



Category: Personalisation of Care

Award Reference Number: 1296

Region: North East

Disease: Substance misuse

Organisation Type: Community/PCT

Intervention: Root Cause Analysis

Key words: Virginia Mason Production System, Patient flows, Tier 3

Supporting Care Homes - keeping families close NHS South of Tyne and Wear Community Health Services

Setting: NHS South of Tyne and Wear serves a population of approximately 633,000, employs over 4,000 staff and is the name given to the integrated management arrangements which exist across the three Primary Care Trusts [PCTs] of Gateshead, South Tyneside and Sunderland.

This describes a local initiative developed to explore the needs of frail older people in care homes. It was undertaken by an Older Persons Nurse Specialist [OPNS] employed within Gateshead. Whilst the results of this pilot have subsequently led to several proposals aimed at improving quality of life for older people residing in care homes in Gateshead, this focus is on how the patients experience was enhanced by proactively promoting family involvement in their care.

Introduction: Local population predictions show an expected 38% increase in those living over the age of 85 years over the next 10 years. Given that local and national consensus is that this population is known to have frequent hospital admissions, increasingly complex needs and longer hospital stays it is evident that there needed to be an exploration of how their health needs are addressed and what pathways are available for older people living long term in care homes in Gateshead. This project was undertaken within the care home population served by Gateshead PCT. Gateshead has a population of approximately 191,000, of whom:-

- 18% are over 65 years
- 3.7% are over 85 years

The interagency and multidisciplinary 'Unscheduled Care' work stream of Gateshead's Practice Based Commissioning Consortia, appointed a nurse specialist for older people to work with the five care homes with the highest hospital admission rates over a 12 month period from August 2009 – August 2010 .

The aim of the project was to prevent avoidable hospital admissions through the delivery of clinical care to residents and the provision of education and training for care home staff.

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