

Rotherham Doncaster and South Humber NHS Foundation Trust

# PLICS and Clinical Engagement The RDASH journey so far...

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## The Trust

We operate services across Rotherham, Doncaster and North Lincolnshire.

#### Providing

- All age mental health services
- Children's services
- Community integrated services
- Learning disabilities services
- **Forensic services**
- Drug and Alcohol services

Employ over 3,700 people

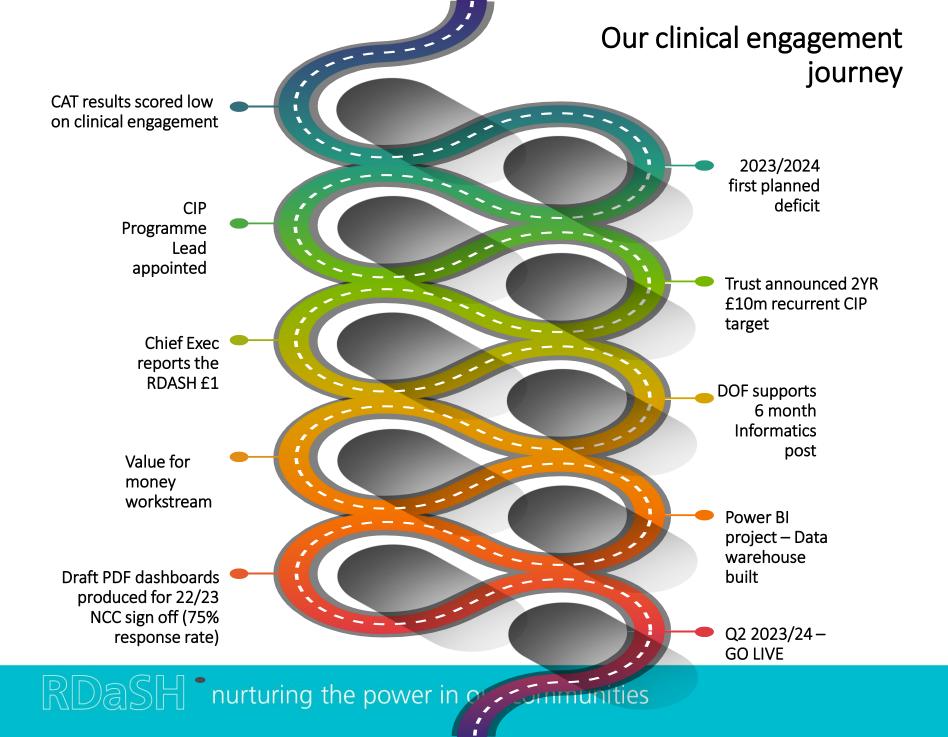
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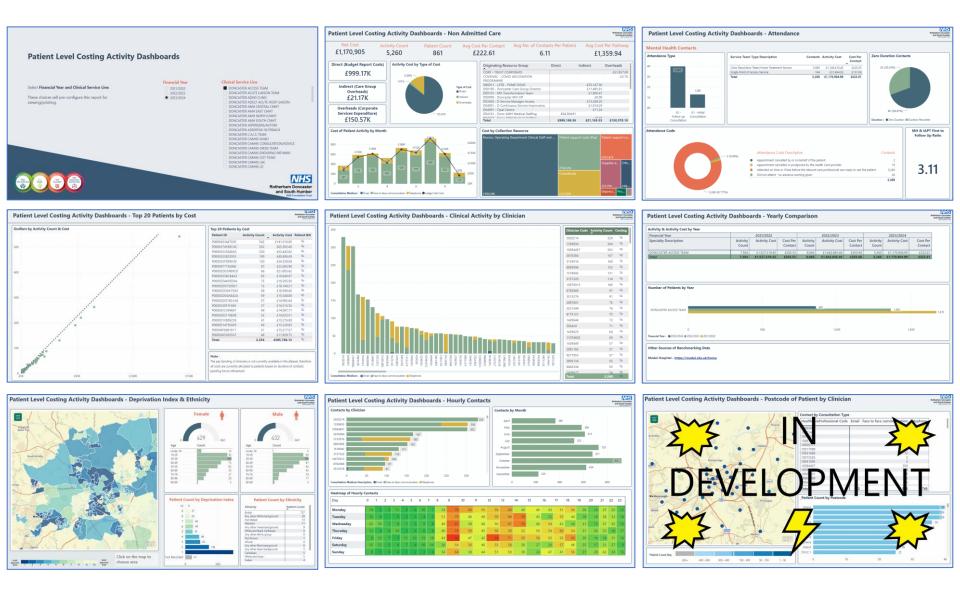
£200m annual turnover

