HEALTH AND SOCIAL CARE SCOTLAND

Embedded and emerging good practice in health and social care

Aligned to the *Framework for Community Health and Social Care Integrated Services*

Health and Social Care Partnership: Enhanced clinical support for care homes				
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Name of good practice: Enhanced clinical support for care homes				
Select (x) all areas that apply to your good practice (select more than one if applicable)				
CLIENT GROUP	Children and young people		Older adults	x
	Younger adults			
SETTING	City		Remote & rural (incl islands)	
	Corporate		Urban	x
SERVICE AREA	Addictions		Management team	
	Admission avoidance	x	Mental health	
	Community care services incl care at home/care homes		Physical disabilities	
	Day services		Physical health	
	Housing incl Homelessness		Primary care	
	Intermediate Care incl Hospital at Home		Rehabilitation	
	Justice services		Social care services	
	Learning disabilities		Supported discharge	
	Other – please specify			
ELEMENTS of FRAMEWORK	Anticipatory care planning		Live independently at home or in a homely setting	
	Assets based approach		Manage own care	
	Connect with communities		Reablement	
	First point of contact		Seamless working with acute	
	Enhanced care in care homes / supported accom	x	Short term targeted interv to meet more complex needs	
	Fully integrated community teams		Teams aligned with general practice	x
	Other – please specify			
ENABLERS	Agile working		Information sharing	
	Aligned plans		Infrastructure	
	Clarity of vision		Management information	
	Clinical and care governance		Shared accountability	
	Collaborative leadership	x	Strong team ethos	
	Culture and values	x	Technology	
	Fit for purpose premises		Well-developed lead professional roles	
	Improvement capacity		Well-developed relationships	x
	Other – please specify			

East Dunbartonshire HSCP

Enhanced clinical support for care homes

SITUATION	At the end of April 2020 a number of care homes in East Dunbartonshire HSCP experienced large scale outbreaks of COVID-19. New symptom management plans had been developed by NHS Greater Glasgow & Clyde for patients with COVID-19 in care homes with local GP practices providing stock orders of medication for patients to be looked after in the care home however nursing home staff were struggling to manage the high numbers of symptomatic patients. Accessing support for clinical review of the patients to have medication authorised was extremely difficult in the out of hours periods, creating lengthy delays in patient care.
ACTIONS TAKEN	In response the HSCP Care Home Oversight Group facilitated the development of a local enhanced clinical service for care homes to access at weekends. Two ANPs from primary care worked weekends supported by the community nursing senior nurse and the commissioning officer. A virtual ward round took place on a Friday afternoon facilitated by care home liaison nurse. The clinical director and other local GPs provided clinical guidance to the ANPs via telephone if required.
OUTCOME / IMPACT	The service provided valuable clinical support and reassurance to care home staff, relatives and improved resident outcomes. Education on supportive management of patients with COVID-19 helped the nursing staff with symptom management – increasing confidence from families and staff alike that people were well cared for. Hospital admission was avoided through sensitive appropriate discussions with a realistic medicine approach. The service was evaluated very well by care home managers and staff.
MEASURES/ INDICATORS OF SUCCESS	Across 05 May and 06 June the activity undertaken is highlighted below. There were 158 referrals to the service: • 64 referrals that resulted in a prescription being generated • 42 referrals were for authorisation of prescription • 38 referrals resulted in a face to face clinical assessment • 1 referral to the service involved a patient being conveyed to secondary care for further investigation (exclude PE due to haemoptysis) but was swiftly discharged back to the care home with enhanced clinical support • 0 referrals to the service resulted in admission to hospital • 6 referrals to the service came from GP Out of Hours Service

Even better if …
(enablers to further the principles of integration and result in even better outcomes if …)

E-Health solutions supported information sharing – barriers with multiple IT systems.

NATIONAL HEALTH AND WELLBEING OUTCOMES

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.	
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	X

3. People who use health and social care services have positive experiences of those services, and have their dignity respected.	X
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	X
5. Health and social care services contribute to reducing health inequalities.	
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	
7. People who use health and social care services are safe from harm.	
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	
9. Resources are used effectively and efficiently in the provision of health and social care services.	
Health and Social Care Scotland's 5 Essential Elements (click link to listen to statement of intent)	
1. Transforming the approach to improving health, wellbeing and independence	x
2. Building stronger community care systems and primary care services	x
3. Establishing a new focus on mental health	
4. Securing a sustainable acute hospital service and specialist care service	
5. Strengthening future partnerships to ensure a modern sustainable workforce	

Links to any published reviews/evaluations	

Before submitting this example of good practice please ensure approval and sign-off by your head of service / chief officer.

Approved for online publication *(signature and position)*	Derrick Pearce, Head of Service
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