Improving utilisation of universal care plans for nursing home residents

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Background & aims

- Hillingdon borough has **1396 care home beds**- the 2nd highest in Northwest London

- Care Home Support Team service therefore set up in 2018 providing **Acute visiting** & **Advanced Care Planning**

- CHST has succesfully **reduced workload** on local GPs but **ambulance callouts high**

Methodology

- **Created working group** to conduct a data gathering excercise around LAS callouts to care homes and further work: Transformation team manager, Confed operations lead, Confed Quality improvement manager, LAS service manager, CHST service lead, Care home matron lead, Business intelligence/IT specialist

- **Secured funding** for their time via the *Hillingdon Confederation* and got **buy in from care homes**

- **Survey** sent out to all 41 care homes in Hillingdon- **who/what/why/when/how** any ambulance attendance to their home in a specified 3 month period

- Meeting with **LondonAmbulanceService** service managers, and **acquired data** of callouts to care homes in the last 12 month period

Results- LAS data deep dive

- Hillingdon **rank 2ⁿᵈ highest** in absolute numbers of LAS callouts but much improved once you consider on a per bed ratio basis- **rank 6 out of 8** (see table)
  Likewise with LAS conveyance Hillingdon ranks 6 of 8

- Further drilling down of this data allowed us to identify which of the 41 care homes had a high number of callouts relative to bed numbers:
  This piece of data led to it's own off-shoot project where the high callout homes were reviewed in person by the CHST and reasons were explored- lack of staff training, poor chronic disease management, particular residents that were frequent A&E attenders and skewing data. Likewise low-callout care homes were reviewed to identify and possible shareable lessons for other homes

LAS Callouts per month			
Boroughs	#beds	Apr - Dec 2023	Ratio (calls/ beds)	Rank
Hounslow	819	860	1.05	1
Kensington and Chelsea	388	379	0.98	2
Harrow	1287	1108	0.86	3
Hammersmith and Fulham	442	373	0.84	4
Brent	1070	839	0.78	5
Hillingdon	1396	1080	0.77	6
Ealing	1539	1073	0.70	7
Westminster	411	215	0.52	8

Was the Universal Care Plan (UCP) considered by all staff involved in this resident's care

Unknown	13
Unsure	8
No	23
Yes	160
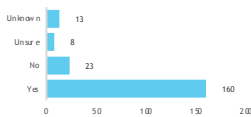
Number of Resident Conveyed to hospital

Unknown	22
No	21
Yes	161
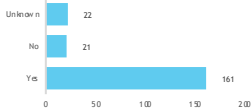
Results- Care Home survey audit

- 38 of the 41 homes responded

- UCPs were overwhelmingly reviewed by staff prior to LAS callout, and/or reviewed by paramedics on arrival.

- Subjective feedback highlighted the positive impact of the CHST's advanced care planning meetings with residents and families along with UCPs for every resident within weeks of arriving → reduce unnecessary conveyance where Preferred place of care & Ceiling of Care is care home only

- Vast majority of LAS callout resulted in residents being conveyed to hospital, implying a low proportion of needless callouts

- No significant variation across day of the week or time of day

- Top 5 presenting complaints for LAS callouts according to available coding identified during the audited period- **Falls, Head injury, Limb or other injury, Cough or respiratory complaint, Unwell**

Analysis & Further QIP cycle

- Hillingdon Care homes have in fact a relatively low ambulance call out and conveyance rate across the borough, once bed numbers are considered

- A large part of this is due to advanced care planning and completion of good quality universal care plans which are accessible by 111 and LAS services

- We took this further to: 1. Audit the quality of UCPs completed by specialist Matrons working in the CHST, and 2. Create a live Dashboard of UCP status across all **41 care homes**

Quality of UCP audit

Criteria: DNAR decision recorded | Discussion with Family or MDT outlined | PPC & PPD recorded | Ceilings of care | Palliative Symptoms management | WHO status recorded

Sample size: 6 matrons, 10x UCPs selected at random

Result confirms overall UCPs completed to a good standard, and this was acknowledged by both paramedics and care home staff

Overall UCP Quality Score 77%

Dashboard Creation

- Working with the BI and IT teams I created the Dashboard, fed by a live excel document ready for populating:
  Resident identifiable data | Date of admission | UCP creation date | DNAR decision | PPC PPD | Ceilings of care | Family or advocate details and more

- Dashboard uploaded to NWL shared cloud with editing rights issued to selected individuals via their NHS emails

Successes & Challenges

- I would say a great start having been able to put a talented team of engaged individuals bringing their own skills to this project, and having the support of my local federation behind me in providing their time for this project, which also aligned with their governance and quality improvement aims.

- We successfully identified the capability of the CHST in empowering residents to take control of their care proactively, and care homes to manage these residents when they became unwell. We highlighted the effectiveness of advanced care planning, and the quality of care plans produced by specialist matrons on the team who have had extensive palliative and care of the elderly training

- I created the dashboard and handed it over to the team during the Hillingdon Confederation's quarterly quality and governance meeting, so that it can be populated and used by team to further optimise care for care home residents in Hillingdon