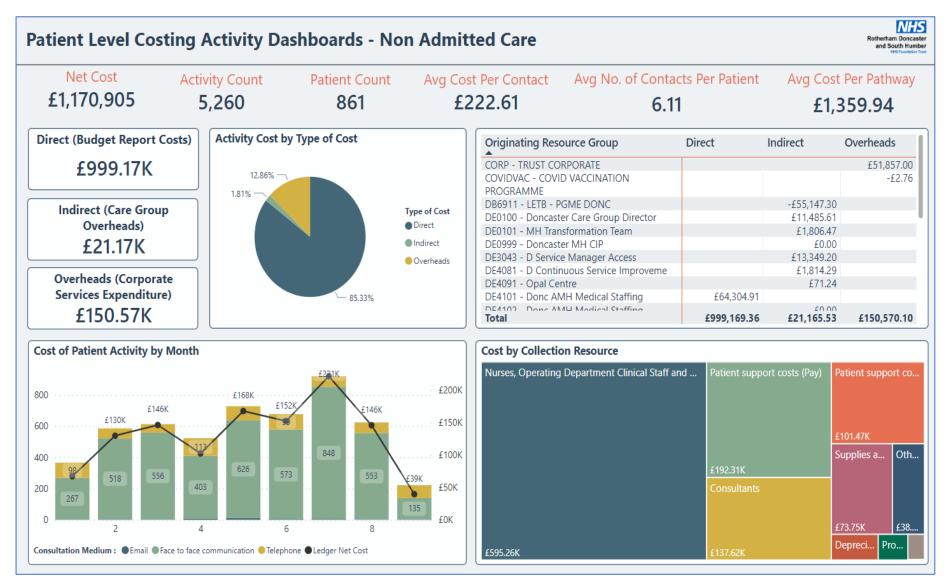


Contract Income and Costing - 3.00 WTE



#### Our current dashboard offering......





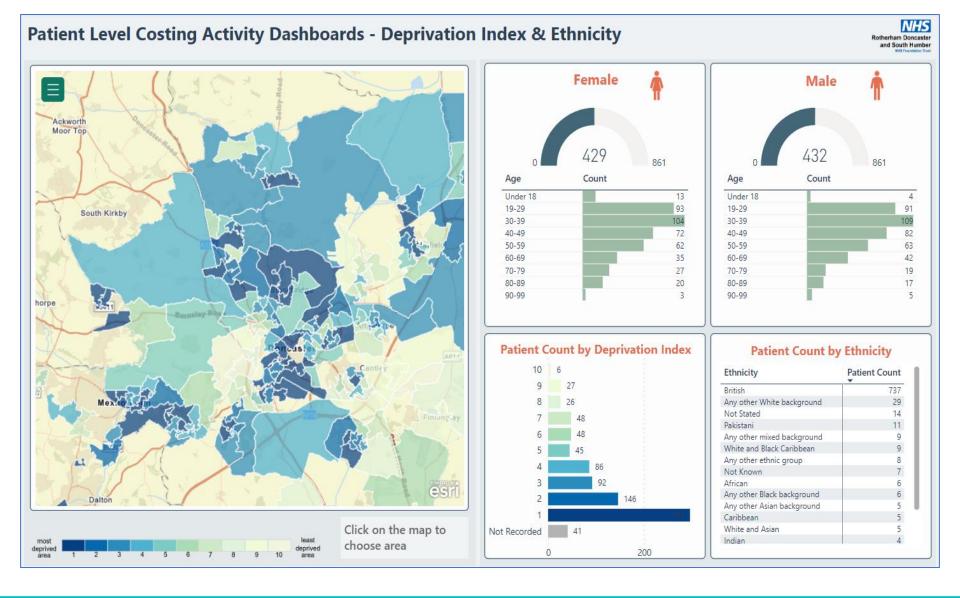
#### Patient Level Costing Activity Dashboards - Top 20 Patients by Cost

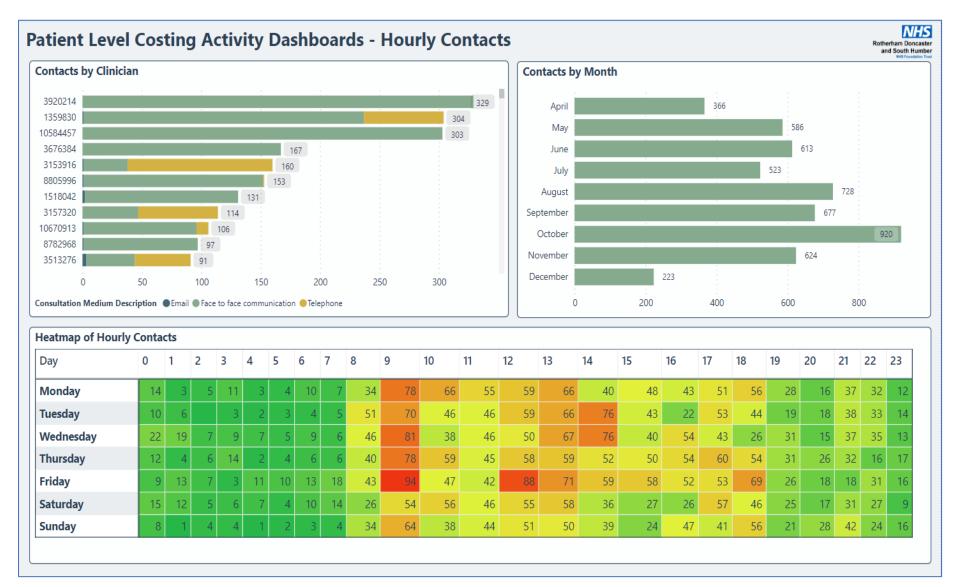




By Clicking on the icon under the Patient Bill header for each patient, this will open up a separate report – see next slide

