Integrated Cross Boundary Coordination

Co-ordination of care The six GSF Cross Boundary Care Sites using GSF as a vehicle for change in hospitals, primary care and care homes, have shown an increase in coordinated care across different settings, integrating health and social care systems and leading to better patient outcomes, in this initial early evaluation. Specific changes included early identification of more patients with non-cancer, cancer and from care homes, more offered and recording of advance care planning discussions, more dying where they choose or in usual place of residence and improved care in the final days. Examples such as Bradford Airedale and Craven who have introduced GSF into several Airedale hospital wards, 12 GP practices and over 30 care homes leading to earlier identification of GSF patients via their EPaCCS system, given 'Gold ' cards, and a specially funded 'Gold Line' as an emergency help line for such patients. They have shown significant early signs of progress with decreases in hospital deaths from 49% to 14% and increases in home deaths (22% to 44%) for patients on the Gold Line.

Source: National Data taken from NEoLCIN 2011 figures for Airedale and Bradford. GSF Cross Boundary care Sites <http://www.goldstandardsframework.org.uk/cross-boundary-careOther>

<http://www.ncbi.nlm.nih.gov/pubmed/25960504>

<http://www.goldstandardsframework.org.uk/cross-boundary-care-2>