FLO Action Learning Event

January 29th 2013

Lets get with the Flo!

Presentations...

Local Case Studies

Heart Failure team

COPD Team

ADHD Team

A patients story!

Lisa Taylor Project Manager NHS Midlands & East SHA

Paul Marriott Telehealth

Project Manager , South Tyne & Wear

KEY ACHIEVEMENTS

2 Cohorts now live - Heart failure and COPD

Many more in the pipeline - Hypertension, Diabetes to name just a few

Clinical Engagement approach Nationally recognized as good practice

Part of AIM National DoH project until March 2014 (Target of 1000 patients live we are sure we can do more)

Mainstreaming of Flo by March 2014

Supporting DES, CQUIN and QoF

"FLO is working really well - thanks. I have now had to increase one chaps weight readings to 3 times per week as his weight has gone up since last week, and he is clinically showing signs of deterioration, therefore I need to alter his meds accordingly. FLO means that I don't have to go in 3 times per week. I still visit once per week, and as he gets worse I will have to go in more, but for now it is really helping me gage his condition"

Heart Failure Nurse

Over 20 people attended our first action learning event designed to engage with current & imminent Flo users across Nottinghamshire local health and social care community.

The purpose of the event was to share learning and experiences as a result of using Flo Simple Telehealth so far, so that going forward we can take account of lessons learned & best practice.

Amanda Sullivan Chief Operating Officer for Newark & Sherwood & Mansfield and Ashfield Clinical Commissioning Group (CCG) spoke about the progress made so far in only 6 months. Amanda highlighted the need to learn from each others experiences and consider where the Implementation can be improved and progressed locally. The need for as much data & evidence to evaluate the outcomes of Flo was highlighted.

Sian Clark, Project Change Manager then reminded us what Flo is and introduced the local teams that are now live. Local case studies began with a presentation from Debbie Terry COPD Nurse who highlighted why her team started using Flo and what benefits and outcomes they were hoping to achieve. Debbie emphasised the simple approach to Flo & how patients seemed to be coping well so far.

Elaine Watts then discussed the Heart Failure team's experience. As the first Flo users in Nottinghamshire , they have really run with it. Elaine highlighted the need to pick the patients carefully & that some patients had reported that they felt reassured.

We then heard a patients story about Flo medication reminders & just how something so simple can have an impact on a patient & support them to manage their care needs.

Our final case study was presented by Angela Summerfield and looked at how Flo will support their service to reduce DNAs at the Adult ADHD Clinic held by Professor Hollis. at NUH.

These practical applications of Flo generated lots of questions Hearing the experiences locally & sharing ideas definitely got us all thinking about how best we can use FLO to fit local needs.

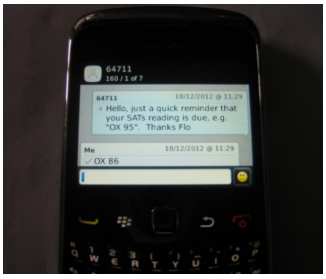
Gathering Evidence...

Although early days Jayne Birch-Jones presented the outcome data so far & also some interesting patient feedback. After just 6 weeks of using Flo patients were reporting feeling reassured by Flo & supported in managing their own condition. They felt Flo should become a standard way of delivery care and did not feel any lack of human contact. As each service/ practice start using Flo, the project team will continue to support the gathering of outcomes data from clinicians and patients.

The final part of the morning session ended with two presentations from our colleagues from Stoke and down from Tyne and Wear. Lisa Taylor gave an excellent view on the exciting National Flo Project (AIM) & new developments with Flo Paul Marriott told us about Tyne and Wear 's approach & views on the different generations of Telehealth solutions & where Flo fits . It gave all a valuable insight into a potential model for Notts local health & social care community.

What you want to use Flo for...

Medication Reminders
Mental health
Nebuliser Reminders
Asthmatics
Smoking Cessation
Patients Likely to Fall



HEADLINES.....

"Horses for Courses (good technology and applications)"

"Keep it simple "

"Flexi-Flo"

"Flo helps me turnover a New Leaf"

"Cheap and adaptive. Simple, let's do it!"

"Fits service to Clients"

"Broadens horizons & adaptability – support for next of kin"

"Benefits of partnership working"

QUALITY

- Encourage patient independence ; continue life-style; no need to stay at home to undertake interventions
- Improving patient experience
- Potential prevention of hospital admission / unnecessary taking of antibiotics/steroids
- Supports independent lifestyle approaches
- Making sure intervention by health care professional is only when necessary
- Major benefit so far is anxiety management and re-assurance
- Reduces reliance on 'Emergency Care' service

INNOVATION

- Diabetic COPD pts starting steroids results in unpredictable BMs, therefore diabetic team being able to regularly monitor patients during exacerbations & whilst receiving treatment could prevent hyper/hypo glycaemic events.
- Using Flo in different ways to achieve different outcomes
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- Any reduction in face to face meetings will improve case management in general
- Improve communication with patients
- Using Flo for transient patients e.g ADHD
- Supports independence not dependence

PRODUCTIVITY

- Reduce amount of hba1c tests done to assess diabetes control, as regular contact with Flo will hopefully improve compliance. Clinic appts will still be required although home visits could reduce.
- Being able to prioritise my workload and patients visits
- Early Supported Discharge – shift care into the community
- Joined up working with social care is to be explored
- Healthcare professionals focus on necessary intervention

