Aims & Objectives

Aim Statement: All patients admitted under the care of Medicine for Older People (MOP) should receive person centred care, supported by the introduction of patient passports. Passports should include information about: home set up, legal information including power of attorney, communication aids, nutrition and diet, function and mobility, and who they are as a person, so we can make hospital stays less disorientating and more human. Unlike the current 'This is Me' document, it is free and not branded by the Alzheimer’s Society, so can be used for all patients not only those with dementia.

Timescale: September 2018 to April 2019

Outcome Data: Qualitative (feedback from patients and staff) and quantitative (audit sessions) data; process information about development and barriers to sustainable implementation.

Methods

Service evaluation of dementia care at University Hospital Southampton (UHS)

- Risk and quality impact analyses by stakeholders
- Trial passport developed by multi-disciplinary stakeholder team (MDST) focus group, including patients and their carers
- PDSA cycle 1 – trial of the paper passport on one typical MOP ward by the project lead and the ward staff
- UHS Governance and Communications teams approved the passport for Trust wide use
- Electronic passport went live on the UHS electronic document system (eDOCs)
- UHS launch on social media/intranet; physical launch on MOP wards with posters and leaflets for staff and patients
- Train the trainer sessions delivered to all MOP doctors and to all staff working in the enhanced care dementia unit (EDCU)
- PDSA cycle 2 – trial of the electronic passport across all MOP wards by junior doctors/any who had received the training
- Development of a MOP My Medical Records (MyMR) website, allowing passport sharing across caregroups
- Presentation at the Dementia Working Group as a gold standard practice of care to be taken forward after the project ended

Results

"Thank you for treating me like a human"

Quantitative Outcomes

- Saves £8.15 for every 25 used instead of the previous dementia information document This is Me
- On average it takes family/friends 10-20 minutes to complete, and staff 26.5 minutes
- Rated 8.4/10 for clarity and 7.9/10 for ease of use before redesign for PDSA cycle 2

Qualitative Outcomes

- Patients and carers subjectively felt that with passports they/their relative had more frequent care and better food options
- During discussion of one man’s social activities and family, he was able to raise that he was actually very isolated and had been depressed for a long time

Lessons Learnt

- Senior staff support from a departmental/Trust level is necessary for implementation of junior developed/led projects
- Staff are reluctant to do additional paperwork even if there is a clear benefit to the patient, due to the current volume, and the redundancy and duplication in the admissions documents. This needs to be addressed before re-launching

Next steps

- The UHS Dementia Working Group has asked that the passport to be implemented across the trust
- The deputy director for nursing at UHS is looking at how to implement this in the next year, liaising with the community