

Vision to reduce Non Elective Admissions

So far, we have all been puzzled in really how to reduce NELs (Non Elective Admissions). We felt there was nothing we could do and it is all down to secondary care. Personally, I believe if we do all of the points below, we could reduce NELs quite significantly.

1. Every patient discharged from hospital with heart failure to be seen by community heart failure team within a week
2. Every patient discharged from hospital with COPD to be seen by chest rehab within a week
3. Every patient SCAS (South Central Ambulance Services) is called to with a fall to be automatically referred to LTC (long term conditions) cluster meetings / community physio.
4. Consider Cancer patients discharged to receive a tailored physio services (discuss further with Lisa McNally)
5. Every hospital discharged patient to be provided with follow up phone calls on how they are and what they still need
6. Every frail elderly discharged to be considered for referral to LTC
7. Patients in home visiting books of practices to be considered for LTC referral
8. All three CCGs to publish a DOS of the three trusts following:
 - Rapid Access Consultant Advice Lines
 - Rapid Access Clinics and how to Access
 - Any Rapid Access outreach Service
9. Promote pushing hydration in all nursing homes to avoid admissions for UTIs and consider weekly urine testing.
10. Checking every medical and orthopaedic inpatient over 65 had a flu / pneumonia jab. Vaccinate 4-17 years old in practice. Also ALL carers on practice register regardless. Fund search & mailshot for all patients not having had flu jab.