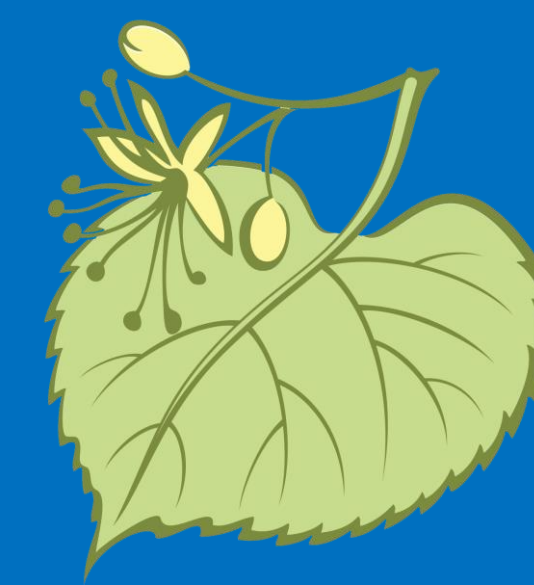


# Home Truths

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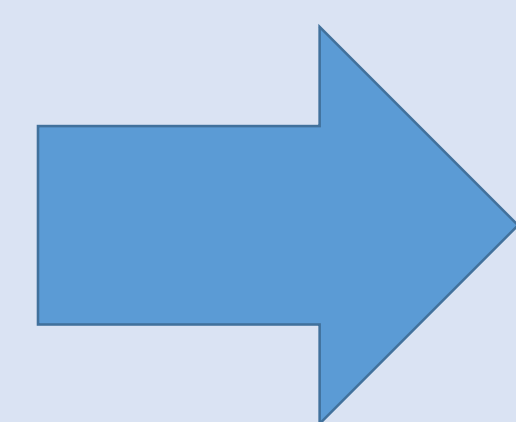
# NHS



## How do you triage?

Traditionally, the receptionist booked HVs if the patient was:

- Palliative
- Bedbound
- So ill that moving would cause harm



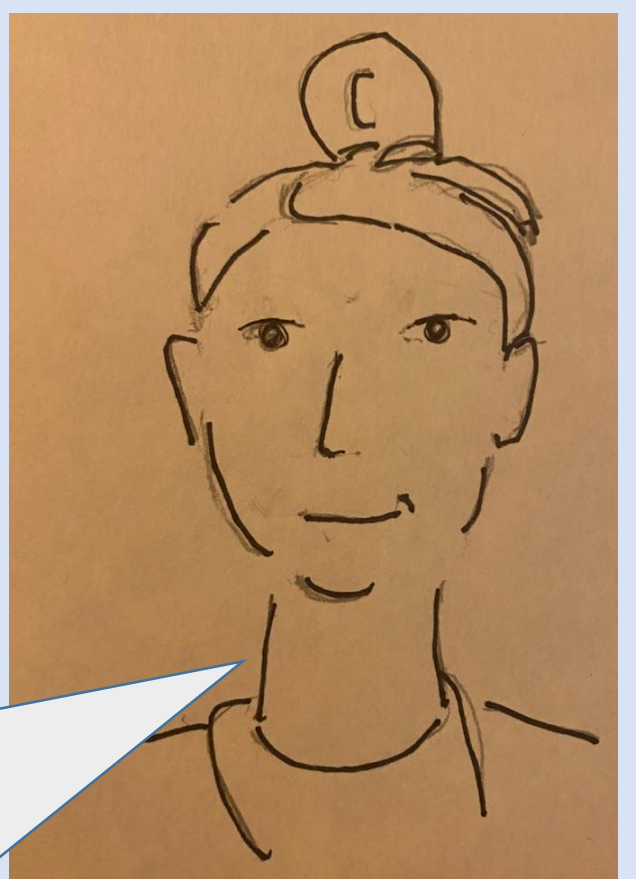
## What was the aim of the project?



With an ageing population and fewer GPs to provide a home visiting (HV) service, this project aims to assess whether our triage system assures the HV requests meet the needs of our patients.

## Why is it important now?

HVs offer the privileged position to assist vulnerable and complex patients in their home setting. However, if the clinician is home visiting, fewer patients get seen in clinic. A clinician's time is better used if all requests for HVs are triaged by a GP.



