

Care Together – Share Together

September 2018, number 7

NHS
England

70
YEARS
OF THE NHS
1948 - 2018

30 DAY challenges

How to contact us

Our team of NHS England (North) Care Sector Leads support the Independent Care Sector and encourage quality improvement initiatives, preventing delayed transfers of care and improving the flow of care sector clients through hospital systems. **Contact any of us to share your news highlights:**

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#careandshare 

#hello my name is...

**Mrs Betty
Smithson
(SRN)**

I'm a retired
registered nurse
who trained in
1948 and I'm the
North Region
Independent
Care Sector
Representative



Kate Granger
Compassionate Care
Awards winner, 2018

Mrs Smithson is a retired nurse from Leeds who began her training in the year the NHS was founded. She has been recognised for her decades of unswerving commitment to helping others. Having started her training at Leeds General Infirmary back in 1948 she went on to become Assistant Director for nurse education at St James's Hospital, Leeds.

Many nurses now working across the region owe their careers to this remarkable lady. On behalf of all of us...

Thank you Mrs Smithson!

Mrs Smithson supports the #hello my name is... campaign, do you?

To find out more visit <https://www.hellomynameis.org.uk/>



www.nhs70.nhs.uk

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#NHS70

Stay well this winter

There is a lot of information to help you prevent flu and manage outbreaks;
use these links to find out more

PHE poster for Care Homes, managing outbreaks

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/733351/Guidance_on_outbreaks_of_influenza_in_Care_home_outbreak_A3_.pdf

PHE guidelines on managing ILI outbreaks in Care Homes

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664972/Influenza-like_illness_in_care_homes.pdf

Stay Well this Winter

<https://campaignresources.phe.gov.uk/resources/campaigns/34-stay-well-this-winter-resources>

Flu fighter campaign

<http://www.nhsemployers.org/campaigns/flu-fighter/nhs-flu-fighter/free-resources/flu-fighter-posters-and-leaflets>

If you are employed by a registered home care, care home provider or hospice and deliver direct care you can receive a free flu vaccine.

Call to book your appointment at your GP practice or community pharmacy and receive your free vaccine now

Winter in
Homecare

Be aware, prepared and take action


As winter approaches, we ask that you - our care staff, start to think about how you can prepare and ensure that all service users are kept safe and warm over the colder months.



Do 2 or more residents or staff have the following symptoms?



Fever of 37.8°C or above



New onset or acute worsening of one or more of these symptoms:

- cough
- runny nose or congestion
- sore throat
- sneezing
- hoarseness
- shortness of breath
- wheezing
- chest pain



Sudden decline in physical or mental ability

If you notice 2 or more residents or staff meeting these criteria, occurring within 2 DAYS (48 HOURS), in the same area of the care home **you might have an outbreak**. Consider influenza as an alternative diagnosis in residents with suspected chest infection



Contact your community infection control team (CICT) or PHE health protection team (HPT) immediately and take the infection control measures listed here



What the CICT or HPT will do:

- work with care home staff and GPs to identify the cause of the outbreak
- advise on infection control measures
- work with GPs to advise on treatment and prevention

INFECTION PREVENTION AND CONTROL MEASURES

All residents and staff should be offered seasonal flu vaccination each year

Hand hygiene and protective clothing

- ensure that liquid soap and disposable paper towels are available at all sinks
- wash hands thoroughly using liquid soap and water before and after any contact with residents
- provide 70% alcohol hand rub for visitor use and supplementary use by staff
- staff should wear single-use plastic aprons and gloves as appropriate when dealing with affected residents. The HPT will advise on the use of surgical masks. Dispose of all these as infectious waste

Cleaning and waste disposal

- provide tissues and no-touch bins for used tissue disposal in public areas
- provide tissues and covered sputum pots for affected residents. Dispose of these as infectious waste
- wash residents' clothes, linen and soft furnishings on a regular basis, and keep all rooms clean
- Clean surfaces of lockers, tables & chairs, televisions and floors etc frequently. Always clean hoists, lifting aids, baths and showers thoroughly between patients.

