A Helping Hand for Hydration

The Care Home Collaborative (CHC) Hub 5 Intensive Peer-Support Model, Using Quality Improvement Methodology to Embed Hydration



Aim

The Care Home Collaborative Hub 5 is a team of Care Support Workers and Registered Nurses, working as part of the NHSGGC Care Home Collaborative to deliver quality improvement in care homes.

An Inverclyde care home, had experienced a surge in the number of residents experiencing urinary tract infections (UTI). Research conducted by the University of West London¹, suggested that increasing hydration may assist in prevention and management of UTI. The care home team, with the support of Hub 5 undertook a quality improvement (QI) project to promote hydration for all residents.

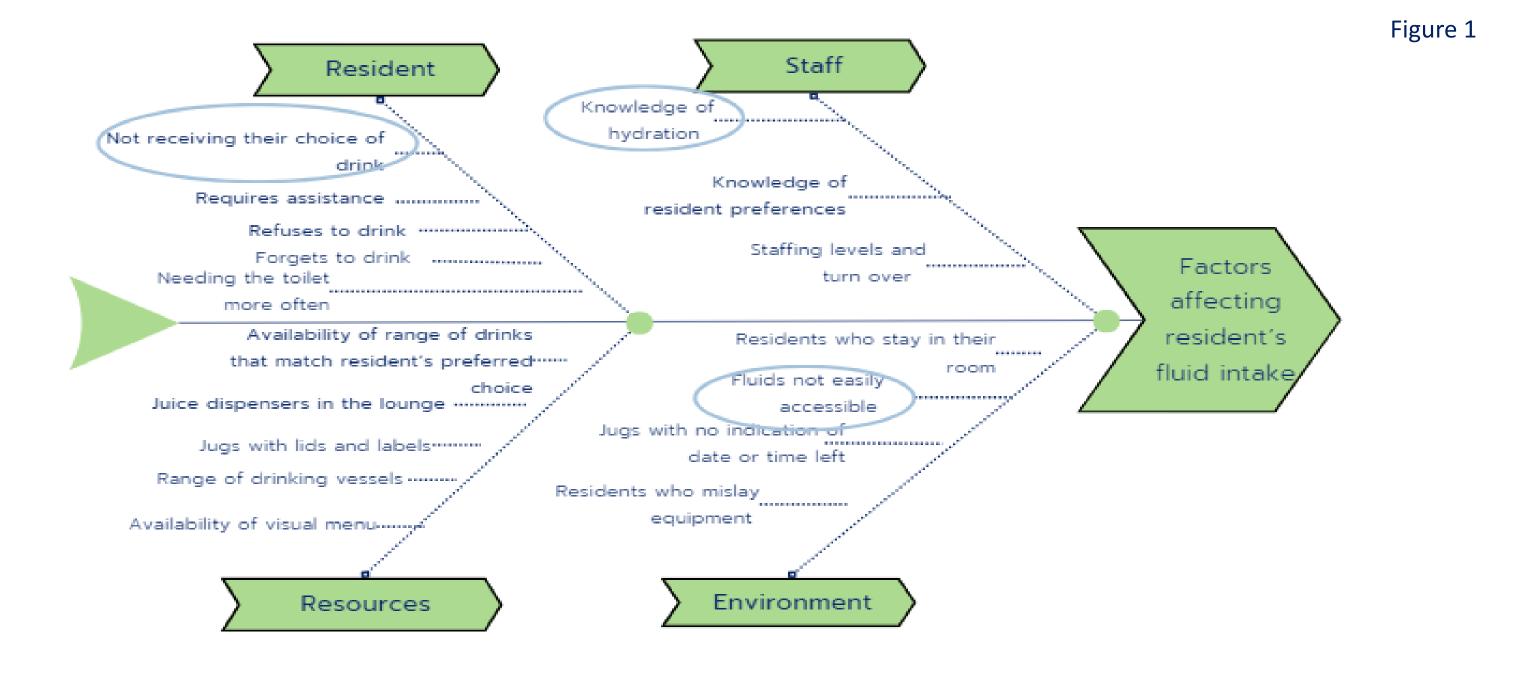
Starting in September 2023 the project aimed to achieve a 10% increase in fluid intake for the 5 residents with most frequent instance of UTI, by November 2023.

Key findings from the project include:

- Residents had a significant increase in fluid intake (an additional 300ml)
- The Hub 5 intensive peer-support model had an approval rating of 4.6/5, with the care home team.

Methods

Initially Hub 5 carried out observation of practice, and subsequently worked in a peer support model, participating in mealtimes and hydration rounds. Hub 5 sought to encourage discussion and brainstorming with the care home staff. These activities supported a sound understanding of the views of care home team and the challenges in the home surrounding hydration. The totality of findings are presented in the following fishbone diagram (figure 1), which helped to identify change ideas.



