Practice based nurse case finding approach

A case study from Salford NHS Diabetes Prevention Programme

Disclaimer: The case study presented is set out as an example of local delivery of a specific project within the NHS DPP at a specific point in time. It is not to be used as an evidence based guide or interpreted as a policy for the implementation of the NHS DPP

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Summary:
General practices have been overwhelmed with work. It was agreed locally to try to reduce the burden on practices by providing hands on support to refer into local interventions.

A nurse facilitator was engaged to work with practices across the city to:

- Raise awareness of programmes/referral process across all practices
- Work in individual practices involving:
  - FARSITE[1] search of existing records (last 6 months) for people with Impaired Glucose Regulation (IGR) who are potentially eligible for programmes.
  - FARSITE/ DOCMAIL[2] invitations sent to those suitable
  - Specific IGR review clinics set up for people who respond, run by the Nurse Facilitator to go through diagnosis/ refer where appropriate

Outcomes:
Referrals generated from this post account for between 40-45% of all referrals into interventions in the NDPP implementation.

Background:
Prevention is one of the many things competing for GP attention. It is recommended that a diagnosis of Impaired Glucose Regulation should be followed up and supported by a healthcare professional to ensure mutual understanding and accurate patient appraisals about the cause, consequences (including risks) and preventative management. Support is particularly pertinent after diagnosis and surrounding behaviour change.

NICE PH38 (July 2012)[3] reinforce this view stating that all people diagnosed with IGT should be offered some form of education to support lifestyle change and should be wholly supported by healthcare professionals during this difficult and intense period, as lifestyle interventions are often intense and require commitment from the patient and the healthcare professional.

The IGR care call service provided in Salford offers a telephone service to deliver lifestyle education, however referrals from GP practices are slow.

As the practice engagement began, it became evident that practices would benefit from support and education for the IGR referral process.

[1] FARSITE is a digital audit tool used to identify and select a cohort of patients from GP register for a health intervention or health research.
[2] FARSITE/DOCMAIL are digital tools used to send letters to a cohort of patients.
[3]NICE (2012) Type 2 Diabetes: prevention in people at high risk. NICE Guideline PH38.

Approach:
The role of the recruitment nurse facilitator was introduced to increase referrals into the service.
Following discussions with practice staff one solution highlighted, was to work within each practice to hold clinics to refer patients directly.

The role of recruitment nurse facilitator identified other practice objectives, which were:

- Encourage, motivate and educate practices to refer patients with IGR into the IGR care call service.
- Educate practices to ensure criteria are met for referral into the IGR care call Service.
- Educate and assist practices in updating patient records and ensure correct coding is maintained leading to better patient management.
- Assist practices in referring patients into the IGR care call service.
- Educate practices in offering support for patients with IGR who decline the IGR care call service.

An IGR care call referral pathway was developed to ensure consistency within each practice.

Outcome:

Percentage of individuals engaging	Average across eight months
% of individuals identified with IGR who are contacted (based on eligibility criteria for the programme)	39.46%
% of individuals contacted who respond	39.84%
% of individuals contacted who attend clinic	36.01%
% of individuals who attend clinic who are referred into intervention	87.56%
% of total number of individuals who are contacted that are referred into intervention	30.84%
% of total number of individuals with IGR prior to applying eligibility criteria who are referred into intervention	11.19%

*NB – averages have been negatively affected by winter pressures / annual leave in January which reduced the possible contacts and referrals in that month.

Additional outcomes from the post:

- Improved patient records
- An increase in ‘natural’ referrals from GPs into interventions due to their increase knowledge of the service and referral pathways.

Lesson learned:

- Supporting practices to generate referrals into interventions enables an increased number of individuals to be referred rather than relying on practices to refer 'naturally'.
- Early data suggests dropout rates are significant at each stage prior to the individual undertaking the first session of intervention.
- There is large variation between practices in all areas (including standard of coding, engagement, number of referrals)
- Providing support/ 'hands on help' for practices appears to be a good investment:
- Data quality, existing activity, enthusiasm/support for the programme is very variable BUT the Nurse Facilitator was welcomed by all, help was appreciated, quality of 'natural' referrals improved
- Due to Nurse Facilitator's work, the number of referrals to IGR services significantly increased.
- Salford will continue to invest in a Nurse Facilitator role to support practices in identification of people with IGR from existing records.

