

Integrating health and social care to improve outcomes

Summary

Like most authorities, the pandemic created adversity and we had to rise to the challenge in terms of the gap in insight for our organisation. Working with Digital Health and Social Care Wales provided a great opportunity to link health and social care to provide a better understanding of COVID19 and some of the pressures it was putting on our front-line services. Our collaboration resulted in several automated and interactive PowerBI reports that have helped our decision-makers to understand demand across the county.

Synopsis

This piece of work was a first in Wales and since we completed the work it has been shown across the country, it has led to a phase two whereby we will concentrate on providing insight into rehabilitation services.

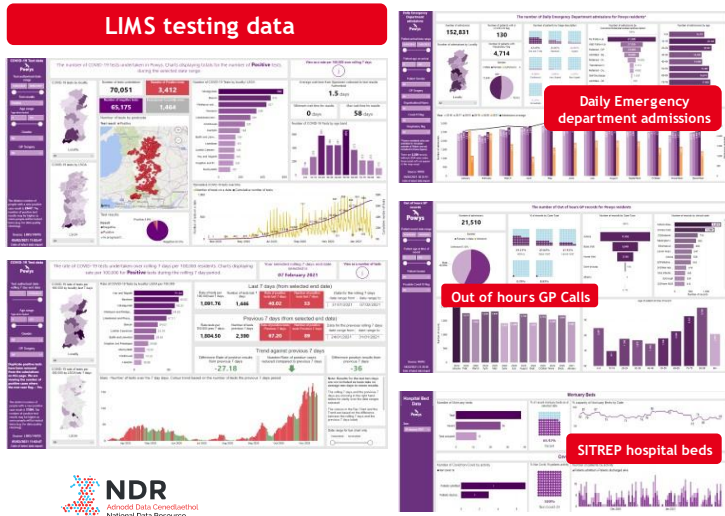
The objectives for the work were to provide early insight into some of the areas in health and social care that would help to support our response to COVID19. We wanted to be in a good position to understand at a local level. Previously we had been reliant on data coming Adhoc in terms of testing and positive cases. Our work began in July 2020 and finished in late September. We provided reports (like those shown below) which are visually appealing and provide geo-spatial analysis, splitting the county of Powys into 13 localities (main town and surrounding area). This approach is something we have adopted for a while and enables the viewer to have an overview, whilst at the same time easily identifying what is happening at a lower level using the thematic map.

Each report provided a trend and the viewer can easily select the timeframe that they wish to view. The approach is to turn complex data into something simple that anyone can understand. The reports were presented nationally and have provided a snapshot to show that you do not need very long to produce something that will have great impact. These reports are self-sufficient once built and automatically refresh four times a day. They are directly connected to the national source system and provide a richness of data not experienced before. The cost of producing these is minimal, yet the return on investment can be powerful. For instance, you can drill into the data and understand that ambulance calls are most common for those over 70 and are due to falls, knowing facts like these can aid commissioners to help support and encourage telehealth care technology in certain areas of the county.

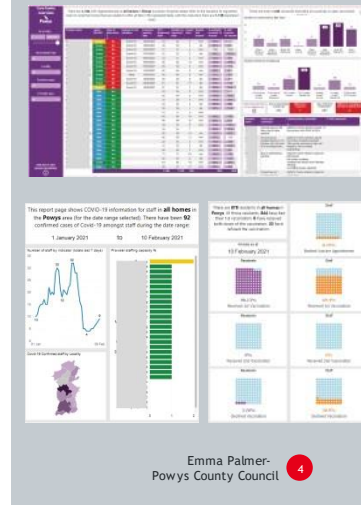
Another insight is that there were nearly 1,300 out of hours GP calls relating to UTIs (in 2020-21 alone). The UK average cost of a 20 minute call is £70, given Powys is the second most sparsely populated county in the UK and has poor road network, this £70 could be increased to £100 – putting the cost of out of hours GP calls relating to UTIs at £130,000. We do not have the data for those who are hospitalized due to UTIs but know this costs £400 per night and each time someone is in hospital they will inevitably need reablement once out of hospital. The point is with this data and the right stakeholders around the table, what may look like interesting data to some, can prove extremely valuable to others. It encourages healthy deep dives and in terms of cost-avoidance in can save a significant sum of money.

We have found that geo-spatial analysis is extremely powerful and has a positive impact on service planning and delivery.

NWIS collaboration - proof of concept



Automated solution to Care Home reporting



This project was a collaboration between Powys County Council and Digital Health and Social care Wales. We worked together to build a hub of data (as shown above). Each of these reports focuses on different areas, but there is a general theme across them all.

The reports have been shared with some of our key partners to ensure that we can take a collaborative approach to COVID and focus on providing the right support in the recovery. Whilst the project initially started to help with our approach to COVID19, it has led to us now focusing on the next step, providing insight into rehabilitation services. There is a wealth of health and social care data, but ensuring it is available for others to view is imperative. As an organisation we have adopted a 13-locality approach and wherever possible connect directly to the data to ensure we build once and use many times. We are encouraging our services to self-serve and question the data. Data is fascinating and can lead to so many questions, some may not be answered using the information in front of you, but by talking to others or doing some further analysis elsewhere it can build up a rich picture and help you understand how to refine services and processes to ensure that you are doing the best job that you can and providing better outcomes, particularly to those most vulnerable in society.

What should LARIA members learn from your award entry?

Anything is possible if you give it a go. Don't fear change and the unknown, instead embrace it. Our work with Digital Health and Social Care Wales has enabled us to collaborate with others outside our usual circles and learn new tools and techniques. It has also provided our social care service with insight into health and helped them to shape their own services to intervene earlier and reduce costly interventions further down the line.