Reducing exposure

- consider closing the home (and any day care facility) to new admissions if the HPT confirms an outbreak
- residents should not transfer to other homes/attend external activities
- residents should only attend out-patient or investigation appointments where these are clinically urgent
- care for residents with symptoms in single rooms until fully recovered and for at least 5 days after the symptoms started
- affected residents should remain in their rooms as far as possible. Discourage residents with symptoms from using common areas
- as far as possible staff should work in different teams: one team caring for affected residents and the other caring for unaffected residents
- agency and temporary staff in contact with residents with symptoms should not work elsewhere (e.g. in a local acute care hospital, or other care home) until 2 days after last exposure
- staff and visitors with symptoms should be excluded from the home until fully recovered
- the elderly, very young and pregnant women, who are at greater risk from the complications of flu, should be discouraged from visiting during an outbreak
- inform visiting health professionals of the outbreak and rearrange non urgent visits to the home, if possible
- inform the hospital in advance if a resident requires urgent attendance at hospital

Did you wonder what our team of Care Sector Leads actually do? Here's a day in the life of Annlouise Stephens, our colleague working across Lancashire and South Cumbria

The day starts with a cup of tea and a quick check on my twitter feed, Jane Cummings is active around the 30 day challenge!

I travel to the office and my working day starts. First I check on email traffic, and reply to a message about our upcoming Community Health and Social Care showcase event. It's really encouraging that so many different organisations are working with us on this! I open updates from two CCGs around the hospital transfer programme (we still keep calling it the red bag initiative!). It's great news because we now have 70% coverage across Lancashire and South Cumbria!

There's just enough time to update the monthly Lancashire and South Cumbria Independent Care Sector report with the latest response from CCGs. I make a quick telephone call to the Better Care Manager around Trusted Assessor models, just to update her on the latest response from our local CCG pilot proposal, then I'm back in the car travelling to Leyland from Preston.

I attend the monthly Regulated Care Sector quality sub group meeting; the key highlights from the meeting include a presentation about the quality strategy, the latest ADASS quality dashboard is discussed and we receive an update on the enhanced health in care homes framework and consider how we could replicate it with our home care services.

It's time for lunch and I catch up on email traffic again. I need to provide a response around the REACH programme of work; it looks like a CCG in my area has been identified as a potential focus sight!

I have a pre-meeting with the project manager around Capacity Tracker implementation immediately prior to the first group meeting, then away we go! It's great to see that all areas are represented and we have system champions in place. It is a really productive meeting and we come away with a plan in place. We've decided to take the 'bull by the horns' and roll-out Capacity Tracker right across Lancashire and South Cumbria, rather than implementing one CCG at a time.

I'm back out to the car and dial into a call with the Lancashire and South Cumbria integrated pharmacy implementation group. There's a final discussion about the medicines optimisation in care homes workshop being held in 2 days' time, and it's great to hear we have both regional and national support at the event. Finally it's time to travel home and have a well-earned cup of tea! I've really enjoyed my day and know I've made a difference.

One of Annlouise's special interest is falls prevention. Get in touch and tell us about your falls prevention strategies - it's great hearing about the work you do too!

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The ability to share information has been recognised as a significant challenge to health and social care integration.

When health care settings share information with those delivering care in home care and care home settings it could result in better support for people accessing services.

Timely access to correct and up to date information allows everybody involved in people's care to make effective decisions.

People trust the health and social care systems to protect their personal information and also to ensure plans are communicated as necessary.

NHS mail is being offered to all care homes and will be on its way to home care organisations soon too. It will improve the flow of information between organisations



Digital transfer of information, such as email, needs to be completed on a secure system, which is what NHS mail offers. To register for an MHS mail address please follow the link below. This page provides information and further links needed to progress to NHS mail: <https://www.dsptoolkit.nhs.uk/Account/register>.



Leading Change, Adding Value Atlas of Shared Learning

A national Leading Change, Adding Value (LCAV) 'Atlas of Shared Learning' is now live and can be viewed at

<https://www.england.nhs.uk/leadingchange/atlas-of-shared-learning/>.