In our practice, the HV request goes directly to a triaging GP who will either:

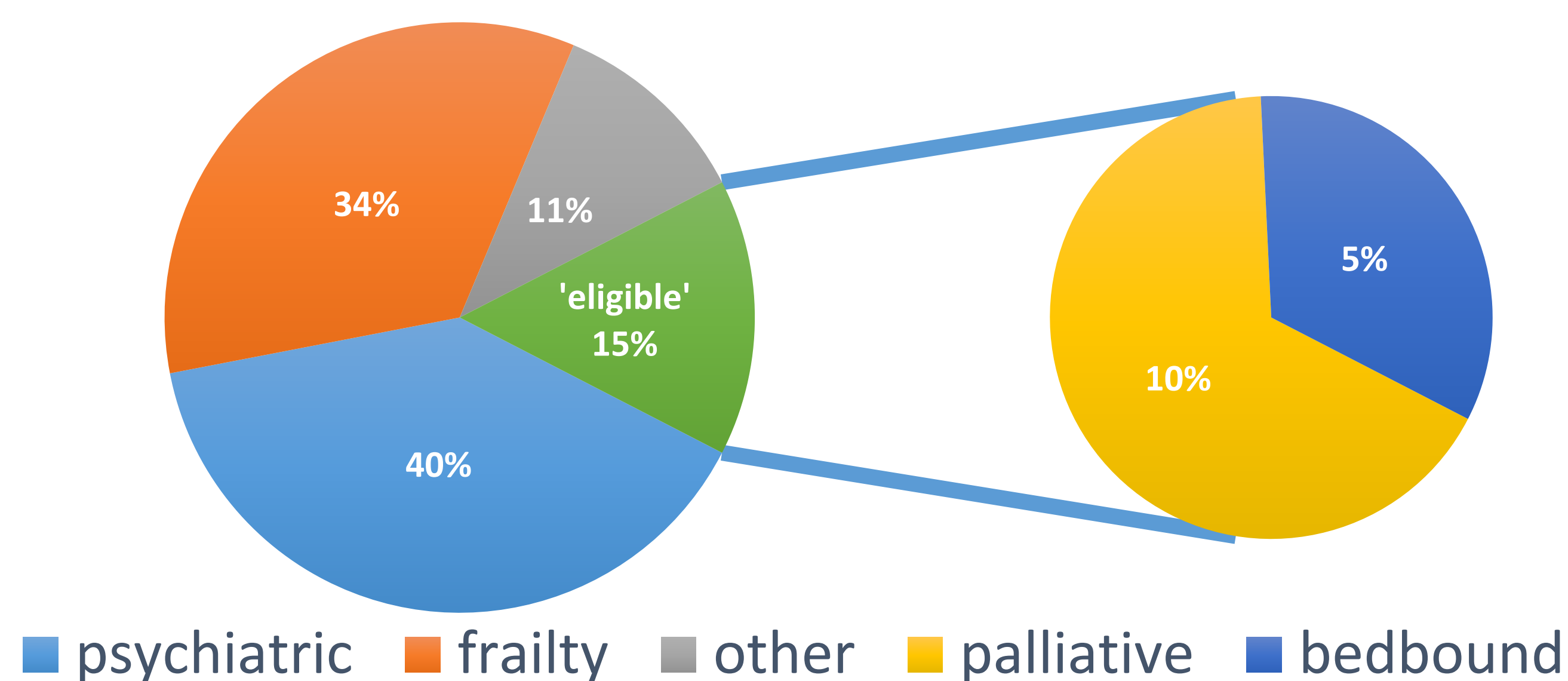
- Call the ambulance
- Perform an on-the-day HV
- Book a routine HV within the next 4 days.

I retrospectively reviewed all routine HVs performed between 1/8/24 – 1/10/24.

## What did you find?

[56 routine HVs performed]

Reasons for home visits performed between 1/8/24 - 1/10/24



- The majority of HVs performed would traditionally not be considered 'eligible'; **these are patients with unmet needs**
- HVs ranged from welfare checks, heart failure, multiple sclerosis, chronic pain, infection causing AF, COPD, lymphoedema.
- Psychiatric (39%) and frailty (34%) made up the majority of HVs
- Need to review the practice register and code patients with Rockwood frailty score >6 in order to project number of home visits needed

Population practice size	15 888
Housebound	173
Palliative	33
Psychosis	238
Dementia	88
Substance misuse (leading to self neglect / frailty?)	162