Supporting Information:
Please see Appendix 1 for example of Nurse Facilitator Job Description, Appendix 2 for person specification and Appendix 3 for interview criteria

Further Information about FARSITE and DOCMAIL can be found at: http://nweh.co.uk/products/farsite and http://www.cfhdocmail.com/

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Appendix 1 JOB DESCRIPTION

Job Title: Nurse Recruitment Facilitator for the NHS Diabetes Prevention Programme

Grade: Band 6

Responsible to:

Base/Department: Diabetes & Endocrinology Department, Salford Royal (with the majority of time to be spent in GP practices)

Main purpose of job: The Recruitment Facilitator will engage with GPs across Salford to increase the number of GP referrals into the Impaired Glucose Regulation Care Call Service. Salford has been chosen as a demonstrator site for the National Diabetes Prevention Programme (NDPP) the Recruitment Facilitator will play a key role in ensuring Salford reaches our targets for the NDPP.

Trust Values & Behaviours - Responsibility for upholding the agreed set of values and accountable for own attitude and behaviour

Patient & Customer Focus	Communicate effectively with patients, families and colleagues and proactively personalise the service, connect with patients and carers whilst adopting the ethos of Safe, Clean and Personal.
Continuous Improvement	Identify opportunities to reduce waste and inefficiency and look at ways of measuring and auditing improvements and proactively develop goals and objectives in support of the Trusts vision.
Accountability	Recognised and accept and display personal accountability beyond the job role and towards problem solving and act with integrity and focus on results.
Respect	Be considerate of others, their contribution and needs, support and empower staff involvement and act as a guardian of the Trusts reputation and resources.

Main tasks/overview of responsibilities:

1. Develop and maintain communication with people about difficult matters and / or in difficult situations
2. Develop own skills and knowledge and provide information to others to help their development
3. Promote, monitor and maintain best practice in health, safety and security
4. Contribute to the improvement of research process
5. Maintain quality in own work and encourage others to do so
6. Support equality and value diversity
7. Contribute to promoting health and wellbeing and preventing adverse effects on health and wellbeing
8. Assess patient's suitability to participate in a research study

9. Contribute to planning, execution, monitoring and in some cases analysis of research study
10. Undertake and report on study specific biomedical investigations
11. Gather, analyse and report a full range of data and information
12. Organise specific aspects of study administration
13. Display effective time management skills in order manage own workload
14. To maintain awareness of developments within own research field

Responsibility for Patient Care (including monitoring, diagnostics + investigations)

1. To provide a holistic nursing service to patients within a research study.
2. To practice in accordance with the professional, ethical and legal framework for nursing
3. To undertake nursing interventions consistent with evidence based practice, transferring and applying knowledge and skills to meet patient's needs within a research study
4. To analyse and rigorously review all aspects of the patient care in relation to the studies being undertaken, interpreting information and using knowledge and judgment to monitor patients' suitability to participate in the research study
5. To have knowledge of the informed consent procedure and discuss the implications of the whole assessment process
6. To discuss and agree study schedule of specific studies with the patient, family carer and health care team to ensure their co-operation
7. Assess, implement and evaluate care within research study
8. To utilise highly developed physical skills where accuracy is important e.g. venepuncture, preparing and giving IV injections, assembling study specific equipment, maintaining infusions, recording of ECGs, according to protocol.
9. To refer people to other practitioners when needs and risks are beyond one's own scope of practice or require longer term support
10. To liaise with the multidisciplinary team, co-ordinating and participating in case discussions as required
11. To support patients / carers encouraging them to promote their own health and wellbeing and to express their interests and concerns
12. To provide support and care for the patient and his/her family respecting their need for privacy and dignity
13. To maintain accurate and legible study relevant documentation (written and electronic) in accordance with Trust and National professional policies, other regulatory agencies and guidelines.

Communications

1. To contribute to own personal development
2. To communicate with a wide range of people to explore complex issues and to make complex decisions
3. To effectively communicate complex and sensitive information.
4. To agree the arrangements for communication with the patient/family/carer, and to document these in accordance with Trust policy and the patients right to confidentiality

5. To competently receive sensitive information concerning patients medical condition and provide information using reassuring skills as required e.g. following bereavement, approaching patients/families who are in an emotional/anxious state and when dealing with vulnerable patients.
6. To ensure that essential information on the patients' condition and progress is recorded by self and team members appropriately according to NMC, ICH/GCP and other regulatory body guidelines.

