

AGENDA ITEM NO:7.....

Date of Meeting:12th November 2021.....

TITLE OF REPORT:	Patient Focus	
AUTHOR:	CCG Communications/Engagement Team	
PRESENTED BY:	Jane Bradford, Clinical Director Governance & Safety	
PURPOSE OF PAPER: (Linking to Strategic Objectives)	This month's patient focus highlights the work around the Greater Manchester Care Record and details some examples of how the care record has helped a variety of people working in the health and care system in Bolton.	
LINKS TO CORPORATE OBJECTIVES (tick relevant boxes):	Deliver the outcomes in the Bolton Joint Health and Care Plan.	<input type="checkbox"/>
	Joint collaborative working with Bolton FT and the Council.	<input type="checkbox"/>
	Supporting people in their home and community.	<input type="checkbox"/>
	Shared health care records across Bolton.	<input type="checkbox"/>
	Regulatory Requirement	<input type="checkbox"/>
	Standing Item	<input checked="" type="checkbox"/>
RECOMMENDATION TO THE BOARD: (Please be clear if decision required, or for noting)	For noting.	
COMMITTEES/GROUPS PREVIOUSLY CONSULTED:	N/A	
REVIEW OF CONFLICTS OF INTEREST:	Review of conflicts of interest not required for this report.	
VIEW OF THE PATIENTS, CARERS OR THE PUBLIC, AND THE EXTENT OF THEIR INVOLVEMENT:	These stories originate from issues raised with the CCG or providers through complaints and incidents.	
OUTCOME OF EQUALITY IMPACT ASSESSMENT (EIA) AND ANY ASSOCIATED RISKS:	This standard report has been considered against the criteria of EIA and an assessment is not considered necessary for this report.	

Patient story – November 2021

Greater Manchester Care Record

Health and care organisations in Bolton have been using the Bolton Care Record (BCR) since 2016. It enables health and care professionals to see up-to-date records to ensure patients receive the right care and treatment and it means people don't have to keep repeating their medical history to each person they see.

The record is now part of the Greater Manchester Care Record (GMCR), which means professionals working across the GM region can view the records of a Bolton patient they are treating.

Similarly, Bolton organisations with access to the GM Care Record can view the details of patients they treat from outside of the borough.

Next follows some examples of how the care record has helped a variety of people working in the health and care system in Bolton.

Dr Dharmesh Mistry, is Clinical Director of the Chorley Road Primary Care Network and a GP at Heaton Medical Centre:

Example 1

“Following a recent Multi Disciplinary Team (MDT) meeting, the nurse practitioner attended a care home to see a patient who had recently been discharged from hospital. When they reviewed the medication there was confusion as to the patients medication dosage between what the hospital had prescribed on the discharge letter and what the GP had prescribed.

“The patient was from another practice, so the nurse practitioner was able to view the MDT tile and Medications in the Greater Manchester Care Record and work out what had been changed and was then able to ensure the patient had the correct dosage. The problem was cleared up safely and several calls to the GP were avoided.”

Example 2

An elderly, slightly confused patient rang surgery, with a history of prostate cancer. On returning the patient's call, the GP was unsuccessful in making contact. There was concern the patient could have an infection, and if it got worse, could collapse.

Previously, this would have resulted in a welfare check by police as no other contact details on our system. The care record has a social feed which had son's number on it and contact was made. This saved a lot of time and resource.

Example from Swan Lane Medical centre

Clinicians, admin staff and receptionist staff use the care record probably on a daily basis. It is a quick, efficient and timesaving pathway for staff and patients. We can quickly ascertain if a patient has an appointment at the hospital, if a patient has been admitted and which ward/consultant. It is also useful to check if patients are having input from social services, integrated neighbourhood team and mental health. Details of allocated social workers and Community Psychiatric Nurses (CPN) are also available.

We are able to liaise with the right healthcare professionals also involved with their care. When patients have been unable to contact the hospital or community clinic we have been able to assist them in confirming when they have an up-coming appointment.

This reduces the time our admin and reception staff spend telephoning hospitals and community services.

Bolton Council

Example 1

“One person I support had been waiting for an outpatient’s appointment, but had not had a letter. On checking the care record, the appointment was detailed with date and time. I was able to contact the department to confirm, and then let my gentleman know the details. He hadn’t received a letter so would have missed the appointment otherwise.

Example 2

“I visited a lady to provide equipment and grab rails. I phoned at a later date to complete a risk assessment on the equipment and to check all was ok, however, the phone was switched off. I tried a few times before I went on annual leave and also left a message with the referring professional, with no response. Three weeks later, on return from annual leave I tried again, but still the phone was switched off. I checked to see if there were any details recorded. There was a hospital admission recorded and she had sadly never returned home and passed away the day after being admitted to hospital. This information was not recorded anywhere else, as she had only been admitted to A & E. I had intended to ‘cold call’, which would have been very upsetting for family. I was able to close the case and cancel any further adaptation work being completed, again reducing distress for the bereaved family.

Bolton Council - Ease of access examples

“Some things can be checked quickly and when needed, such as medical involvements etc. without phoning around departments.”

“Can gain this information just using one system as I have direct access to the care record through Liquid Logic so have found this very easy and accessible.”

“Not ringing around to find GP details and quicker. Access to who is involved in the community mental health team and outpatient appointment details. Details of hospital admissions, dates and discharges, not having to ring around wasting time.”

“Can find out who the GP is, have used to find alternative contact number for the client, can get some info that can allude to certain health conditions, i.e. appointments with certain department at Royal Bolton Hospital.”

“It can show referrals to other services that are recent. For equipment provision, it can provide information on person’s last recorded weight, which can inform on which equipment may be suitable prior to the visit. Last blood pressure reading can also be useful for postural drop issues.”

Junior doctor - Ambulatory Care

“I work in Ambulatory Care Unit/Acute Medical Unit and I do find the care record quite useful when we assess patients coming through the front end – GP referrals and Emergency Department referrals.

“What I’ve found useful from the care record is the ease of getting information needed to assess patients on admission – medications list, investigations such as blood tests or radiology reports from other hospitals (e.g. Wigan and Salford) which can be very useful if they are out of area!

“Occasionally, simple things like weight and blood pressure documented on the primary care record can also be useful to compare to when they have been referred in with weight loss, high blood pressure etc...”

Junior doctor A&E

“Using this system has very much improved my working day in that I am more efficient in seeing patients in A&E when I have quick access so some important, accurate medical information which can inform my clinical management decisions.

“It has improved patient care because I am able to account all of their health information into clinical decision making which they may otherwise not remember or think is relevant to mention in the history. People who come in with dementia/memory impairment or unconscious will still be able to receive more targeted care if we have direct access to their medical background.

“If I didn't have this system we would have to take time to request paper notes, or go without some primary care information. Having a summarised medical history in one place helps, as otherwise we may have to trawl through multiple clinical systems to find out some information that can be easily found here.

“I have found this system particularly useful for checking current and previously prescribed medications and this frees up my time that I would have spent asking/finding out this information for me to see the patient more quickly and prevent bigger waiting times.”

ENDS