

Care Home Pack (Care Homes) Updated for Winter 23/24

Winter 2023/24

- This quick reference guide has been put together to help Care Homes in NHSGGC area, and their teams, get the best out of their associated General Practice and community teams, Flow Navigation Centre, NHS 24 and GP Out of Hours.
- Care homes, Primary and Secondary Care remain under immense pressure
- Checklist is designed to help with preparation

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Checklist for all care homes

- **Anticipatory Care/ Future Care Planning** – review & update patient Future Care Plans; let the practice know of any changes.
- **Oxygen concentrators** – check if Care Home still has one; if not and need one please contact respiratory teams
- **Falls pathway** – do your teams know when and how to use this?
- **Confirmation of Death** – have all your nursing staff completed the training?
- Check what support your **community pharmacy** can offer- Pharmacy First/Pharmacy First Plus
- **Ensure Covid/flu vaccination** have been offered to all those who live in care home
- Ensure that care home staff and healthcare staff are offered and supported to be vaccinated for both flu and Covid

Future Care Planning - what is this?



- As health and social care professionals, we want to promote careful, kind human interactions. Asking “What matters to you?” is about understanding what matters to an individual in their life. It’s about having meaningful conversations with individuals, as well as their families and carers.
- These conversations can help inform decisions about a person’s health and care. When we engage with individuals about their health and care decisions, it can greatly improve their wellbeing and outcomes.

Future Care Planning - what is this?

- Name change as of September 2023 as part of a national review – changed from Anticipatory Care Plan (ACP)
- What is a Future Care Plan?
 - Dynamic process
 - Made following open and honest discussions
 - Personalised to the resident
 - What matters to the resident and family/carers
 - How we expect their illness to progress
 - What might benefit them and what might not
 - What treatments would they want/not want

Future Care Planning

- Helpful to include in future care plan
- Significant conversations
 - Future care wishes
 - Just in Case medication given for resident and instructions for use
 - DNACPR forms
 - AWI forms and POA/NOK/Guardian contact details
 - Admission vs non admission to hospital
 - Add preferred place of care/ preferred place of death

Future Care Planning

- Check if the resident has a Future Care Plan; when was it last updated? - what discussions have been had recently?
- Share update with the GP practice
- Future Care Plan should include wishes around admission to hospital
- Lots of resources available to support this
 - ACP Team for health board - [Link to ACP training hub](#)
 - ACPSupport@ggc.scot.nhs.uk
 - Care Home Collaborative
 - Care Home Nursing Team
 - Care Home Liaison Team

Future Care Plan

- Remember to emphasise what can be provided in nursing home
 - Care by team who know them including GP, nurses and carers; and support of CHLN
 - Own bed / home comforts / familiar faces
 - If appropriate
 - Oral and s/c medications including antibiotics and Just In Case / palliative medication
 - Oxygen if care home / GP happy to provide
 - SC fluids (through CHLN)
 - Blood tests

Future Care Planning

- Resources for families
 - [NHS Inform Future Care Planning](#)

Contacting GP Team / NHS 24

If a resident's condition is changing/deteriorating and you feel you need additional clinical advice / support...

- If there is a life threatening emergency, and transfer to hospital is the preferred option for the resident then dial 999
- Could the Care Home Liaison Nurse help?
- Is the GP practice open – contact practice in the usual way
- If the GP practice is closed – can the matter wait until the practice is open?
- If the practice is closed and the matter cannot wait then contact GP OOH via NHS 24 (111)

Contacting GP Team / NHS 24

- Is the call due to a fall – call Flow Navigation Centre as per inclusion/exclusion criteria on following slides
- When contacting CHLN / GP Team / NHS 24 / GP OOH please ensure you have the necessary information to hand – this would ideally include the resident's temperature, pulse, blood pressure, respiratory rate and oxygen saturations and future care plan.
- Can your attached pharmacy help?

