Improving Housebound older people’s care
- right time, right place, right person

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The Problem
Senior Critical Team referrals at Bournemouth and Christchurch Community Health Services are unreliable, unstructured, untimely and undocumented. Consultations are delayed, missed, or duplicated resulting in incomplete patient care and inefficient teamworking. This leads to sub-standard patient outcomes and poor staff morale.

Evidence Base
- NHS five year forward (NHS, 2014) view’s for greater collaboration between GPs and community services
- Reduction in the numbers of GPs therefore less time see housebound patients (Kings Fund, 2019)
- Older people admitted to hospital spend longer in hospital and take longer to recover when returning home (BGS, 2010)
- NHS Plan (2019) older people need specialist timely care closer to home by specialist team that know them

Diagnostics
- By 15.3.19 there will be a reduction in delays to referrals to the advanced nurse practitioner/medical team who are unsure and living at home in need of clinical care

Aim statement
What are we trying to accomplish?

- Improve district nurse referral rates to advanced practice/medical team and reduce GP referrals

Plan
- Book a meeting with District Nurses
- Introduce the service we offer
- Ask them how they would use it
- Record their opinions and thoughts in my notebook

By the end of March there will be a 50% increase in district nurse referrals to the advanced practice/medical team reducing GP waits/contact

Ideas for change
- Building DN confidence in referring to us will increase the numbers of referrals
- Increasing the contact DN have with our service will increase trust between us and improve decision making
- Decreasing the personal relationship between GPs and our service will increase trust between us and improving decision making

<table>
<thead>
<tr>
<th>Change idea</th>
<th>POSA #1: Building DN confidence in referring to us will increase the numbers of referrals</th>
<th>POSA #2: If we have stronger relationships with district nurses they are more likely to refer us</th>
<th>POSA #3: Increased DN referrals will improve patient care</th>
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<tbody>
<tr>
<td>Plan</td>
<td>* Book a meeting with District Nurses</td>
<td>* Invite District Nurses to regularly attend multidisciplinary meetings</td>
<td>* Triage referrals and visit unstable patients the same day</td>
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<td>* Introduce the service we offer</td>
<td>* Engage with district nurse team leads, listen to their issues and build relationships with individuals</td>
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<td>* Ask them how they would use it</td>
<td>* Share examples of patients suitable for referring to our team</td>
<td>* Diagnosed individual treatment plans with patients and their significant others</td>
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<td>* Record their opinions and thoughts in my notebook</td>
<td>* Make home visit to patients referred by district nurses and give feedback to the nurse</td>
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<td>* Physio home visit/telephone to the referring district nurse member</td>
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<td>Do</td>
<td>Met with 5 District Nurses on 12.12.18. Recorded their opinions in my notebook</td>
<td>Have regular meetings with District Nurses</td>
<td>* Liaise with other multidisciplinary teams members as required</td>
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<td>Study</td>
<td>* This was the 1st multidisciplinary meeting sought with district nurses to discuss their experiences of referrals to advanced practice/medical teams. They had not referred as they didn’t know about the service, yet even now it had been common practice to refer to GP</td>
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<td>* Received 1 referrals from District Nurses within 1 week of starting to get to know them. Patients referred were complex older people at home needing treatment plans. On 09.01.19 gave feedback to one nurse who then encouraged others to do likewise. DNs felt plans in place were robust, helpful, and needed less GP contact and liaison</td>
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<td>Act</td>
<td>District nurses agreed to consider referring if they see patients that are unstable instead of referring to GP at the end of their shift. District nurse leads will refer future patients they can refer to advanced practice/medical team.</td>
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Measurement for improvement

District Nurse referrals to triage & Advanced Nurse Practitioner response

Reflections on learning
- Be open, flexible and listen
- Start Small
- Get others involved as soon as possible – they will drive it forward with you