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Finance											Λ	HS								
SLR - Analysis Report - Patient Bill									Rotherham Doncaster											
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Patient ID Patient Full Name NHSNumb					nber															
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Contacts																				
						April		Мау		June		July		August		September		October		
Cost Object Type Desc	Spe	cialty Descr	ription			Contac	:t		Contact		Contact		Contact		Contact		Contact		Contact	C
⊡IP Episode							0	£0.00	0	£0.00	1			£35,401.30	1	£40,748.99		£39,434.51		£40,748
■Mental Health Care Contact & I							0	£0.00	1	£46.58				£26,881.11	230	£60,397.31		£14,768.68		£20,620
							0	£0.00	0	£0.00				£1,280.88	3			£0.00		£1,280
Total							0	£0.00	1	£46.58	48	£29,394.94	107	£63,563.29	234	£102,106.96	58	£54,203.19	84	£62,650
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⊡IP Episode							0	£0.00	0	£0.00	1	£17,151.15	1	£35,401.30	1	£40,748.99	1	£39,434.51	1	£40,748
⊡Mental Health Care Contact & I	IAPT						0	£0.00	0	£0.00	0	£0.00	30	£7,906.21	39	£10,278.07	26	£6,852.05	46	£12,122
	-						0	£0.00	0	£0.00	0	£0.00	33	£8,696.83	11	£2,898.94	0	£0.00	0	£0
							0	£0.00	0	£0.00	0	£0.00	0	£0.00	6	£1,581.24	13	£3,426.02	12	£3,014
							0	£0.00	0	£0.00	0	£0.00	12	£3,162.48	18	£4,743.73	0	£0.00	0	£0
							0	£0.00	0	£0.00	0	£0.00	0	£0.00	20	£5,270.81	4	£1,054.16	0	£0
			,				0	£0.00	0	£0.00	0	£0.00	0	£0.00	25	£6,588.51	0	£0.00	0	£0
							0	£0.00	0	£0.00	3	£790.62	3	£903.98	1	£263.54	1	£263.54	15	£3,953
							0	£0.00	0	£0.00	4	£1,054.16	0	£0.00	16	£4,216.65	0	£0.00	0	£0
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#### Now that we have gone live......

- Assisting clinical decision making (see case study)
- Driving data quality improvements
- Shift in conversation between finance and clinical services
- Driving further benchmarking workstreams (working wider ics providers)
- Training and development between costing and management accounts
- Visibility promoting costing much further than the NCC

#### Still on a journey......

- Areas of our costing need to be developed
- Data quality
- Not all service managers are engaged
- Capacity and priorities (for finance and clinicians)
- Wider team upskilling via training and development



#### Clinical feedback received......

"We are still in our infancy in truly getting the full benefits from this dashboard and already it has influenced new ways of working in the community nursing teams. We used the patients by cost data to look at different ways of care deliver for the patients who we visit to administer insulin too. From this we have a new upcoming SOP for the use of Libre machines for housebound patients. This has resulted in patients being able to confidently self-care and reduced or stopped the need for nursing input. I have attached a example we have shared for good practice and innovation. The simplistic viewing and being able to change viewing options for someone like me who is dyslexic and often struggles with data analysis this has been by fair the easiest and best viewing dashboard I have navigated. I am very eager to get to grips with the dashboard more to influence the future care of the people in our communities. " (Kathryn Bebb)

#### Case Study.

64 year old man, newly diagnosed type 2 diabetic on insulin 3 times daily came onto the district nursing caseload for administration of insulin. Patient is not housebound, lives with his wife however struggles to complete his own blood glucose readings due to eyesight problems making it difficult for him to see his blood glucose monitor screen or the blood when he has pricked his finger to align this to the testing strip. Collaboration with the District Nursing team and the Specialist diabetes team highlight this patient qualified for a Libre senor.

Libre senor fitted by Pharmacy Technician and empowered and educated to care for his own diabetes. With 3 days of support patient was fully independent with operating Libre Senor to obtain glucose levels and administration of his own insulin. Patient since discharged from the District Nursing caseload with only a follow up visit to ensure compliance and management. Having the Libre sensor has highlighted that patients blood glucose levels are running slightly low therefore data pulled from the sensor for diabetic nurses to adjust insulin regime remotely to ensure the patient is administering therapeutic doses to manage his diabetes.

The patient was discharged from the caseload within 9 District Nurse visits.