

## Increasing the acuity of community services: rapid response

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### Aims

An integrated care organisation in south London reviewed unplanned admissions. Many admissions in individuals over the age of 65 years had short length of stays (under 2 days), suggesting that they possibly could have been managed out of the hospital with the appropriate support.

Following consultation with existing teams and service user feedback, the acute trust, CCG and local authority collaborated in developing a service model that would ensure that patients' needs were met within the community in a timely manner, improving the patient experience and reducing unnecessary hospital admissions. This service model was the rapid response team.

### Methods

The rapid response team started in October 2013, providing a 24/7 service. Patients are referred by a health or social care professional (eg ambulance service/GP/emergency department) via a dedicated telephone line, manned by a clinician able to provide advice, take patient details and plan their initial review.

On acceptance of referral, the patient is assessed within 2 hours in their own home. The team consists of community matrons (trained in advanced clinical assessment), a physiotherapist and occupational therapist, with input from social care managers if required. Medical input is provided through the patient's own GP and two community consultant physicians.

### Results

In the past 12 months (April 2014 to March 2015), the team has seen 1,300 patients. The scope of the cases includes managing patients with acute problems such as falls, infections, and acute exacerbations of chronic disease, as well as social and mental health issues. 95% of referrals have been reviewed within 2 hours of referral, the majority seen within an hour, with the majority being supported in the community with the help of additional community services.

In the friends and family test for the past year, 97% of patients would recommend the service, with no one not recommending

it. Positive comments include thanks for being able to be managed in their own home, feeling supported and informed by the service.

### Conclusions

From conception to implementation over an 18-month period, the rapid response team continues to develop with a view to expand services to benefit more patients, particularly within the care home setting.

Many other rapid response services do not stipulate how quickly patients can expect to be assessed and data on time to review by similar services are not widely available. The 2-hour assessment target provides reassurance to patients, carers and referrers. ■

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