

TSA Member case study

Inhealthcare and Norfolk Community Health and Care NHS Trust

A new heart failure and lung disease service reduces A&E admissions and bed days

Background

NCH&C provides community-based NHS health and care to everyone, from babies to the elderly, via more than 70 different service locations across Norfolk.

NCH&C is proud to be the UK's only standalone NHS community trust to have achieved an 'Outstanding' rating by the Care Quality Commission (CQC). With a focus is on continually improving the quality of care offered to local people and on improving access to that care, helping people to move seamlessly from one service to another.

The trust identified the need to reduce A&E visits and bed days for patients with long-term conditions, in particular those with heart and lung disease, and approached healthcare innovator and TSA member, [Inhealthcare](#) to help develop a pilot scheme to address the issue.

The solution

Inhealthcare recommended the introduction of a new remote-monitoring service for people with heart and lung disease. 51 patients are currently being monitored on the service.

The remote monitoring service allows patients to monitor their vital signs at home and relay readings directly to a clinician

The service enables clinicians to monitor trends and intervene if readings move outside individual thresholds. It encourages patients to recognise changing symptoms and promotes self-management of their conditions.

The self-testing service is for patients who have recently experienced heart failure or chronic obstructive pulmonary disease and need to be monitored to ensure their vital signs are within safe range and complements the work of the trust's heart failure team which attends to patients in clinic, at home and via telephone consultation.

Outcome

Analysis by the trust of the six months before and after the introduction of the service has revealed the following among a cohort of service users:

- Bed days reduced by 88 per cent
- Accident and emergency admissions reduced by 89 per cent
- GP visits reduced by 65 per cent
- Out-of-hours appointments reduced by 65 per cent*.

The analysis also showed a similar trend for patients who stayed on the normal service, suggesting that nurses were able to spend more time with patients who needed care the most.

"We have the automated call every day at 11am and I provide readings for weight, blood pressure, oxygen saturation and pulse. It provides great peace of mind and lots of people say how well I seem. Some people might be afraid of trying out new technology, but I try to advise them how good it is."

Tony Robinson, 83, a retired transport driver with heart failure

"It is very reassuring for me. If we have a problem, we are straight through to the heart failure nurse - and consultant if necessary - in a very short space of time. The problem is sorted out, usually through medication, and we don't have to go back into hospital or see a GP. It saves a lot of waiting for doctors and cuts out a lot of anxiousness."

"My children and grandchildren supported us with the technology when we first start-ed. Now we have mastered it. This is a great way forward."

Jan Robinson, wife of patient Tony Robinson

[More Inhealthcare case studies can be viewed here](#)

*The Norfolk Community Health and Care Trust analysis is based on the outcomes of 10 patients using the service. In total, 51 patients are registered on the service.

About TSA

TSA is the industry body for technology enabled care (TEC) services, representing organisations including telecare and telehealth service providers and suppliers, commissioners, digital health businesses, housing associations, emergency services, academics, charities and government bodies.

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