HomeFirst – an integrated, community-based admission avoidance project: data from 1,370 patients referred to the service

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Aims

HomeFirst (a multidisciplinary team integrating health and social care) was established in Hertsmere, West Hertfordshire in January 2013 with the aim of reducing hospital admissions by providing rapid response (RR) and virtual ward (VW) services in patients' homes.

Methods

Patients' clinical data were collated and compiled into an electronic database. Details concerning referrals made between January 2013 and June 2014, including patient demographics, diagnosis and outcome, were extracted. Admission rates per 1,000 population were compared with those from neighbouring boroughs.

Results

The service received 775 RR and 595 VW referrals, of which 90% were considered appropriate. The average age was 83.9 years. The majority of patients were referred to the RR service from GPs (72%). Other sources of referral included accident and emergency departments, intermediate care and the ambulance service. All VW referrals were from GPs. The most common reasons for RR referral were urinary and respiratory infections (28%), falls and reduced mobility (22%), social care breakdown (12%) and frailty (8%). The mean length of stay for RR was 13.5 days, and for VW 64.9 days. To date, 85% of referrals have been managed in the community, thus avoiding hospital admission. Admission rates in Hertsmere per 1,000 population were lower than those in the neighbouring boroughs. Of the patients surveyed, 78% strongly agreed and 17% agreed that they would recommend HomeFirst to family and friends.

Conclusions

One vision from the recent *Future hospital: Caring for medical patients* report (RCP, September 2013) was to ensure that specialist medical care is provided in community settings. This

innovative project supports the RCP's recommendations for future hospital care. It highlights that a community-based team integrating health and social care can be successful at reducing hospital admissions of older people with complex health needs. The RR arm of HomeFirst has been particularly successful at admission avoidance. Overall, hospital admission rates for patients over 65 years have dropped locally. This reduces the associated complications of hospital admission for the patient and the financial burden of emergency admissions to local trusts.

Conflict of interest statement

The authors have no conflicts of interest to declare.

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