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Case Study Enhanced Care: A New Model

Launceston Community Hospital, Cornwall Partnership NHS Foundation Trust

With Covid-19 putting unprecedented pressure on care homes and patient flow, the team at Launceston Hospital took the decision to admit patients with dementia and provide them with enhanced care. This was a 'game changer' for Launceston Community Hospital and required them to introduce whole new ways of working.

Context

At the beginning of the pandemic, the hospital team considered how it could best assist with the pressures on local health and care services. Admitting patients with Covid was not an option for this hospital as it would mean several nursing and medical staff members would be unable to work on the ward. Instead, the team responded to the need by developing alternative ways to support patients with dementia through providing an increased number of beds which could support enhanced care.

Enhanced care is a closer level of supervision used when staff have risk assessed the potential harm to a patient they are caring for. This means that the patient will be closely observed to maintain their safety, privacy and dignity.

The hospital chose a ward whose design would enable them to create separate areas for men and women in two seven bedded bays at either end of the ward. This would allow staff to work effectively while ensuring the dignity of patients was respected.

The cohort of patients requiring enhanced care were people who would otherwise have been in a care home or care home with nursing. This included patients with enhanced clinical needs such as those at an elevated risk of falls or delirium. Locally, care homes were unable to meet the needs of these patients due to the impact of the pandemic.

What we did

Providing enhanced care itself was not a new way of working for the team, there are often a small number of patients with this need in the Community Hospital. It was a team decision to opt to provide enhanced care to a greater number of patients. Engagement with the decision making was important in helping introduce new ways of working.





Significantly increasing the number of patients with this clinical need posed challenges. The team recognised that it would require more staff both to help them adapt and to cope with the higher levels of clinical needs that these patients were likely to present with.

The hospital determined that they needed an additional healthcare worker in each bay, day and night, to implement their 'bay watch' system of robust patient observation.

To achieve this would mean recruiting and training new workers at pace who would be there to support the qualified nursing staff. Recruitment can be difficult at any time but doing this in a pandemic brought challenges but also an opportunity to try something new.

The team developed a new General Worker role to work alongside Healthcare Assistants to address this increased workforce need. General Workers were recruited from the local population, many of whom had been furloughed due to lockdown and were keen to develop their skills and use their time to help the NHS. This included people who had previously worked as hairdressers and lifeguards. The Community Hospital environment was new to them but they had a range of people and communication skills that were transferable and lent themselves to this role. General Workers attended corporate induction and weresupervised and developed within the teams they worked with.

They supported patients with a variety of activities such as reading, helping with mealtimes, and contacting family members. This was particularly important as the lack of visitors had a massive impact on this patient group, making behaviours more challenging as they were more isolated and often lacked understanding of the reason their husband, wife, son or daughter could not visit them.



General Workers and Health Care Assistants worked closely and interchangeably as a team. The Community Hospital was able to minimise the need to engage temporary agency staff which enabled them to provide better continuity of care for patients and reduce stress on staff.



It became a well-established, well integrated, consistent team. Bank staff, such as Mental Health Healthcare Assistants, were brought in where specific additional skills were needed to help specific patients. Where this happened, the team felt it was a positive experience as they brought a new perspective and created opportunities for ward staff to learn different skills and techniques. This was particularly significant where it enabled less experienced staff to understand how their own ways of working could inadvertently lead to or make worse their patients' challenging behaviour.

Disparities between staffing in the acute trust ward providing Enhanced Care and the Community Hospital and difference in pay between general and Mental Health Healthcare Assistants were highlighted by delivering this new model. The team worked hard to focus the team on this initiative as an innovative and evolving way of working that could help inform future models.

The team obtained support from Mental Health colleagues. The Nurse Specialist for Complex Care and Dementia in-reached weekly. This support ranged from advice regarding an individual patient, education and sharing techniques. The Mental Health Team facilitated a debrief after an event the Community Hospital Team found difficult which staff engaged well with and found beneficial. This relationship evolved over time



and staff reflected that they would have valued spending more time with the Mental Health team earlier on.

