



PredictX Care and Health

Predictive care pathways for improved post-covid population health

According to BBC News in October 2020, there have been over 900 000 Covid-19 cases in the UK, with more cases being confirmed every day. For some, Covid-19 is a brief and mild disease. For others, it can be life-threatening with over 45 000 UK deaths recorded as of October 2020.

The consequence of Covid-19 is far-reaching. Some patients are suffering from a phenomenon known as “long-Covid”. Long-Covid is characterised by lasting coronavirus symptoms persisting for months. These symptoms can have a devastating effect on people’s long-term physical and mental health.

The Covid Symptom Tracker App - used by around four million people in the UK - found that approximately one in twenty people were likely to suffer from symptoms of long-Covid.

Added to this is the concern that, due to fear of contracting coronavirus, many patients in other care pathways are not undertaking normal check-ups and health care services that exist as preventative measures. As such, local health and social care services may be dealing with the delayed effects of Covid-19 for years to come.

Covid-19 and the renewed focus on the Hospital Discharge process.

In most local care and health systems, hospital discharge acts as a key interface between health and social care. The onset of the Covid-19 pandemic has become a “call to action”, putting a renewed focus on the Discharge process.

Under the August 2020 Hospital Discharge Policy and Operating Model, the Home First approach was formalised. This approach uses Discharge to assess patients for any ongoing care and support needs in their own home environment. Services are thus prioritised to

About PredictX Care and Health

For over ten years, PredictX Care and Health has worked with social care and health data holistically - mapping out care pathways for improved population health. Moving away from “analyse and fix” we use AI, machine learning and data science to “predict and prevent”. With us, Sustainable Transformation Partnerships (STPs), Clinical Commissioning Groups (CCGs) and Local Authorities can plan ahead for improved care across the population.

Our Post-Covid Solution

The long-term effect Covid-19 will have on population health is still unknown. While social care providers have access to care pathways, these are simplistic and do not seek to understand why patients access the services they do, what underlying health conditions are related to each patient and the impact the services they access now has on the future.

support recovery and out of hospital care to the best of their abilities. Recent evidence, however, suggests that up to 40% of older people end up in the wrong care pathway at the point of discharge.

Rather than assessing need for long-term care from the hospital bed, health and social care systems and commissioning organisations need a more integrated approach. After discharge, a wide range of intermediate care services will now be involved with most supporting older people in their home and only a small number in a short-term bedded facility. They will offer short-term, therapy-led care that focuses on recovery, rehabilitation, and supporting continuous independence.

What does this mean for health and social care activity within local systems and the ability to measure it?

Local authorities and their health partners will need to measure the discharge activity into and within the agreed pathways and highlight those people that have not been assessed within the 6-week enablement period. Increased importance will also be focused on the longer-term outcomes of enablement services and how these promote and prolong independence.

“Integrated health and social care data will now be essential to enable the analysis of the patient journey through the whole health and care system and provide the insight, performance and trends based on local activity, support services, health conditions and demographic characteristics to improve decision-making,” said Michael Holden, Project Manager of the Better Care Fund’s Integrated Care Programme for the City of Wolverhampton Council.

Social care activity from Local Authorities is currently measured nationally through a number of ASCOF scores. These scores measure the effectiveness of social care packages via the following criteria:

- The proportion of older people aged 65 and over discharged from hospital to their own home, a residential or nursing care home or extra care housing for rehabilitation who remain in this setting 91 days after the date of their discharge.
- The proportion of older people aged 65 and over offered reablement services following discharge from hospital.

Usually, ASCOF scores are published annually with some being monitored locally on a more frequent basis while others are only measured once with no regular way to monitor performance throughout the year and improve on it proactively.

If local authorities wish to use a preventative and proactive approach to plan and allocate resources effectively after hospital discharge, they will need to adapt their existing mechanisms to embrace a more holistic approach to health and social care data. ASCOF scores

Covid-19 has also placed greater focus on ongoing care provided after hospital discharge. Tasked with helping patients remain independent in their homes for longer, they need the data to monitor the effectiveness of the social care packages they introduce.

PredictX Care and Health provides a holistic view of health and social care data that optimises and improves existing care pathways. This data includes:

- A&E attendances.
- Hospital admissions.
- Hospital discharges.
- Social care packages provided to each patient and when they are provided.

Drawing on this data, PredictX Care and Health provides social care authorities with the following insights:

- A holistic examination of health and social care data across the system.
- Care pathways that assess, in an ongoing way, the health of patients after hospital discharge in relation to their care packages, health conditions like Covid-19 and patient demographics.
- Predictive analytics to see what effect patient conditions and the



also need to be more continuous to enable early interventions and preventative services – keeping patients independent for longer.

Introducing PredictX Care and Health

PredictX Care and Health uses health and social care in a joined-up way to optimise care pathways, identify opportunities for prevention and help healthcare authorities better plan services.

Data Science methodologies and predictive analytics are applied - allowing service providers to access the following key insights:

- A holistic examination of health and social care data across the system.
- Care pathways that assess, in an ongoing way, the health of patients after hospital discharge in relation to their care packages, health conditions like Covid-19 and patient demographics.
- Predictive analytics to see what effect patient conditions and the services patients access today will have on future population health.

Using PredictX Care and Health, City of Wolverhampton Council has been applying these types of insights. One of the key insights developed recently was a continuous ASCOF score.

The continuous ASCOF score is based on data gathered throughout the year as an “early warning system” instead of an annually published score. Local authorities and adult social care services can now easily see when the ASCOF score is trending away from their agreed targets and implement preventative measures. Once preventative Covid-19 measures are introduced, such as a vaccine, for example, care providers can continuously track the effectiveness of these measures on populations after hospital discharge.

With a deeper understanding of the medium to long-term effects of Covid-19 and how it interacts with existing patient conditions, morbidities and social services; local authorities and adult social care services can better plan for the future. Through making improved commissioning decisions today, they can effectively manage risk to provide better care for patients tomorrow.

services patients access today will have on future population health.

- ASCOF scores using all data to continuously track social package effectiveness by assessing the level of independence patients enjoy 91 days after being discharged from hospital.

Local authorities and adult social care services can now easily see when ASCOF scores are trending away from their agreed targets and implement preventative measures. Once preventative Covid-19 measures are introduced, care providers can track the effectiveness of these measures on populations continuously. Through making improved commissioning decisions today, they can effectively manage risk to provide better care for patients tomorrow.

About PredictX

PredictX is trusted by large, global enterprises to optimise data-driven decision-making. They make AI practical and useful and simplify the complexity in data so companies can focus on adding value to the business.