PREVENTION

- Winter pressures result in patients struggling to go to appointments at hospital, with GP/PN & nurses getting to patients' homes. FLO reduces risk of hospital admission.
- Help prevent pts hypoglycaemia events by advising medication dose
- Could identify other conditions i.e. infection as this raises levels (Diabetes)
- Early Supported Discharge, shifting care into the community
- Provides reassurance & remote support to patients when at highest risk of exacerbating/being admitted to hospital.
- Gves peace of mind to clinician that patient is managing in between allocated visits

Look on the Web!
www.networks.nhs.uk/nhs-networks/simple-telehealth

Project Team : -

Amanda Sullivan , Exec Lead

Dr Nigel Marshall, Clinical Lead

Jayne Birch-Jones Programme Manager

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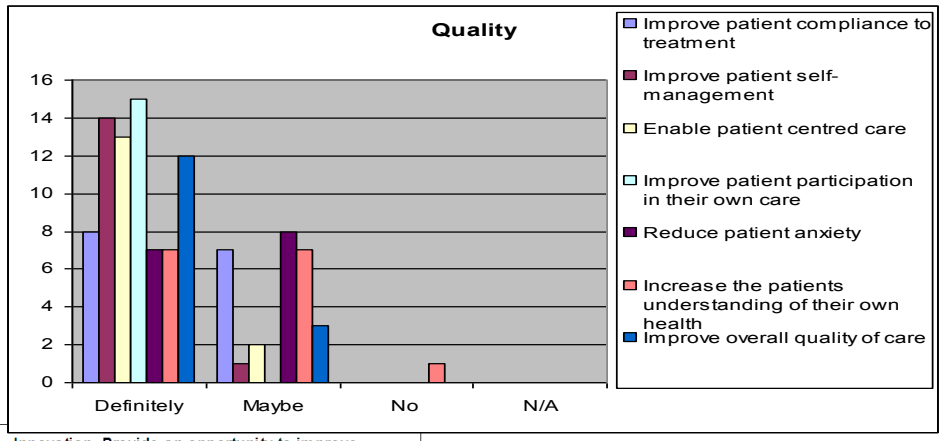
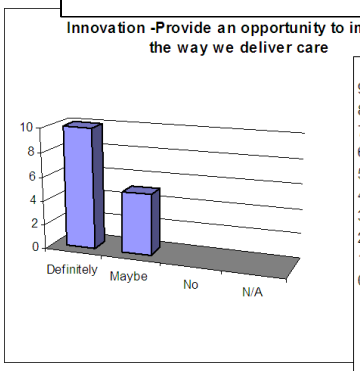
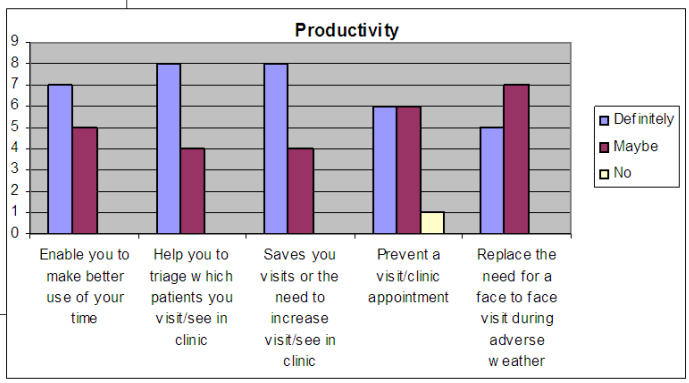
A Big Thank You to all that attended the event if you require any further information or support then please do not hesitate to contact Jayne & Sian

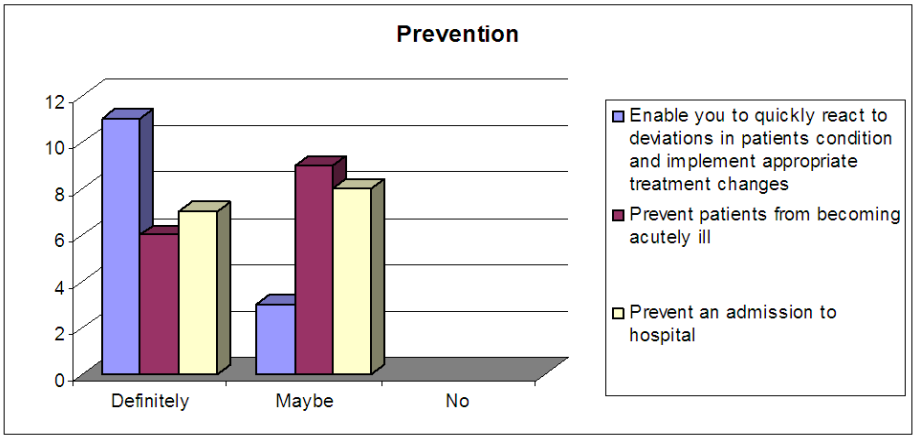
WHAT YOU SAID……

All participant's were **CALLED TO ACTION** and asked to complete feedback based on all the stories they heard throughout the morning and experiences shared. So what was your response? You felt that Flo can….









FLO NEW DEVELOPMENTS…FLO APP/LANDLINE AND WHZAN BLUETOOTH

DIARY DATE: 2nd FLO ACTION LEARNING EVENT—15TH MAY, 9.30-12 NOON