

COMPLEX CARE GP SERVICE

Record Keeping Log and Quarterly Report

One form for each residential or nursing home supported by the service

CCGP Service Log completed by	Dr John Smith
CCGP Service Log completed date	24/1/14

Name and address of home supported	What a care home
Care or nursing home	Somerset
Number of residents	Nursing and residential

Start date of CCGP service to home	April 2013
Anticipated end date of CCGP service to home	April 2014

Log of visit dates and times (in last 3 months)	<p>24/4/13 – 9am to 12pm (comp reviews) 1/5/13 – 9am to 1pm (comp reviews) 9/5/13 – 9am to 1pm (comp reviews) 13/5/13 – 9am to 1pm (end of life support) 22/5/13 – 9am to 11pm (Meeting with community matron re patients on caseload at home) 5/6/13 – 9am to 3pm (end of life support) 13/6/13 – 9am to 1.30pm (comp reviews) 19/6/13 – 9am to 1pm (comp reviews) 26/6/13 – 9am to 1pm (comp reviews) 17/7/13 – 9am to 5pm (Medication reviews with meds management team) 24/7/13 – 9am to 5pm, Train session on catheter care by nurse specialist</p>
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Log of 999 and OOH calls and reasons (in last 3 months)	<p>9/6/13 – 999 call for patient that had collapsed due to sepsis from UTI 13/8/13 – call to inform OOH of expected death 21/7/13 – home dialled 111 about pt with chest pain – spoke to OOH GP who called 999 ambulance 2/8/13 – pt unresponsive home asked GP for home visit – GP called 999 to admit 4/4/13 – pt with chest pains and SOB, paramedics were already onsite dealing with above callout, they reviewed patient and called further 999 ambulance to admit this pt as well</p>
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Key themes from patient and staff feedback	<p>No dental care available to residents in house- since identifying this home have located a dentist who is available to visit the home and have registered all patients with them, they are also going to train the staff in oral hygiene which is a requirement for CQC</p> <p>Poor quality of medication review – having identified this as a priority I have worked with CCG pharmaceutical advisor and the home are much happier that patients are appropriately medicated</p> <p>Repeat prescribing can be chaotic – particularly for topical therapies – seems to be that they are reordered either by home or possibly pharmacy plus and then patient ends up with stockpile – I have spoken to GP surgery and ask them to try and identify how this is happening, staff are often not clear what creams are for – we have tried to address this in medication reviews. This may be due to issue with increased number of bank staff at home due to 2 members of staff being on long term sick.</p> <p>Lack of continuity of care from GP succession of locum GPs at GP surgery (where most of the residents are registered) Identified requirement for catheter care train, full day session undertaken by Practice Nurse.</p>
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Key themes from patient and staff satisfaction survey	satisfaction method to be agreed with CCG service lead
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Date of peer review of records and key themes identified	To be agreed
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Number of comprehensive reviews completed	24
Number of follow up reviews completed	1

Emergency admissions in last 3 months	6
Number of patients supported to die at home in last 3 months	9 since beginning of April 2013

Date of annual meeting with commissioners	30 th June 2014
Identification of unmet need or suggestions on local services improvements	Federations Matron service not fully staffed and engaged with patient on case load in homes
Agreed actions	CCGP and CCG service lead to meet with Matron team.