

**UNDER EMBARGO FOR 00:01 hrs ON THURSDAY 18 FEBRUARY**

## **NHS TO PROVIDE MORE CARE AT HOME**

Measures to shape NHS services around individual patients were set out today by Health Secretary Andy Burnham.

More dialysis at home and chemotherapy in the community will mean patients can benefit from more convenient services that help produce better outcomes and can be more efficient.

Focussing on providing care at home can also have a significant impact for social care. A report out today (Thursday 18 Feb) from the Audit Commission shows that older people who have the opportunity to be looked after in their own home if they want to are happier and there are less costs to the taxpayer. There already examples of how being innovative can have significant outcomes and save money – for example, for the cost of just one month's care package, a home can be equipped with sensors and pagers to help a family look after a relative with dementia.

Other measures include providing more services at home for children and young people who have acute or long-term conditions or disability or palliative care needs, and giving more people the option to die at home if they wish to.

Around 7000 patients across England could benefit from home dialysis – cutting out the need for regular long visits to hospital and allowing patients to lead more normal lives. Providing haemodialysis at home means that patients can tailor their dialysis sessions around their lifestyle, which can lead to benefits such as:

- better blood pressure control
- less reliance on medication
- patients being able to lead a more normal life and spend less time away from their family
- fewer admissions to hospital
- greater freedom from dietary restrictions

As well as benefits to patients, the annual costs of home haemodialysis could be up to 25% less than providing dialysis in a hospital or renal centre, and can lead to long term savings once initial set-up costs are recovered.

Health Secretary Andy Burnham said:

"The time has come for the NHS to make a decisive shift in providing more care out of hospitals and in the patient's community and home.

"For too long, services have been organised to fit the convenience of the system. A great NHS will put the convenience of the patient first, and move services towards them where it is safe to do so. But care in the home can also achieve better results and save money.

"So this is the right move at the right time. Evidence shows that we can now do far more out of hospital and the NHS needs to move confidently in

this direction. Fears about changing services should not stand in the way of improving care for patients. Transforming the NHS from good to great will mean becoming more people-centred and productive at the same time.

“NHS patients have already seen significant improvements in the care they receive in hospital, with shorter waits and more choice over how and where they access treatment. But the NHS needs to do more to plan services around patients – even taking services into their home. Dialysis at home is a perfect example, which can mean patients no longer have to worry about long trips to their nearest hospital three times a week while also enjoying better clinical outcomes.

“We are already seeing Lord Darzi’s vision to put quality at the heart of care becoming a reality across the country, but we can go further. By making NHS services truly people-centred and ensuring that patients have access to high quality, integrated and efficient community services, the NHS could save up to £2.7bn a year – meaning a better service for patients, and a more productive service for taxpayers.”

Jane Macdonald, President of the British Renal Society and Lead Nurse for Renal Services at Salford Royal Foundation NHS Trust said:

“The need for long term dialysis undertaken either thrice weekly or in some cases daily has a significant impact on the lives of dialysis patients, their families and carers. To be offered the choice, if clinically appropriate, to undertake dialysis at home is a major factor in eliminating frequent travel, maximises time spent with family, and plays an important role in remaining in employment.

“Increased access to home haemodialysis could be achieved through improved commissioning and local implementation policies, so that those able to can chose to be treated at home supported by their specialist kidney care teams.”

Fiona Loud, Chair of the Kidney Alliance said:

“The Kidney Alliance is firmly in favour of offering dialysis patients the best possible options. We believe that everyone whose kidneys fail should be offered a choice of therapies, including, where clinically suitable, dialysis treatment at home. Kidney failure is difficult and challenging for patients, and to be able to dialyse at convenient times and more frequently can mean a great improvement in quality of life and future outcomes.

“By allowing patients to manage their own dialysis treatment, they can not only be more in control of their condition but can also feel better emotionally and physically.”

The Department of Health has also published a guide for the NHS on developing chemotherapy services closer to home. Giving cancer patients the option of having chemotherapy at or closer to home where clinically appropriate can benefit patient experience and contribute to better outcomes.

This follows the recent announcement that all cancer patients will have one to one support within five years.

Children and young people who have acute or long-term conditions, or disability or palliative care needs, should be able to spend less time in hospital and receive care at home or the community instead. Providing services for children and young people at home can mean fewer unplanned visits and shorter stays in hospital, reducing distress for children, young people and their families.

As part of this, we want to move to a situation where families can expect:

- 24/7 access to advice and support from Community Children's Nursing Teams;
- a single lead professional for the family, who can liaise with the various agencies involved in delivering NHS care;
- the choice to die in their preferred place for those children nearing the end of their life; and
- an integrated package of care in a chosen location.

As a next step, DH will be publishing the final version of the National Framework for Children and Young People's Continuing Care very shortly. This will help with assessing the continuing healthcare needs of children and young people, and with considering the bespoke packages of care that will be required to meet those needs.

The Health Secretary also confirmed plans to review progress on End of Life Care by 2013, with the intention of setting out proposals for a right to choose to die at home in the future. Marie Curie is already piloting a range of models through their Delivering Choice programme.

Transforming how the NHS treats patients with long-term conditions by providing more support in people's homes and local community settings means that people are able to better manage their health and avoid unnecessary hospital visits. Improvements in the management of long-term conditions have already led to efficiencies and savings of £2.1bn.

ENDS

#### Notes to Editors

1. *Improving Choice for Kidney Patients: Home Haemodialysis and Chemotherapy Services in the Community* are available on the DH website:  
[www.dh.gsi.gov.uk](http://www.dh.gsi.gov.uk)
2. Patients can benefit from both Haemodialysis and Peritoneal Dialysis at home. Haemodialysis is when reliable access is established to a patient's blood circulation to pass their blood through a machine, removing impurities, excess fluid, restoring essential salts and returning purified blood to the patient. Peritoneal Dialysis is when reliable

access is established to the abdominal cavity, the lining of which (the peritoneum) acts as a natural dialysis membrane, through which pure fluid can restore essential salts and impurities removed, by several 'exchanges of fluid' into and out of the abdominal cavity per day.

3. For media queries, please call the Department of Health Newsdesk on 020 7210 5221.