Pharmacy Support

- Community Pharmacy can provide you with support around prescriptions you may have missed/are needing
- They also can provide Pharmacy First support for a list of health issues
- [Care Inspectorate information on Pharmacy First](#)
- Consider discussing with your attached pharmacist on what they can offer you for support
- Cold sores, constipation, diarrhoea, eczema, hayfever, pain, sore throat
- [Pharmacy services in Scotland \(nhsinform.scot\)](#)

Care home falls pathway - Run through the flow navigation centre (FNC)

Injuries to call FNC about (0800-141-2312)

- injury which renders them non-weight bearing (when previously weight bearing)
- Chest/trunk/abdominal injury
- Minor head injury/ scalp laceration/ facial injury
- Simple limb injury, pain, bruising or swelling to e.g. shoulder/upper-arm/wrist/hand/knee/ankle/foot
- Burn/scald
- Wounds/skin flap

Care home falls pathway

Run through the flow navigation centre (FNC)

Injuries to call NHS24 (111) or 999 for

- Obvious bone deformity e.g. thigh, shin, upper arm, forearm
- Head injury on anticoagulant medicine e.g. warfarin, edoxaban, rivaroxaban, apixaban, dabigatran
- Head injury with a loss of consciousness or new confusion
- Uncontrollable bleeding including nosebleed >10 minutes of direct pressure
- Signs of systemic illness since fall e.g. looks pale/sweaty/pain +++

Care Home Falls Pathway

Available hours 10.00 to 21.30

Fall/ Injury
in Nursing
Home



Nursing Home
Nurse can call
directly

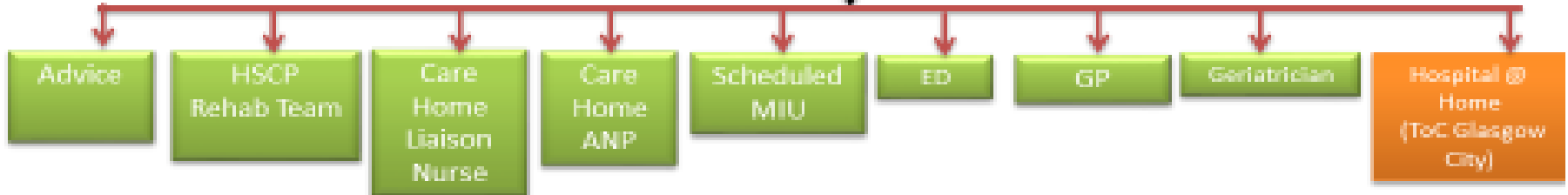


NHS GGC
Administration
Hub

Telephone 0800-141-2312

Flow Navigation
Centre
VIDEO
CONSULTATION

Scheduling of
video
consultation +
Entry onto
hospital TRAKcare
system



First aid kit for managing minor injuries with advice from FNC

- List of first aid items it would be advantageous for the Care Homes to have:
 - Basic analgesia (paracetamol) if available
 - Dressing packs including swabs/water/saline- for wound irrigation.
 - A wound dressing : Kliniderm Foam Silicone Contact Layer – which is recommended for skin tears
 - Silicone Border Adhesive Dressing (10x10cm)
 - Wool bandage for padding/absorbing fluid (velband)
 - Crepe top bandage/ tape
 - Slings (triangular bandage)
 - Steri-strips (Leukoplast wound close strip 6x38mm)

RESTORE2

Recognise Early Soft Signs, Take Observations, Respond, Escalate

- Recognising subtle changes in your residents is what you are all good at and these changes can often be the first signs of them becoming unwell.
- The earlier these are recognised early, this can often lead to better outcomes for residents, by helping to ensure they receive the right care, at the right time, in the right place.
- The Healthcare Framework recommends RESTORE2 as a tool to support nurses and carers.



