




Background to Avoiding Unplanned Admissions Enhanced Service (England) 2014/15

Many unplanned admissions are for patients who are elderly, infirm or have complex physical or mental health and care needs which put them at high risk of unplanned admission or re-admission to hospital. The Enhanced Service is designed to help reduce avoidable unplanned admissions by improving services for vulnerable patients with complex physical or mental health needs, who are at high risk of hospital admissions or re-admission.


A Practice Overview of the Unplanned Admissions Enhanced Service (ES)


As per BMA recommendations, the Enhanced Service requires you to:

- Establish the case management register
- Inform patients that they are on the register and of their named accountable GP and care co-ordinator
- Put care plans in place for patients on the register
- Offer a bypass number for care providers to discuss patients requiring a potential hospital admission
- Offer same day telephone access to patients on the case register with an urgent medical problem
- Make contact with patients on the case management register following discharge from hospital, to ensure co-ordination and delivery of care
- Regularly review emergency admissions and A&E attendances of their patients from care and nursing homes
- Undertake monthly reviews of all unplanned admissions and readmissions and A&E attendances of patients on the case management register
- Complete a quarterly reporting template for your CCG

 **Note** - For more information read [The BMA Guidance for Enhanced Services 2014/15](#).

Unplanned Admissions - What you need to do....

 Patients must be placed on the Unplanned Admissions Register by 31st July 2014	
Step 1	Download the Unplanned Admissions Outcome Manager
Step 2	Run the Admission Risk Stratification and Register Manager report to identify the over 18 register
Step 3	Process patients through the QAdmission calculator to record the QAdmissions risk score
Step 4	Review the Admission Risk Stratification and Register Manager to view the QAdmission scores and identify the 2%
Step 5	Add patients to the Admission Avoidance Register by creating a Personalised Care Plan Manager Register (2% target) <ul style="list-style-type: none"> • Read code - 67DJ Informing patients of named GP (mandatory for reporting) • Send the invite letter • Read code - 9NS5 Personal Care Plan Offered (optional) • Read code - 8CV4 Admission avoidance care started (mandatory for reporting)

 Personalised care plans should be in place for all patients initially added to the register by the end of September 2014	
Step 1	For each patient record and complete Personalised Care Plan Manager template <ul style="list-style-type: none"> • Read code - 8CMD Personal Care plan completed (mandatory for reporting) • Read code - 8CSB Admission avoidance care plan agreed (mandatory for reporting)
Step 2	Print a Personalised Care Plan that both the GP and the patient sign

In Addition you must:

- Offer a bypass number for care providers to discuss patients requiring a potential hospital admission
- Offer same day telephone access to patients on the case register with an urgent medical problem
- Make contact with patients on the Personalised Care Plan Manager register within 3 days following the receipt of a discharge notification for A&E & non-elective admissions
- Regularly review emergency admissions and A&E attendances of patients from care and nursing homes
- Undertake monthly reviews of all unplanned admissions and readmissions and A&E attendances of patients on the Personalised Care Plan Manager register. Read code – **8CMG3 Review of admission avoidance care plan**
- Carry out a review of the Personalised Care Plan Manager every three months. Read code – **8CMG3 Review of admission avoidance care plan**



Review your 2% Personalised Care Plan Register on the 1st Day of a New Quarter

- Review Practice population (over 18 year olds) to maintain 2%. Review numbers already on the Personalised Care Plan Manager list and identify new patients if fallen below 2%



Submit reporting templates On the 31st October 2014, 31st January 2015 and 30 April 2015

- Submit reporting templates to the CCG for each quarters activity



Note - This guide does not include the declined/refusal Read codes.

For further guidance on all aspects of the Unplanned Admissions DES and timeframes refer to the following Quick Reference Guides:

- **Unplanned Admissions - Getting Started**
- **Unplanned Admissions - Personalised Care Plan Manager**
- **Unplanned Admissions - Reporting**