### Health Case

### Management Service

### Who are we?

\* The Health Case Management Service provides timely case management for the population of Leeds (those aged 18 and over) who are eligible for NHS Fast Track and Continuing Healthcare Funding and have a Leeds GP. This includes in hospitals or in your own home.

\* Our philosophy is to place the individual at the centre of their care. Proactively supporting people to have more choice and control to help them achieve their own personal outcomes.

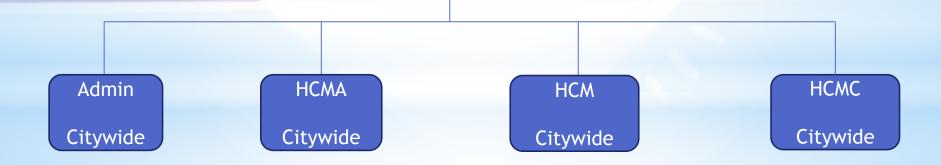
\* The service has recently been reviewed in terms of its delivery, reacting to the demands of COVID-19. This has resulted in two teams becoming one centralised team among other changes.

\* The team consists of Health Case Managers, Health Case Management Coordinators and Health Case Management Assistants who are professionals with health or social care backgrounds and have a wealth of experience in all aspects of health case management.



Suzy Brock, Debbie Gilmore, Luke Storey (Secondment)

**Clinical Quality Lead** 



### What is a Fast Track?

\*The Fast Track Pathway Tool for NHS Continuing Healthcare October 2018 (Revised)

\*The Fast Track Pathway Tool for NHS Continuing Healthcare October 2018 (Revised) is only used in situations where it would not be appropriate to complete a Checklist and complete a full DST because-

\*The individual 'has a rapidly-deteriorating condition which may be entering a terminal phase'. Its purpose is to ensure that such individuals are supported in their preferred place of care as soon as possible."

### Who can complete the Fast Track Pathway tool

\*It can only be completed by '<u>an appropriate clinician</u>' who is required to certify that the individual meets the criteria.

\*An appropriate clinician is defined in Standing Rules Regulations as: A person who is (a) responsible for the diagnosis, treatment or care of the person under the 2006 Act in respect of whom a Fast Track Pathway Tool is being completed, and (b) a registered nurse or a registered medical practitioner. In addition, the clinician will have been trained in completing the Fast Track Pathway Tool.

### Fast Track Pathway

\*No other test of eligibility is required. The CCG must accept that the individual is eligible for CHC and take action to put in place appropriate care and support without delay.

\*Where the Fast Track Pathway is used, the Checklist and DST do not need to be completed.

\*CHC will look at the Fast Track Pathway Tool and will need to authorise the funding

### Fast Track Pathway in Leeds

\*An appropriate clinician assesses the individual and if feels meets the criteria completes the Fast Track Pathway Tool and emails to SPUR

\*The individual could be in hospital, in a care home, in the hospice or in their own home.

\*SPUR forward this to CHC for them to authorise that the Fast Track funding is appropriate

#### How HCMS responds to a person with Fast Track in hospital/hospice...

- \*Once funding is authorised HCMS will contact the ward and ascertain what discussions have taken place with the individual or representative and what their preference would be for future care
- \*Should the decision be for Nursing home placement HCMS will support the individual and manage the discharge to a home of their choice
- \*Should hospice be preferred by the person, the ward will refer to the hospital palliative care team who will assess to see if they meet hospice criteria

## ...And if the person wishes to go to their own home or residential home

- \*HCMS will appoint a RGN to gain a clinical handover for the NT and ensure appropriate equipment is in place. Previously this was completed face to face in a care planning meeting. However, during Covid 19 this has been completed remotely unless in exceptional circumstances.
- \*The RGN will ascertain from the NT which is their preferred visit time.
- \*The RGN will liaise with the ward regarding nursing needs and will complete a Clinical Summary and attach to Sys1.
- \*The RGN will give the NT a verbal handover of the individuals clinical needs
- \*The RGN will complete EPACCS, Care Plans and MDT sections of Sys1 and update the HCMC with appropriate care needs

### Personalised Care and Support Plans

- \* HCMS will appoint a HCMC to liaise with family and CHC to ensure an appropriate care package is in place.
- \* They will ensure all discussions with family and the individual and person centred. HCMC will discuss the person's; life, likes, dislikes, faith and any other relevant information which factor into the person's care.
- \* They will ensure carers needs are assessed and support is provided.
- \* Previously this was completed face to face in a care planning meeting. However during Covid 19 this has been completed remotely unless in exceptional circumstances.
- \*They will complete a support plan and manage the discharge home. \*They will case manage the individual as needed or until review.