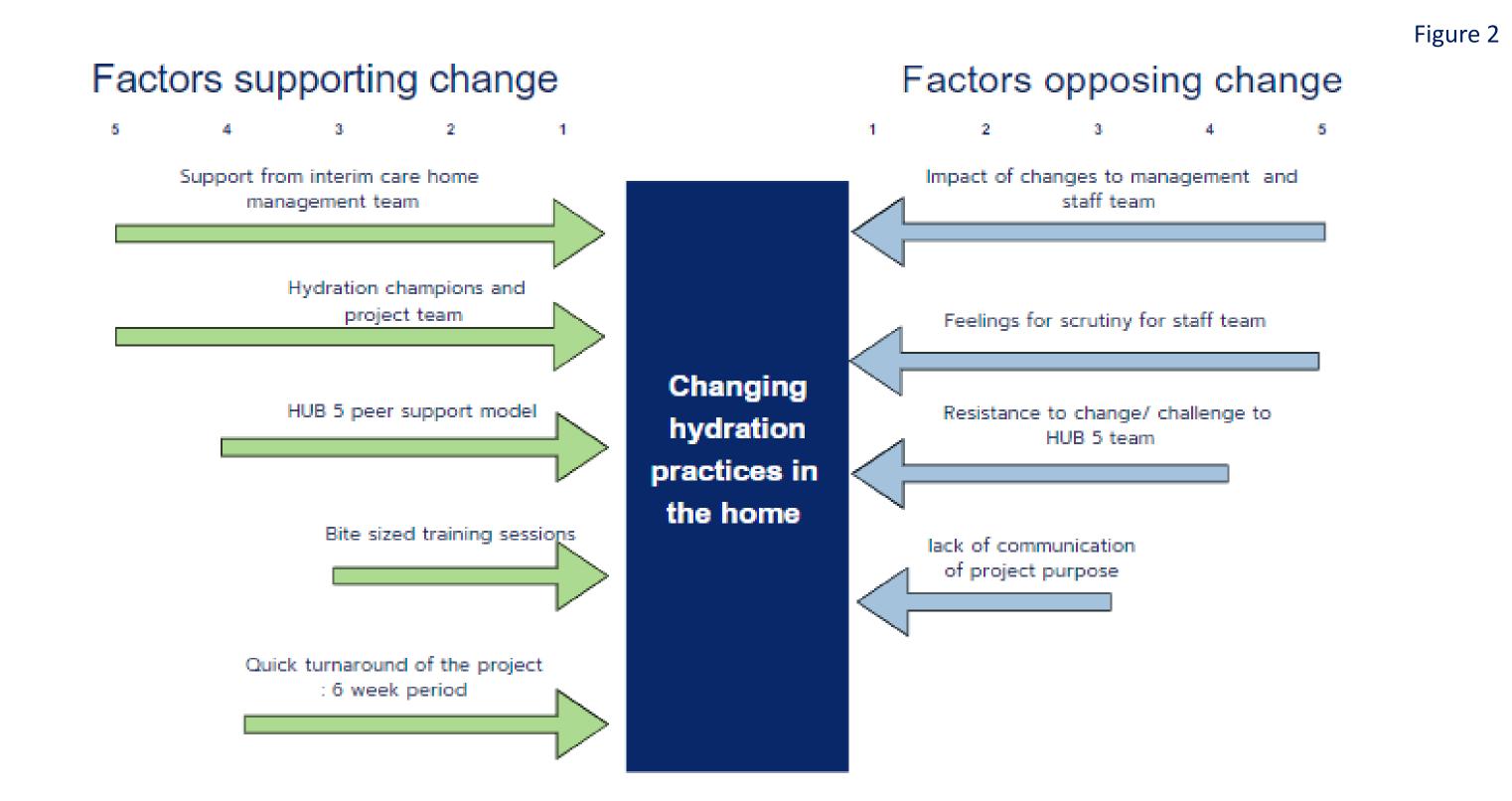
Change ideas included

- Implementing a visual menu card with variety of hot and cold drinks
- Hydration stations around the home
- Working with staff peer support providing bite-sized education, promoting reflection 'in action' and reflection 'on action'².

Hub 5 participated in weekly reflective sessions to support their own wellbeing and development. These sessions helped to identify factors supporting and opposing the implementation of change within the home. The themes of which are summarised in the following force field analysis (figure 2).