The GP on the unit has an interest in dementia and her support made the team feel they could support this model of care. She was very visible during dementia week and some of the events and work was shared on Twitter.

Not all staff found the transition to an Enhanced Care Model easy. It was quite different to the traditional rehabilitation and end of life care the team were used to providing. The Matron and Ward Manager put in place support on an individual and team basis and ensured good practice and care were acknowledged and highlighted. The Matron did an Excellence Report (on the Datix system) for Launceston to celebrate their success which meant they got a certificate to say well done.

The team are close knit and quickly developed good relationships with new team members. This peer support was invaluable in supporting team morale and keeping care patient centred especially during challenging times.

Patients received the safe and compassionate care they required. There was a potentially negative impact of those patients who did not require enhanced care as the ward was noisy and the behaviours of other patients may have generated feelings of anxiety and fear. The team managed this sensitively.

A TEAM MEMBER SAID:

Having so many patients with enhanced care needs together in one space was beneficial in one way but patients may have triggered each other.





The team continued to think of new ways to support all their Community Hospital patients. A Meaningful Activity Coordinator role had been developed in Bodmin Community Hospital and Launceston borrowed the idea of the role and were able to adapt it for their own team. This brought additional skills and resources to support patients by reducing boredom, providing stimulation and introducing fun and laughter.

Outcomes

BENEFITS TO STAFF

- One main benefit of the approach is that the ward team have developed additional skills through training and through the experience of delivering enhanced care to a different cohort of patients.
- Staff are less concerned about taking a patient requiring enhanced care as they understand the importance of getting to know the individual and understanding their triggers.

BENEFITS FOR PATIENTS

• The approach has contributed to improved outcomes for patients and the Head of Patient Flow has reported that the outcomes are better than for those patients on the Discharge to Assess pathway.

BENEFITS FOR THE TRUST

- Some of the General Workers have stayed and are now in permanent roles.
- This model of working has prompted the need for an Enhanced Care Policy within the Trust.
- The Meaningful Activity Co-ordinator role was further developed.
- The local health and social care system was supported and patient flow maintained through the flexibility of the Community Hospital.

Learning

- We would take more time to consider the environment and implications on staff and patients based on the experience we have had over the last two years.
- We would provide more training in areas such as Managing Aggression and Violence at the level provided for mental health teams.
- We would ensure the learning regarding safe staffing benchmarking, skill mix and terms and conditions for different staff groups are considered in any service development work.
- It would also be helpful to have the Nurse Specialist in reach more regularly as part of the daily huddles and Multi-Disciplinary Team meetings as initially, all contact was remote.





Where are we now

The initiative hasn't continued due to a strategic change in how Community Hospital capacity is being utilised. Whilst the hospital still cares for patients requiring enhanced care, there aren't as many in one bay. Each Community Hospital in Cornwall undertakes some aspect of enhanced care for patients. Learning from Launceston's experience has been shared with the other areas via their Matron network.

Launceston now has a Meaningful Activity Co-ordinator in role on the ward seven days a week. This is a protected role undertaken by a Healthcare Assistant in the team who can support a wide range of activities throughout the day. We have now recruited permanently into this role and are looking at supporting our other Community Hospitals to do the same.

There has been a decrease in the need to request additional staff to support enhanced care, a reduction in falls and better patient experience as she has time to support communication with families

TOP TIPS FOR IMPLEMENTING A SIMILAR INITIATIVE FROM SARAH WASHER, MATRON:

- Enable regular communication with the team
- Be present with the team as a Matron
- Ensure you have safe staffing in terms of levels of knowledge and skills in place consistently
- Prioritise having a Meaningful Activity Coordinator Role

Next Steps

An Enhanced Care Policy is currently being developed and work is being done with Royal Cornwall Hospital Truro to review and adapt their policy. This has already improved the enhanced care pathway and has brought the two Trusts closer together in supporting those that need enhanced care in a hospital setting.

Contact



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