

Leicester City CCG Commissions Project Demonstrating Benefits of Clinical Coaching and Telehealth in Reducing COPD Hospital Admissions

“The success of this new system is fantastic news for patients. We fully support innovation and working with service providers outside of the NHS to help us deliver the enormity of the long term conditions agenda.”

Professor Azhar Farooqi,
GP and chair for the Leicester City Clinical Commissioning Groups



NHS
Leicester City
Clinical Commissioning Group

Introduction

In excess of one million people across the UK have chronic obstructive pulmonary disease (COPD), a chronic respiratory disease characterised by acute exacerbations that commonly require hospitalisation for acute care. England had over 116,000 hospital admissions for COPD in 2013-2014 with a mean average length of stay of over six days.¹ With an average cost of £400 per bed, per day² the cost to the NHS would have been around £300 million just to contend with COPD hospital admissions in England alone.

In addition, prevention of acute exacerbations of COPD has been shown to enhance quality of life, improve health status and slow the downward trajectory of the disease.³

The study was based on a “managed model of care” introduced and commissioned by Leicester City Clinical Commissioning Group (LC CCG), in partnership with Totally Health, the local community trust Leicester Partnership Trust and Spirit Healthcare. A paper on the programme has been published in the British Journal of Healthcare Management.⁴

Context

Leicester City Clinical Commissioning Group sought to improve the management of patients with COPD. The aim was to evaluate the scale of impact of a combined intervention using telehealth (Clinitouch system) in parallel with clinical health coaching and specialist nurse interventions. This was triggered by biometric data from a redesigned service for patients with COPD. Eligible patients had a history of two or more prior unscheduled COPD admissions in the previous 12 months.

Methodology

A three-year programme lead by Totally Health. Admissions data from University Hospitals of Leicester NHS Trust and interventions from Leicester Partnership Trust and Totally Health were received from Leicester City Clinical Commissioning Group. Data were analysed relating to the impact on admissions and overall resource use and compared to the previous 12 months with patients acting as their own controls.

The mean age of referred patients was 69 (range 36–89) with a gender split of 47% female, 53% male. A total of 248 patients were referred into the service.

Findings



**67% reduction
in unscheduled
COPD admissions**



**A decrease from 3.13 to
1.02 admissions
per patient**



**Gross Quality Innovation
Productivity and
Prevention (QIPP)
savings to LC CCG were
recorded as £117,550
over 12 months**



**Patients were overwhelmingly
more knowledgeable about
their condition, more confident
in managing it and motivated
to change behaviour in a
positive direction**

References:

1. HSCIC 2015
2. DH, 2015
3. Spencer et al, 2004
4. BJHM, April 2016, Volume 22, No 3

www.totallyhealth.com

Tel: +44 (0)20 3866 3337

Email: info@totallyhealth.com

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