The Atlas includes case studies demonstrating how health and social care staff across the sectors have identified and corrected unwarranted variation and helped narrow the gaps highlighted in the Five Year Forward View.

The LCAV Atlas of Shared Learning includes case study examples from across health and social care. One example shows how district nursing students identified a higher than expected number of pressure ulcers among care home residents. Students worked in partnership with care home managers and senior carers to work out how the district nursing team could share their knowledge base. They highlighted the need for joined up working so it could speed up the time taken to identify patients at risk of developing pressure ulcers.

Face-to-face training was arranged; it focused on the early warning signs for patients at increased risk of developing pressure ulcers. As a consequence there has been a consistent, steady reduction in the number of pressure ulcers within the homes that received training, as well as a reduction in the numbers of residents needing prolonged pressure area care under the district nursing team.

We would like to hear from you if you are leading change in your work – a case study template can be downloaded from <https://www.england.nhs.uk/leadingchange/contactus/case-studies> or contact the team at england.leading-change@nhs.net for further information. Your case study could contribute to the Atlas of Shared Learning, sharing good practice across England.

#careandshare



Have you signed up to Capacity Tracker yet..?

Contact us:



0191 301 1300

Carehomes.necsu.nhs.uk

necsu.tracker@nhs.net

@CapacityTracker

Matt Hancock, Secretary of State for Health and Social Care has recently quoted Capacity Tracker as a good example of innovation in his speech about his vision for technology in the NHS:

“...We need technology that makes life easier for hard-working and often over-stretched staff. We need technology that can run basic tasks and processes more efficiently. This will save the NHS money and free up staff time – money and time that can be better used to provide great care... There are also many great innovations aimed at improving patient care across settings, like... the Care Home Bed State Tool developed by NHS England North, which enables staff to locate available beds in nearby care homes instantly – reducing the need for nursing staff to spend all day on the phone ringing round and freeing up beds in acute settings.”

“...this is one of the smart new ways tech can be used to help everyone tackle miserable unwarranted extended hospital stays for people with frailty and/or dementia who truly need care home support.”

Martin Vernon, National Clinical Director Older People NHS England.



Capacity Tracker

Minimising Delayed Transfers of Care

Built in partnership with NHS England, Local Authority representatives and care home providers, the web-based Capacity Tracker enables care homes to instantly share their available beds and allows other users to search for beds across the country, helping to reduce Delayed Transfers Of Care (DTOCs). Powerful reporting also helps with market oversight and gives users the ability to quickly and easily analyse published DTOC data at national, regional, NHS Trust and Local Authority level.



The care home sector across Hartlepool and Stockton on Tees currently face a number of challenges including:-

Sustainability of the market in particular nursing bed provision

Variation in quality of care
Staff turnover

Duplication and fragmentation of staff training
Avoidable hospital admissions from care homes

To address some of these challenges the CCG set out to bring together an Alliance of four provider organisations to deliver a suite of training. In the first year they delivered the following training and support:

- Wellbeing of the Elderly Resident ✓
- Dementia Awareness, Delirium and Person Centred Care ✓
- End of Life Care ✓
- Falls Prevention ✓

Nursing staff were supported through the revalidation process ✓



Their aim was to improve the knowledge and confidence of all care home staff, enabling them to make informed decisions that would:

- Help improve resident experience**
- Improve the quality of care received**
- Reduce avoidable hospital admission**

Training is regularly reviewed and refined so it meets their needs and quality standards, and addresses the challenges listed above. It was funded via the Better Care Fund

The programme includes taking digital National Early Warning Scores (NEWS), using handheld devices to provide accurate information on health indicators including pulse, blood pressure, temperature, respiratory rate and oxygen saturation, preventing resident from deteriorating by aiding early interventions. Introducing NEWS into care homes has also promoted its wider as an assessment tool for all community clinicians.