Leadership

1. To manage own workload/study using effective time management
2. Develop knowledge, ideas and work practice for self and others where appropriate
3. To challenge others to take an active part in developing knowledge, ideas and work practice to create a supportive culture
4. To challenge boundaries of existing knowledge in one's own practice leading to improvements in service.
5. Measure own performance and formulate personal development plan

Planning and organising

1. To prioritise workload and provide clear constructive feedback to team members when appropriate
2. To monitor progress of work recognising changing priorities and implement corrective actions within own limits and informing the relevant people.
3. To participate in a flexible working pattern, including out of hours, where appropriate
4. To plan, manage and organise the study/trial implementing changes when required.

Responsibilities for Human Resources

a) Personal and people development

1. To assess, identify and evaluate own knowledge and practice needs in relation to knowledge and skills required to meet the demands of the job
2. To understand own role and scope, identify own development needs and take responsibility for their continuing professional development and performance whilst maintaining a personal development plan
3. To make effective use of appropriate learning opportunities for themselves and others and apply learning to practice
4. To undertake annual mandatory training updates and other relevant courses in line with Trust and local policies
5. To act as a role model and support professional development of all subordinates and junior staff
6. To provide practical support/guidance to colleagues within the study team regarding clinical/research governance issues and also provide teaching to other parties showing competency with IT and visual aids when necessary.

b) Management of people

1. Responsibility for day to day co-ordination of own workload and supervision of peripheral research staff e.g. laboratory staff and those at other research sites.
2. To lead own study whilst assuming some responsibility for workload of colleagues in the absence of the study manager where appropriate
3. To participate in the appraisal process for themselves and others
4. To identify and report poor performance issues
5. To diffuse challenging behaviour, ensuring that the situation is managed in a sensitive way.
6. To participate in the recruitment and selection process
7. To participate in the identification of future workforce requirements
8. To implement disciplinary and grievance procedures if required

Responsibilities for physical and financial resources

1. To ensure efficient and effective use of material resources/supplies within the study/trial
2. To organise arrangements for financial payments in the absence of senior colleague/study co-ordinator.
3. To ensure patients valuables and belongings are managed according to trust policy
4. To monitor, control and store resources/supplies according to the requirements and specifications of the clinical environment
5. To identify any problems with resource use/availability and make recommendations for corrective action
6. To maintain accurate records of resource use

Partnership working/service development

1. To adhere to trust/regulatory agency policies and procedures relating to own workplace to contribute to service/study development
2. To critically analyse current policies and procedures, recognising how research developments can impact on the quality of service in the future
3. To identify outcomes of evaluation and offer constructive views on how the service could change as a result
4. To suggest changes to protocol where necessary within study area
5. To evaluate with others the effectiveness of any changes and how this may benefit the study

Analysis and data management

1. To undertake data collection effectively using the agreed systems.
2. To assist in the clinical analysis and interpretation of study relevant information
3. To use work within own scope of practice, using own judgement before seeking the advice of senior staff in challenging situations

Research, Development and Monitoring

Quality

1. To ensure own actions promote quality and alert others to quality issues
2. To participate in setting and maintaining optimal standards of care within the study protocol
3. To be actively responsible for one's own knowledge base and act consistently with quality standards and guidelines
4. To have an understanding of Research Governance(ICH/GCP, Declaration of Helsinki) and how standards can be maintained

Monitoring

1. To participate in monitoring within the research area acknowledging the introduction of a change in practice if indicated
2. To contribute effectively to evaluation of studies within the research protocol.
3. To co-operate and assist with the Inspection Process

Equality and Diversity

1. To recognise the importance of people's rights and interpret them in a way that is consistent with trust procedures, policies and legislation
2. To challenge behaviour that infringes the rights of others
3. To identify and take action where necessary to address discrimination and oppression

Health & Safety

1. To monitor and maintain health, safety and security of self and others in own work area
2. To maintain an up-to-date awareness of the health and safety regulations of other centres e.g. other clinics/hospitals and within the patient's own home
3. To work within legislation and trust procedures on risk management
4. To take immediate and appropriate action in relation to adverse incident reporting utilising the hospital incident/sponsor reporting system.
5. You have a personal responsibility to support your department/ward/clinic in reducing hospital acquired infection. You must comply with the Trust's policies on infection, prevention and control and maintain your competency to effectively discharge your responsibilities. You must bring deficiencies to the attention of your manager.

