



Who can Refer? GPs, A&E, PRU/SDEC/REACH, Out-patient clinics, Wards, In-patient Units

Inclusion Criteria

Must be over the age of 18 years old Be registered with a Tower Hamlets GP/ Live in Tower Hamlets Have a confirmed diagnosis of chronic respiratory disease (COPD, ILD, Bronchiectasis, Chronic Asthma)

With signs of a respiratory exacerbation -

- Worse /increased amount of sputum
- Increased breathlessness, cough, fever, wheeze
- Reduced exercise tolerance because of breathlessness

Clinical Interventions:

Acute Resp/ Holistic Assessment, Provision of oral systemic treatment for exacerbations, Short-term Nebuliser therapy, Home oxygen troubleshooting, Resp inhaler optimisation, Self-management education, Remote Health Monitoring (Doccla System), Point of Care Testing (CBG) if needed, Daily Nurse/Physio Reviews, Consultant/MDT input

Bed Capacity: 20 (Patients are care for in their own homes)

Length of Stay: 7-14 days

Exclusion Criteria

Patients who do not meet the criteria set for referral to the service.

- Patients under the age of 18 years of age.
- Unstable or worsening clinical trajectory, i.e. saturations <94% unless confirmed lower oxygen saturation baseline
- Severe or life-threatening presentations of pneumonia, asthma or COPD
- Suspected sepsis or other condition where there is a need for frequent intra-venous medication
- Chest pain that is possibly cardiac in nature
- Pregnant women with saturations of ≤94%
- Unmet Social Need (unless a care package is in place)
- Homelessness (unless has temporary accommodation for 2 weeks)
- On End-of-Life Care, can be referred to Palliative Care Team

How to Refer:

Referrals are accepted between 8:00 AM to 4:00 PM (7 days a week)

Patients will be contacted same day of referral or within 24 hours

For Barts Health referral (in-patient/ Clinic / A&E): Call 07983177719, Bleep 1936, or via email bhnt.arcare@nhs.net (please call if urgent)

For Community/GP Referrals: Call 07983177719, Send CHS Referral Form to Single Point of Access via EMIS

COPD	Bronchiectasis	Interstitial Lung Disease	Chronic Asthma
Consider use of DECAF Score ¹ to triage patients in A&E/In-Patient Unit with total score of 0 -1 are eligible, 2 depending on clinical judgement Dyspneea - 0: not too dyspneel: to leave the house 1: too dyspneel: to leave the house but independent with washing and dressing 2: too dyspneel: to leave the house and wash or dress independently Eosinopenia - 0: eosinophils >0.05 x10³/L 1: eosinophils >0.05 x10³/L 1: eosinophils >0.05 x10³/L 1: consolidation - 0: No consolidation on chest X-ray 1: consolidation on chest X-ray 1: pH >7.3 on ABG 1: pH >7.3 on ABG Fibrillation (atrial) - 0: no current or past history of AF 1: current or past history of AF	On acute oral antibiotics Requiring acute support/ education with chest clearance at home.	Acute on Chronic Breathlessness, needing an increase in oral steroids Requiring Acute Breathlessness Management Support / Education at home	Referrals accepted from A&E/Hospital Discharge Only PEFR > 50% of predicted with improving trajectory with the last 3 readings, at least 4 hours apart SpO2 94% or above No history of severe asthma exacerbation requiring HDU/ ITU Admission ARCARE can support nebuliser weaning in the community

Commented [ST1]: Do you want to add details of How to refer? ARCARE triage number etc