By up-skilling and providing on-going support for staff they also aimed to reduce staff turnover rates in care homes, knowing that investing in education helps care homes retain their staff. They also wanted to develop a collaborative, coordinated, consistent and sustainable training package to care homes that traditionally get bombarded with offers of training, leading to duplication or gaps in skills and knowledge. They know their Alliance has been successful, because they are now into their second year and 36 care homes in Stockton and 15 care homes in Hartlepool are involved. By the end of year one (2017/18):

1421 care home staff attended training
157 sessions were delivered with 100% positive feedback

There were 191 (9%) fewer emergency admissions in 2017/18 than in 2016/17; this resulted in net savings of almost £500,000



Because of this work they were able to identify and deliver additional support and training; outcomes included:

- Providing a safe environment for care home managers to ask questions they may not have been comfortable raising in front of their staff; it helped them correct procedures and improve practice**
- Promoting new guidance to prevent urinary tract infections**
- Better collaboration between hospital and care homes**

The model and training material has been shared with colleagues in the North East & Cumbria Urgent and Emergency Care Network who promote this work as part of the Enhanced Health in Care Homes Framework. **The programme has been re-commissioned for a further two years until 31 January 2020 and was nominated as a finalist in the 2018 HSJ Awards.**

For further information on the programme please contact paulwhittingham@nhs.net



RCN INFECTION PREVENTION AND CONTROL MODULE (IPC)

This course may be of interest to registered nurses working within the following areas:

Infection Control Leads in nursing homes or GP surgeries
Link nurses/practitioners
Infection control practitioners requiring a refresher module
Ward/department/clinic managers

Module Aim:

To critically evaluate the knowledge and evidence underpinning infection control practice and implement local and regional practice change.

Objectives:

The student will be able to:

- explore the holistic approach to infection control care and the impact at a local, regional and national level
- critique and evaluate the application of evidence based microbiology application
- explore microbiology application and practice, within the workplace and patient groups
- discuss the process of change management within their workplace implementing evidence based practice to improve standards for the benefit of patients, the public, health care workers and employers
- develop a work-based portfolio and report which demonstrates an infection control practice change at local or regional level.

Hours of study:

Students will have access to e-learning and taught resources appropriate to the individual's needs.

The delivery will be by a blended learning approach:

One preparation day online; three taught days; online learning after each taught day; complimented by telephone coaching sessions.

Total study time: 200 hours

To find out more visit: <https://www.rcn.org.uk/ProfessionalServices>

Or email: mirka.ferdosian@rcn.org.uk



We look forward to sharing next time...

Sharing best practice so we care better together

The Transforming Perceptions of Nursing and Midwifery Campaign are recruiting ambassadors. Do you want to know what they do? We'll tell you more next month! In the meantime **to sign up to be an ambassador use this link...**

<https://horizonsnhs.us18.list-manage.com/subscribe?u=b48003ef85ed66462c015a486&id=829d76a63a>

We have many more exciting challenges coming up and we would like to join you in sharing your Nursing/ Midwifery progress. For more information on the Perceptions campaign please visit our website

<https://nhs70.crowdcity.com/>

On 10 September, Secretary of State for Health and Care, Matt Hancock launched 'Talk health and care'. He has invited anyone working across health and care settings to share their blogs and tell him about what you do... Help him to understand what a vital role we play and how he can help too.

Use this link to join in the conversation...

https://dhscworkforce.crowdcity.com/?utm_campaign=761943_End%20of%20week%201%20-%20workforce%20engagement&utm_medium=email&utm_source=Department%20of%20Health&dm_i=3ZQO,G BX3,26DZHX,1QQSU,1

Getting ready for winter

What plans have you put in place to keep residents out of hospital?

What would it take to make you comfortable to receive patients from hospital after 8pm and at weekends?

How can we help you to put systems in place?

What can you do differently today to make a difference to those in your care so they don't need to go in to hospital at all?

Contact your Care Sector Lead with any ideas, suggestions or comments, their contact details are on the front page

What's happening in October ?

Beat our next 30 day challenge

30 DAY
challenges