Freedom to Act

1. In order to work within the Trust Clinical Governance framework, which includes CNST Standards accreditation, you must be fully competent and trained to undertake the tasks allocated to you.
2. To undertake a wide range of nursing procedures whilst being guided by Trust/regulatory agency protocols and codes of conduct.

Electronic Staff Record

1. Salford Royal NHS Foundation Trust uses an Electronic Patient Record (EPR). All Clinicians must use EPR as the primary patient record. It supports delivery of Safe, Clean and Personal patient care. Paper is used only for clinical record components (e.g. fluid charts) that do not at present have an EPR replacement.
2. The majority of clinical documentation is entered directly on the EPR including health issues, case histories and continuation notes, condition specific structured records and risk assessments. EPR also provides systems for prescribing, requesting most tests and some services, and for viewing results, a local integrated record and correspondence.
3. Access to this comprehensive EPR is via a unique login and password. All Clinicians working at Salford Royal must receive EPR training.

Making Every Contact Count

1. Front line staff are in an ideal position to offer support and advice on how to improve health and wellbeing
2. Staff should use their interactions with the public to give them additional advice on health and wellbeing
3. Staff will be given training and support to help them to signpost people to other services which may improve their health and wellbeing.

Code of Conduct

1. To practice competently, you must possess the knowledge, skills and abilities required for lawful, safe and effective practice without direct supervision. You must acknowledge the limits of your professional competence and only those undertake practice and accept responsibilities for activities in which you are competent (see Trust Competency Policy 2004). This includes use of medical equipment.

Due to the Trust's commitment to continuous improvement, it is likely that the post will evolve over time. These duties will be subject to regular /appraisal and any amendments will be made in consultation and agreement with the post holder.

Appendix 2 PERSON SPECIFICATION

Registration	Current NMC registration essential
Essential Qualifications	Minimum of five years clinical practice experience Able to deliver a high standard of Evidence based individual patient care Delivers nursing care in line with Trust/regulatory agency policies and protocols Effective communicator with good leadership and interpersonal skills Evidence of ability to take charge in the absence of their direct line manager Degree level studies Holds current certificates in ICH/GCP and Research Governance or working towards
Desirable Qualifications	Post basic qualification in specialty
Knowledge, Skills and Experience	Demonstrates specialist knowledge across a range of work procedures and practices Evidence of professional expertise acquired through CPD Evidence of clinical expertise and knowledge acquired through CPD and experience Evidence of involvement and leadership in teaching and mentoring learners Evidence of experience at self-management within a given area Evidence of research experience Evidence of competency in cannulation and infusions Evidence of ability to work across a number of projects and to maintain documentation to the high standard Evidence of good computer literacy Evidence of experience of working in an CV studies Competency in basic nursing skills including venepunture, cannulation, performing ECGs etc.
Physical & Mental Requirements	Are there any physical or mental requirements for the post Physical effort: The post holder will be required to exert frequent moderate physical effort for several periods during a shift e.g. transportation of study equipment across research sites e.g. ECG machines, centrifuge etc. Mental effort: To exert frequent concentration responding to frequent changing needs in the research area Emotional effort: the post holder will at times be exposed to distressing and occasional highly distressing and emotional circumstances May be exposed to unpleasant working conditions/hazards

Appendix 3 INTERVIEW CRITERIA

Criteria	Importance (High, medium, or low)
Demonstrates the ability to deliver a high standard of evidence based individual patient care	H
Evidence of professional clinical knowledge acquired through CPD and experience	H
Able to take charge in the absence of direct line manager	H
Effective communicator with good leadership and interpersonal skills	H
Evidence of involvement and leadership in teaching and mentoring learners	M
Evidence of leadership and team player	M
Evidence of involvement in policy and practice changes arising from audit	L
Evidence of Research Experience & Knowledge	H