Recognise Early Soft Signs, Take Observations, Respond, Escalate

- There are five key parts to RESTORE2:-
 - Recognising soft signs of deterioration which supports carers to identify potentially unwell residents
 - Knowing ‘what’s normal for the resident’ which in turn helps understand when a resident’s condition has changed
 - Use of the National Early Warning Score to provide a standardised and objective assessment of risk and sickness
 - An escalation / communication pathway to help staff ‘get the right help’ for their resident
 - A structured communication tool to guide staff to ‘get their message across’



Recognise Early Soft Signs, Take Observations, Respond, Escalate

- If RESTORE2 would be of benefit to your home, please have a discussion with your care home manager and/or visit the website to view and download the resources or contact us through our this link
- [link to contact the Care Home Collaborative](#)

Confirmation of Death

- Nursing home nursing staff should all have completed online training on this – if residential care home, DN's can do if patient is known to them
- Confirmation of Death training is available through the Care Home Collaborative
- Please ensure your nursing team members are appropriately trained
- Care Home Collaborative and CHLN's can support with the training if not been completed
- Resources for this and the electronic Confirmation of Death form to be completed can be found here
 - https://www.palliativecareggc.org.uk/?page_id=5609

COVID Testing- October 23

- PHS have just updated the guidance (main changes are in relation to discontinuation of symptomatic staff testing).
- **Resident testing** - the advice is in high risk settings residents who present with fever and/or new respiratory symptoms should be tested.
- To **avoid over-testing** of residents with only very mild respiratory symptoms / only mild other symptoms, the territorial board HPTs came to a consensus position in spring, that the symptom 'threshold' for which testing would be advised by HPTs would be
 - **i) fever OR ii) a sudden decline in physical or mental ability/function,**
In combination with
 - **iii) new onset respiratory symptoms**
- PCR test should be used to allow parallel testing for covid and the frontline resp viral panel (flu A/B and RSV).

COVID Testing- October 23

- When a cluster of symptomatic cases arises, it is good practice to submit samples for up to five symptomatic service users to confirm the pathogen - any further residents with compatible symptoms would be assumed to have the same pathogen and would not require testing (unless of course there is a clinical reason to do so, or in the instance of mixed pathogen outbreaks having been detected)
- Testing requires GP to request through SCI gateway (except Inverclyde)
- HSCP/NHS will deliver test to the care home (GCHSCP to confirm)
- Returned to lab for testing by HSCP/NHS (GCHSCP to confirm)
- [https://www.sehd.scot.nhs.uk/cmo/CMO\(2023\)12.pdf](https://www.sehd.scot.nhs.uk/cmo/CMO(2023)12.pdf)
- [Public Health Update](#)
- Public Health Contact – phpu@ggc.scot.nhs.uk

COVID Treatment

- Where admission is clinically indicated, in their best interest and wished for by patient / PoA / legally appointed guardian / NOK this should be the preferred choice for any Care Home resident who is acutely unwell (with or without COVID).
- Some Care Home residents may be eligible for community based COVID treatments if they are in a 'Higher Risk' cohort then following a positive COVID test contact should be made with the Flow Navigation Hub (by a patient representative not GP team) on:
 - 0800 121 7072
- 'Higher Risk' residents should have been notified of their status, and should also be automatically contacted once a positive PCR test received / LFD test result is uploaded.
- The Flow Navigation Hub and Prescribing Support Pharmacists will assess further suitability for treatment and make any necessary arrangements.

Support for you!

- Reminder to look after yourself when under the current workload and pressure!
- If struggling please let someone know and ask for help, speak to your GP or colleagues
- Workforce specialist service now available, reactive, confidential and self refer
 - Also wellbeing hub - <https://wellbeinghub.scot/>

Resources

- <https://www.nhsggc.scot/your-health/care-homes/>
- <https://www.nhsggc.scot/staff-recruitment/staff-support-and-wellbeing/>
- <https://sway.office.com/p3QWjY4altHviB6o?ref=Link>

Thank you for all you and your teams do!