## What impact does this review have?

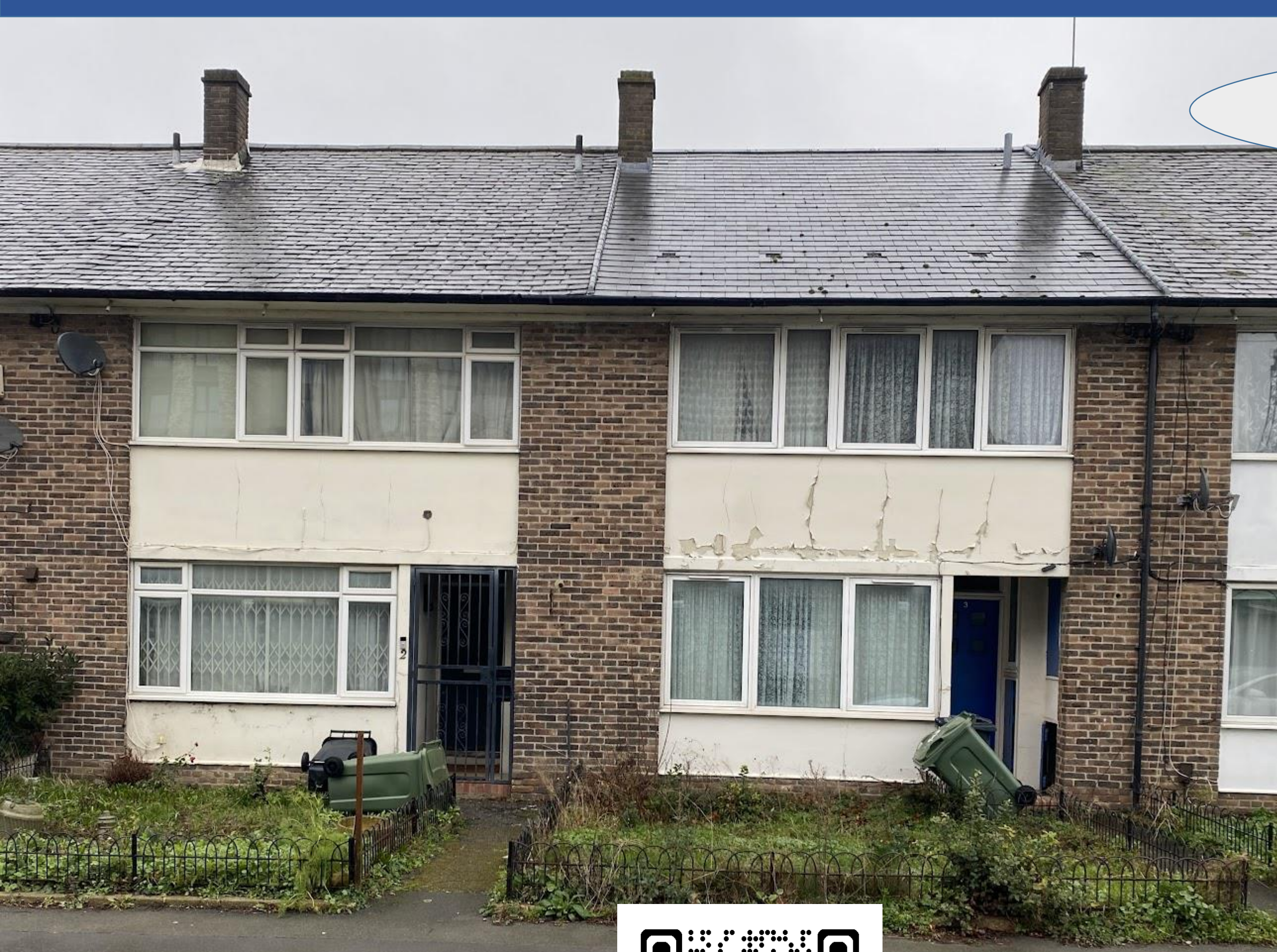
Demonstrates that triaging by a GP

- Reveals the breadth of conditions that require a HV
- Ensures that clinicians provide a service to vulnerable patients
- Can build closer links with other community services available

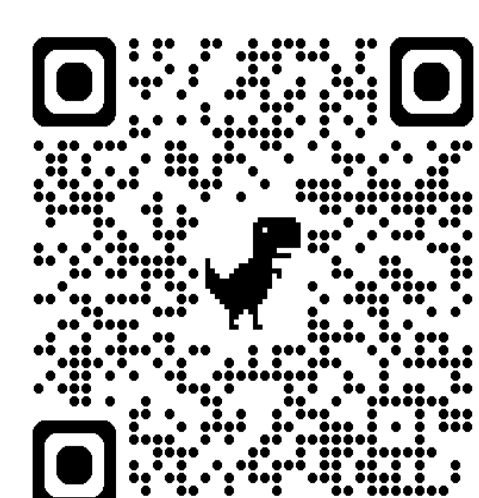
Illustrates how 'care in the community' struggles to provide for vulnerable patients.

Investment in community services is needed.

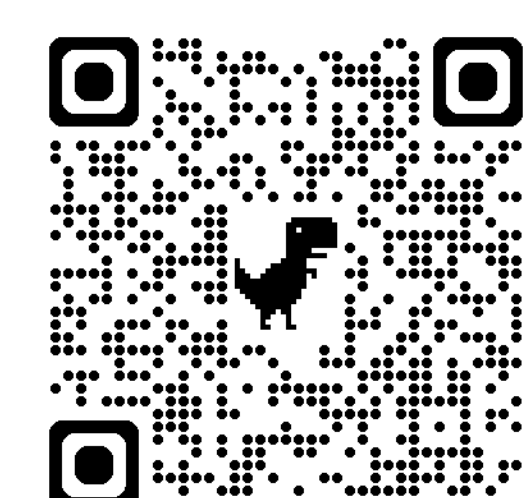
Further studies need to look at potential innovative services to provide more HVs for vulnerable patients.



Visit our triage system



How does your practice schedule in home visits?  
Take the survey:



See survey result:

