

Date of Trust Board Meeting: 4 September 2007

Subject:	
Services for Older People in BSUH	
Purpose:	
To outline the national and local context in relation to the care of older people. To scope performance and identify areas for future work.	
Corporate Objective:	
Health Improvements and Clinical Standards	
Summary:	
The Trust Board receives 6 monthly updates in relation to the care of older people at BSUH. This paper gives a brief summary of the national context against which the Trust has set its own work programme. It describes projects which are currently underway and evidence of progress made against a number of parameters. As requested following the presentation of the last paper, more information has been included to demonstrate how the Trust compares to national/local benchmarks and identifies areas of good practice as well as where more work is needed.	
Key Recommendations:	
To accept and support the recommendations as outlined in section 6.	
Financial Implications:	
Review date:	
In six months.	
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Date:	September 2007
Presenting Director: Jane Butler, Deputy Chief Nurse	

Services for Older People in BSUH - Report to the Trust Board - July 2007

1. Aims

In 2001 the National Service Framework was published, it set national standards for care and service development for older people across the health and social care sector. There have been a large number of initiatives and developments in BSUH to address the NSF standards and improve the experience of older people who receive our services.

The aim of this paper is to outline the local and national projects, scope local performance in caring for older people and identify priorities for future work.

2. National Context

There has been various recent national initiatives and policy which have significant impact on the care of older people in acute hospitals. These are:

New Ambition for Old Age: Next Steps in Implementing the National Service Framework for Older People (April 2006)

This publication acknowledges that great steps have been made in terms of service provision in both health and social care for older people since the publication of the NSF in 2001. However, deep rooted negative attitudes and behaviours towards older people still exist.

Dignity in Care DOH (November 2006)

As a response to 'New Ambition for Old Age' and the white paper 'Our Health, our Care, our Say', in November 2006, the Dignity in Care Campaign was launched, aimed at stimulating a national debate about dignity in care and creating a culture of zero tolerance of abuse and disrespect of older people.

Mental Capacity Act (April 2007)

This act has considerable impact on the care of older people, with increasing numbers of people with dementia, by 2025 it is estimated that there will be over one million people with dementia in the UK (Alzheimer's Society 2007). The Act enshrines, in statute, current best practice and common law principles concerning people who lack mental capacity and those who take decisions on their behalf.

Hungry to be Heard (February 2006)

This report focuses on the issue of malnutrition in the hospitalised elderly.

Privacy and Dignity - A report by the Chief Nursing Officer (CNO) into Mixed Sex Accommodation in hospitals. 2007

Most recently the Chief Nurse published a report on the progress within the NHS on meeting the 2002 target to eliminate mixed - sex accommodation.

3. BSUH Context and Work in Progress

Older People's Experience Steering Group

The Older People's Experience Steering Group was established in 2005, meets bi-monthly, is chaired by a Non-Executive Director and includes the Chief Nurse, multi-professional clinical staff and a broad representation from statutory and voluntary groups. This

committee reports to the Equality and Diversity Committee. It aims to ensure BSUH gives high profile to the care of older people, to engage and work with the wider community (statutory and voluntary organisations) and to encourage a more joined up approach to care, thus facilitating an improvement in the experience of older people receiving services in the Trust. In the past year it has:

- agreed continence guidelines and assessment tool
- worked with facilities to improve access to inter-site transport for older patients and their carers
- developed a roll-out programme for individualised drug information for older people when discharged
- begun work to assess the organisation's ability to address the Dignity Challenges (DoH Nov. 2006).

Training

Much of the training aimed at clinical staff will have relevance to the care of older people. Four particularly pertinent areas are:

a. Working with Older People

This innovative course has been developed in partnership with the Institute of Nursing and Midwifery at Brighton University and is aimed at nurses who are caring for older people but have not completed recent study.

Eight participants completed the course in July 2007; 7 from the Emergency Division (Medicine and Care of the Elderly) and 1 from Elective (Orthopaedics at PRH).

b. Mental Capacity Act Training.

Implementation of the Mental Capacity Act (MCA) is directed by the MCA Steering Group. Cascade training is being implemented for nurses, midwives and health professionals. Drop-in sessions have been organised to train medical staff. Certain key specialty groups will be targeted by the Independent Mental Capacity Advocates for training on referring people who lack capacity to their services. To date 16 staff have been trained.

c. Older People's Champion Training.

Older People's Champions attend quarterly training on issues pertinent to older people (discussed in detail later in the paper).

d. Protection of Vulnerable Adults Awareness Training

This multi-professional training has been established for two years. Over 800 people have been trained to recognise abuse and how to refer cases of actual or suspected abuse to Social Services. This heightened awareness has led to an increasing number of referrals to social services.

Strategy for Nursing and Midwifery

This Strategy outlines the programme of work undertaken to contribute to achieving the Trust objectives. The strategy is composed of 10 themes of work, each with a clearly delineated project plan. One theme is Care of Older People, four others relate directly to the care of older people, these are; Safeguarding Vulnerable People, Food and Hydration, End of Life Care and the Essence of Care.

Research

BSUH is a partner in two large research studies into the experiences of older people's of acute hospital care.

a. Culture Change and Care of Older People

The NHS Service Delivery Organisation has commissioned the University of Sheffield to carry out research to explore the impact of organisational change on the care of older

people. BSUH is one of six Trusts to be studied in a two year project. The aim of the study will be to highlight areas of good practice and those where further work needs to be done to improve care services. On completion of this study a 'tool kit' will be compiled to help Trusts and wards implement change effectively and therefore improve patient care and the working environment.

b. Understanding the Experiences of Older People Using Emergency Care

This project runs for one year and is funded by the Burdett Trust, based at City University, it aims to use data from 104 older emergency care patients and their carers (who were interviewed as part of a Modernisation Agency's Emergency Care Leadership Programme), to develop and disseminate a national picture of older people's experiences of emergency care and develop educational materials and further research in this area. The Senior Nurse Practice Development is a member of the steering group for the project and BSUH will be an implementation site for the findings.

Dignity in Care

The terms of reference of a Trust wide multi-professional Dignity Panel for BSUH are currently being drawn up, with a view to meeting in autumn 2007.

Working in Partnership

Close working relationships have been established with voluntary and statutory groups. These include the Alzheimer's Society, 60+ Action Group, the Older People's Nurse Specialists and Community Matrons. Some of these partnerships help to change service delivery for older people, notably;

a. The Carers Centre

The introduction of the Carer's Passport enables carers to state the likes and dislikes of a patient who are unable to communicate and in addition, ask questions of the medical staff, if they are unable to meet with them. This is being rolled out across the Trust and is currently being used in the medical, care of the elderly and renal wards. The Senior Nurse Practice Development is working with the local authority and Carers Centre to adapt the Carer's Checklist, for the acute hospital.

b. Clinical Reference Group for Older People

The Department of Elderly Medicine, in partnership with the 3 local PCTs, have established the clinical reference group to improve older people's access to services.

c. Patient and Public Involvement Forum (PPIF)

The PPIF regularly visit the care of the elderly care and give useful feedback. The Senior Nurse Practice Development gave a talk to the group about the role and training of the older people's champions.

Policy

Three policies have been written in the last 6 months that particularly impact on older people:

- Management and Prevention of Inpatient Falls Policy and risk assessment tool was approved in March 2007.
- Safeguarding Adults Policy was approved in May 2007. A Trust Safeguarding Adults Steering Group is chaired by the Chief Nurse; these arrangements are outlined in Safeguarding Adults: Annual Report - Trust Board July 2007.
- Bedrails Policy, using bedrails safely and effectively, was developed in July 2007.

4. Evidence of Progress

There are a number of measures that can be used to determine our progress in improving the care of older people in BSUH. The results of these are presented below.

Evaluation of Older People's Champions

The Senior Nurse Practice Development has undertaken an evaluation of the role of the Older People's Champions. The purpose of this role is to challenge ageism and act as a resource to improve care of older people, in all areas of the Trust. There are currently 92 Older People's Champions across BSUH; 46 qualified nurses, 42 Healthcare Assistants and 4 Allied Health Professionals.

The chart below outlines the training provided to the Older People's Champion and how many people attended this training.

Date	Sept 06	Dec 06	March 07	June 07
Subject	Nutrition. Good Practice in Discharging Older People	Adult Protection. Visual Impairment Awareness	Carers Awareness and Carers Passport. Dignity Challenge	Bereavement and Loss
Staff Nurses	15	16	16	13
Healthcare Assistants	15	14	13	17
Others		1	2	1
Total	30	29	31	31

For the evaluation of the Older People's Champions initiative, 6 staff nurses, 6 healthcare assistants, 4 ward managers and 2 matrons were interviewed.

The evaluation showed that the Older People's Champion is a highly valued role by all, particularly in relation to raising awareness amongst staff teams, challenging other members of the multi-disciplinary team and acting as an advocate for older people and their carers. There were various specific changes that had a significant impact at ward or department level. These include:

- Promoting patients going to theatres with false teeth, glasses and hearing aids, to improve communication (this represents a significant change in practice, as traditionally these were all removed prior to leaving the ward).
- Making the multi-disciplinary team aware that "age doesn't matter" and that most older people still wish to be involved in their health and social care decisions.
- Increased emphasis on nutrition and protected mealtimes.
- A healthcare Assistant gained funding to replace chairs on the ward, so that they were more suitable for older people with mobility problems.
- One healthcare assistant has started a 'safe slippers' and clothing initiative, encouraging relatives to provide suitable clothing and footwear to enable improved rehabilitation.
- One elderly care ward buys ice lollies for patients during the very hot weather, enabling the patients to maintain their hydration.
- Ensuring awareness of the role is part of staff induction.

In some areas it is a highly visible and effective role, with patients and carers commenting on the photographs displayed on the ward. Other wards and departments require further work for the role to become fully embedded.

Evidence from Healthcare Commission - National Inpatient Survey 2006

Results from this survey show that 93% of people over the age for 60 rate their overall care as good or excellent. The survey found some very encouraging results for older people:

- An 8% reduction, since 2005, in the number of patients over 60 being placed in mixed sex accommodation.
- 95% of respondents rated nurses' courtesy as good or excellent.
- There is a 7% increase in the accessibility of doctors to talk to families and carers

- A 3% increase in the number of people getting enough help to eat their meals.
- 7% more people receiving pain medication immediately they required it.

There are also areas of concern in the care of older people, which need to be addressed:

- A 6% increase in nurses talking in front of the patient as if they were not present.
- An 8% decrease in patients receiving written information about what to expect at recovery.

Evidence from National Sentinel Stroke Audit (2006)

The 2006 National Sentinel audit, which benchmarks each stroke unit, showed that the RSCH unit was the top performer in the Strategic Health Authority and 5th in the country.

End of Life Care

The Liverpool Care Pathway is now established on a number of wards and in September a facilitator will be appointed on a one year contract to further disseminate the pathway throughout the Trust. Care at the point of death (CAPOD) guidelines have been introduced to provide a structure on which nursing staff can base the difficult conversations that they need to have with relatives / carers after their loved one has died. These guidelines aim to ensure that this is carried out consistently across the Trust. CAPOD is currently in operation in 16 areas, and has recently been audited. Results are encouraging, but indicate the need for more consistent implementation. Complaints trends show a reduction in complaints relating to the time of death, suggesting that these measures are having an impact on the quality of care.

Evidence of Improvement in Nutrition

Protected Meal Times are established in all areas with the exception of ITU and A&E. A recent audit demonstrated that staff are focusing on the mealtime to ensure that patients get the help they need. The focus now needs to be on dissuading relatives from visiting over mealtimes and reducing the time patients wait for help. Malnutrition Universal Screening Tool (MUST) is now a routine component of nursing assessment. It was audited in June 2007, and results indicate the need to ensure that screening is consistent and that nutritional care is documented. Wards are working on their action plans.

5. Summary

This paper outlines a wide variety of activities to improve the experience of older people in BSUH. Findings suggest that the care of older people is successfully embedded in the Strategy for Nursing and Midwifery and as part of the Trust's equality and diversity agenda. Evidence of progress indicates that Older People's Champions are having an impact in practice and this scheme needs to be extended and re-inforced in some areas. Feedback from the annual Inpatient Survey (HCC 2007) indicates that whilst older people do not like mixed sex accommodation, the Trust is managing this, with an 8% reduction in the number of respondents over 60 experiencing mixed sex accommodation. It also shows an increase in the numbers of patients over 60 getting help to eat when they need it and getting pain relief immediately it is required. However nurses including patients in decisions and care at the point of discharge seem to be areas that require attention. Stroke care is to an excellent standard and this will be enhanced by the TIA service commencing later this year. The introduction of CAPOD seems to have shown benefits at the time of death and this should be further improved with the roll-out of the Liverpool Care Pathway.

6. Recommendations

- Older People's experience group to examine the discharge process for older people and recommend developments
- Continue with training and incorporate dignity training into all older people's training

- Strengthen the role of the Older People's Champions in nursing and further extend to other professional and occupational groups
- Ensure implementation the findings of research being undertaken in BSUH.
- Development of the work of the clinical reference group to improve specialist services to older people.
- To repeat the Working with Older People course aiming particularly at non specialist areas that see a high number of older people (e.g. A&E and orthopaedics).

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August 2007