



# Virtual Wards and Frailty

## Overview:

### **Adapting Covid remote monitoring pathways to provide a multidisciplinary 'hospital at home' service for patients living with frailty**

**In the first months of the Covid-19 pandemic, Mid and North Hampshire GPs with Hampshire Hospitals NHS Foundation Trust (HHFT) set up early Covid oximetry at home (CO@h) services. This led to the NHS South East regional medical director commissioning the three AHSNs in the region to work with Integrated Care System (ICS) leadership, primary care, key clinical leaders, and others to support the roll out of CO@h services across the South East footprint. This work was further supported by NHS Improvement's national commission of the Patient Safety Collaboratives to support the national rollout of CO@h and Covid Virtual Wards (CVW).**

The success of the 'step down' CVW approach has led to work exploring the use of virtual wards for other clinical specialties with the aim of relieving pressure on inpatient beds, particularly considering ongoing pressures due to Covid and elective backlogs of patients.

One key group of patients who are benefiting are those living with frailty, with the development of integrated frailty virtual ward hubs which offer the virtual ward remote monitoring focus plus extended support. They provide the services of a multidisciplinary community team to deliver the care these patients require, to support an earlier discharge from hospital to keep them safely 'at home'.

▶ [Read more about the secondary care Virtual Ward model](#)

## The issue:

**Throughout the Covid-19 pandemic the implementation of CO@h and CVW services have demonstrated a positive impact on reducing bed use in secondary care by supporting self / remote monitoring, enabling patients to leave hospital sooner and reducing inappropriate admissions.**

With the ongoing pressures on acute beds, trusts are exploring which other groups of patients with long term conditions would benefit from the virtual ward concept. People living with frailty, who may also have a range of long term conditions, have been identified as a key group who could benefit from spending less time in hospital if they had the required support in place. This would include appropriate remote monitoring and input from a multidisciplinary care team (primary care, community care, social care, voluntary services) and a personalised care plan to keep them safely out of hospital.



## What we did:

**Following on from our work across Wessex to support the implementation of CO@h and CVW, Wessex AHSN's Healthy Ageing programme team has continued to work with our local partners to understand the move into frailty virtual wards (FVWs) and the support the AHSN could bring. In parallel, the team has completed a review of literature, as well as meeting with the national Ageing Well team and other key groups from around the country to understand new approaches and models of care that are being introduced.**

An initial repository of resources was created and tested and has now been superseded by guidance published by NHS England and NHS Improvement **Frailty virtual ward (Hospital at home for those living with frailty)** and the creation of a dedicated Future NHS collaborative platform workspace - Virtual Wards Network (access granted on request). A Frequently Asked Questions support document (requested by local partners) is being produced to support rapid navigation to best practice, advice, guidance and case examples on the provision of FVWs.

Wessex AHSN Healthy Ageing programme convened a National AHSN Healthy Ageing network meeting in January 2022, linking together AHSN teams involved in the development of FVWs, as well as members of the NHS England and NHS Improvement team developing FVW guidance and support.

We continue to work with our local teams as the frailty virtual wards develop, building our knowledge of the specific needs of these patients to allow them to remain at home whilst still receiving the care they need. Evaluation of our Wessex Acute Frailty Audit (WAFA) 2021 has shown one of the key themes for a pan-Wessex project is around understanding the implications and needs of these integrated frailty virtual ward hubs (the additional services needed compared to the more standard remote monitoring needed by other groups of patients), learning from new service models around the country and providing guidance and toolkits to support implementation and learning.

► **[View the Frailty virtual ward \(Hospital at home for those living with frailty\) guidance](#)**

### **Frailty outputs / toolkits**

To support the future growth of virtual care delivery, our Insight team continues to work and support our local systems in the rapid evaluation of virtual wards and in sharing emergent best practice approaches.

To complement this, Wessex AHSN's Healthy Ageing team has developed a number of frailty toolkits, including:

- a comprehensive **Urgent Community Response** toolkit to encourage a truly integrated care workforce.

► **[View the toolkit here](#)**

- the Wessex **Comprehensive Geriatric Assessment** toolkit to deliver multidisciplinary person centred care in any setting.

► **[View the toolkit here](#)**

- a **Multidisciplinary Team (MDT)** toolkit to provide a framework for health and care professionals in delivering best practice to older adults living with moderate to severe frailty within the community.

► **[View the toolkit here](#)**



- a **hydration at home** toolkit to provide community carers (care homes, domiciliary care workers, unpaid carers and volunteers) a basic awareness of hydration needs in older people.

▶ [View the toolkit here](#)

- the **Older People's Essential Nutrition (OPEN)** toolkit to increase awareness of undernutrition.

▶ [View the toolkit here](#)

We worked with Hampshire Hospitals NHS Foundation Trust, in collaboration with the London Clinical Frailty Network, Imperial College Healthcare NHS Trust and Health Education England, to create and launch a special frailty e-learning module: **Frailty, E-Learning for Excellence in Frailty Identification, Assessment and Personalised Care (Tier 1 and 2)**.

We also convened a national AHSN networking meeting in early 2022 to link all healthy ageing programmes with an interest in developing frailty virtual wards. The group intends to collaboratively develop resources that can be tailored to local regions.

## What impact did it have?

**From 31 December 2020, all ICSs/CCGs in the South East region (and Dorset) had gone live with Covid oximetry @home pathways.**

In early 2021, Covid Virtual Wards had been successfully implemented in **96% of trusts** in just two months, as a result of support to NHS England and integrated care system partners from AHSNs, Patient Safety Collaboratives (PSCs) and other stakeholders.

The success of the Covid oximetry @home work in Wessex significantly influenced national policy and the development of virtual ward models.

As of March 2022, our frailty e-learning module has been launched across all four nations, resulting in:

- **8,725 enrolments**
- **21,172 launches.**

**63% of Wessex trusts** have downloaded our frailty module into their e-learning management system and is included as a key resource in the frailty virtual ward 2022/23 guidance. During May 2022, we will publish a 6-month evaluation report of the frailty e-learning module, co-authored with the London Clinical Frailty Network. It provides rich insight into the impact of the frailty e-learning to date, demonstrating emergent change in practice, increased staff confidence and frailty awareness.

The Healthy Ageing Business Plan 2022/23 aims to build on its local, regional and national networks to support systems in exploring new models of care, understanding integrated frailty virtual wards opportunities and to optimise the sharing of information (e.g. comprehensive geriatric assessments, screening) across settings. To further add value across Wessex, the programme is supporting NIHR Applied Research Collaborative (ARC) Wessex to deliver a series of listening events for one of the national **NHS Insights Prioritisation Programmes (NIPP)** to understand the accessibility and acceptability of digital and remote monitoring tools for older people.



**“There is such a wealth of information out there about frailty virtually wards; providing a resource that helps busy clinicians quickly find answers to frequently asked questions about frailty virtual wards is invaluable.”**

GP and CCG clinical chair

**“The AHSNs/PSCs have been absolutely fantastic to work with. They have not just supported rapid scale and spread in record time, they have created invaluable learning networks that have enabled us to continuously improve and update guidance and best practice. We aim to continue to build on this agile approach with AHSNs next year and expand out into other @home pathways, which is really exciting.”**

**Tim Straughan**

Director, NHS @home

**‘The AHSN team have demonstrated a can-do attitude, pushing the boundaries in providing not only resources that will be utilised within the Wessex geography, but nationally.’**

Hampshire Hospitals NHS Foundation Trust

## Strategic alignment



**Want to find out more?**

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