#### COLLAR AND BRACE AFTERCARE SERVICE (CBACS)

Bridging service gaps through innovation

Jennie Taylor Band 7 CBACS Physiotherapist







#### BACKGROUND

- Trust wide increased length of stay (LOS) in medically fit patients whose treatment requires use of a spinal orthosis
- Limited recognition and support from health and social care community services regarding this group of patients
- Ageing population with a limited social support
- Reluctance of community care staff to be trained in orthotic and spinal management
- High frequency of this patient group— neurosciences centre for Essex and cancer centre









### **CBACS – ESTABLISHED IN 2017**

*"Enabling patients who wear an orthotic for spinal stability to return to their preferred discharge location"* 

- Original service launched in May 2017, enhanced service supported by local CCG's and Social Services from August 2017
- Problem raised through extensive Incident Reporting, delayed transfer of care meetings (DTOC) and patient / family complaints
- Funded for x1 B7 Therapist and x1 Band 3 Assistant





## **AIMS OF THE SERVICE**

- Navigation and advice
- For collar when required issue of device
- Early engagement with patients and their family
- Patient navigation /advice for ward therapists (in-reach service)
- Expert orthotic advice and issue (collars)
- Community and outpatient care
- Community demonstrations (collars and braces)
- Out-reach service to other Trusts to assist in safe discharge planning
- Increase exposure and confidence within BHRUT's staff



## WHAT CAN GO WRONG?

- Tissue damage increase risk of pressure sores
- Neurological changes
- Patient non-compliance with device
- Patient/family lack of understanding of risks













# WHAT OUR SERVICE DOES

- Provides personalised holistic care
- Supports patients and family alike
- Assists in navigation of spinal fracture journey



- Attends relevant consultant appointments to ensure patients understand in layman's terms what is happening
- Provides orthosis specific hygiene pad changes, skin cleansing, hair washing and shaving
- Monitors, treats and escalates skin integrity issues
- Provides education, demonstration and support to care agencies and care homes
- Monitor neurological status and escalate any changes



#### **SHAVING**









#### HAIR WASHING





#### **ANAESTHETIC FEEDBACK**

Dear Jennie,

I wanted to email and thank you. I found your help in theatre of a tremendous benefit and I believe the success of the whole procedure was made possible due to your help. This patient was a high risk patient and none of the other staff (including myself) would have been comfortable handling such a high risk patient understandably, due to the rarity of such patients. I have personally felt safer and I believe the patient did as well, because he has your trust and knows how to coordinate best with your instructions.

As you have seen, this was a specific circumstance and we were limited in the choice of anaesthesia for this patient. The whole procedure was done in a timely and professional manner, to the benefit of our patient and to the benefit of our Trust. I am extremely grateful for your professionalism, your attitude to do above and beyond your regular duties and sincerely do believe you made all the difference.

If I can be of any help, please do let me know.

Kindest regards,

Viktor Duzel MD PhD Consultant Anaesthetist Clinical Governance Lead for the Department of Anaesthesia





## **CASE STUDY – MR T**

- Admitted 21.2.18
- Discharged home 17.3.18
- Outpatient/ community appointments = 75 (2 people per visit as required a head hold)
- Discharge date from CBACS 20.8.18
- 167 bed days saved @ £309 per night





# **COLLABORATIVE WORKING**

- DVLA
- Police
- Community Hospitals
- Safe guarding teams
- GP
- DN's
- Hospice
- Psychologist
- Anaesthetics











Organisation	Total number of patients	Total bed days saved	Total cost saving
BHRUT	98	2730	£933,166
Other Trusts	4	228	£88,758
NHS	102	2958	£1,021,924





# WHAT DO THE SAVINGS MEAN FOR THE NHS?

- 3x consultants and
- 3 x Band 7 staff and
- 5 x Band 6 staff and
- 7 x Band 5 staff and
- 5 x Band 3 staff



#### You could staff an entire ward based on the current cost savings!



#### WHAT OUR PATIENTS SAY

"I don't know what I would of done without this service" "The care I received was second to none"

"The A team"

"The sheer existence of this service is inspired"



## **THANK YOU!**

We'd like to take this opportunity to thank the neurosciences & medical therapy teams at Queen's Hospital for all their support and wisdom

> With special mention to: Mark Mainwood B8a OT Lynn Wootton B8a PT Charlotte Griffiths B7 PT Prina Patel B7 PT

Any Questions?

