referred for a procedure, which was much better than waiting for an appointment."

2,000+
enrolled patients

1,600+
routinely monitored

80%+
activation and engagement

"It helped me manage how I was feeling from week to week and keep it in check."

"I think this type of communication is brilliant! You are able to get in touch so easily, without hassle, and you know that there is someone there at all times to support you."

Involvement

Working together for a genuinely coproduced solution

NHS

- Consensus across **8 London cardiac sites**
- Strong **NHS / industry relationships**
- **Clinical collaboration** through the Clinical Council model, involving all sites and clinicians in decision making
- **Patient involvement** in Ortus design and tender requirements
- **Ongoing engagement** through deployment (patients and NHS teams)

8
cardiac centres

1
agreed solution

2
clinical networks

Great scalability
across services and trusts

Clinical council
model

- Harefield Hospital
- Imperial Hospital
- King's College Hospital
- Royal Brompton Hospital
- Royal Free Hospital
- St Bartholomew's Hospital
- St George's Hospital
- St Thomas' Hospital
- North London Cardiac ODN
- South London Cardiac ODN
- London Clinical Networks