References

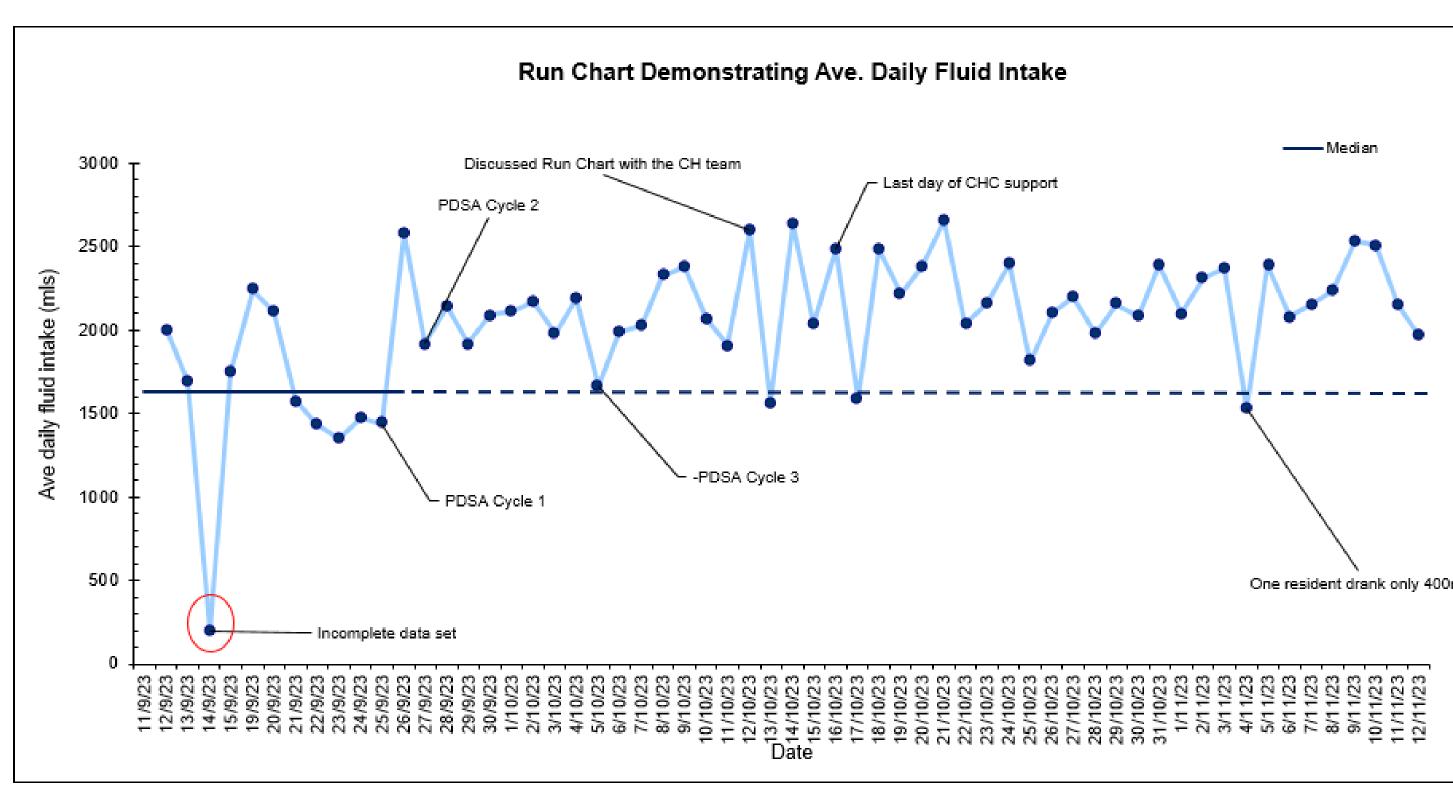
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Reflection allowed HUB 5 to consider strategies and resources to minimise barriers to change and promote successful implementation³.

Hub 5 also sought to develop their knowledge and practice of interpersonal approaches, such as reframing observed behaviours⁴ which foster compassionate communication, and facilitate productive peer working relationships⁵.

Outcomes Chart 1



- Resident's fluid intake increased by **26%**, which exceeded the overall project aim and UTI instance was significantly reduced from 14 residents in August, to only 1 resident in September and October.
- The care home team sustained the increased fluid intake for a further 4 weeks in the absence of the Hub 5 team.
- The Hub 5 intensive peer support model had an approval rating of 4.6/5 with care home staff

"It has been interesting to see the changes in the home, and with the residents" "This has been a very good initiative at the home. It took time for staff to have a good understanding and embrace the project, but this is now happening on a daily basis"

"I really enjoyed the extra support after being anxious at the start"

Conclusions

- The Hub 5 intensive peer-support model underpinned by QI methodology is an effective method of generating improvements and embedding a sustained change (hydration) within the care home environment.
- Share the data with the team, using it to communicate small wins and promote buy-in to quality improvement projects
- Gather and use qualitative data to demonstrate a person-centred impact of quality improvement initiatives and help tell the story of the QI journey



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