#### How HCMS responds to a person with Fast Track in the community...

- \* An appropriate clinician assesses the individual as meeting the criteria and they will complete the Fast Track Pathway Tool and send to SPUR for authorisation
- \* Some clinicians who use Sys1 can complete a direct authorised referral tool (DART) fast track which goes directly to CHC for authorisation and then SPUR
- \* HCMT will appoint a HCMC to liaise with NT, individual and representative regarding care needs and will request an appropriate care package ensuring carers are supported
- \* They will ensure all discussions with family and the individual and person centred. HCMC will discuss the person's; life, likes, dislikes, faith and any other relevant information which factor into the person's care.
- \* They will ensure carers needs are assessed and support is provided.
- \* They will case manage the individual as needed or until review.

### **Reviewing Fast Track Funding**

\*There may be some situations where the fast track pathway is later found to have been inappropriate or the individuals health condition has changed and they no longer meet the Fast Track criteria.

- \*In which case the CHC must review the funding.
- \*Leeds CHC have advised the funding should be reviewed as health condition changes or the individual reaches 100 days post fast track

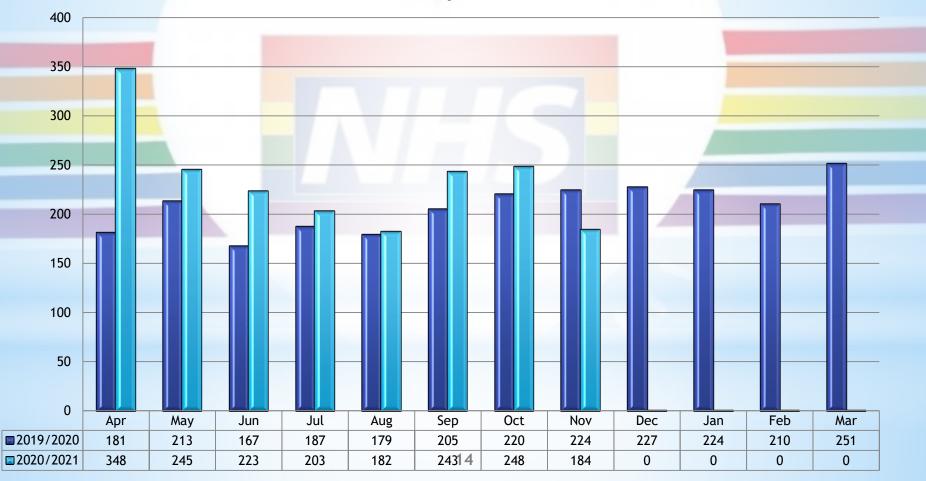
\*The main purpose of the review is to assess an individual's care needs and the effectiveness of the care arrangements. If at review the person is expected to die in the very near future, then Fast Track funding should continue.

### Statistics

Referred From:	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Community	68	99	88	97	94	97	125	128	124	126	101	146
Hospital	113	114	79	90	85	108	95	96	103	98	109	105
2019/2020	181	213	167	187	179	205	220	224	227	224	210	251
Referred From:	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Community	265	161	121	108	106	131	136	108	0	0	0	0
Hospital	83	84	102	95	76	112	112	76	0	0	0	0
2020/2021	348	245	223	203	182	243	248	184	0	0	0	0
Referred From:	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2019/2020	181	213	167	187	179	205	220	224	227	224	210	251
2020/2021	348	245	223	203	182	243	248	184	0	0	0	0

### Statistics

#### Fast Track Comparison Table



# Any Questions