

**Buckinghamshire Healthcare NHS Trust/Buckinghamshire CCG/Oxford AHSN RESTORE2
Implementation in Care Homes**

A Pilot Study

Date: Jan – Aug 2020

Programme/Theme: Patient Safety Collaborative – Managing Deterioration

Title: Improving timely observation of vital signs of deterioration and escalation of care home residents during Covid-19 – implementation of RESTORE2

Supportive quotes

“At the beginning of the pandemic the nurses at Chalfont lodge were able to quickly identify deteriorating patients using NEWS scores and in the terrible weeks of Covid I remember frantic calls where we exchanged information using the NEWS scores and identifying likely Covid +ve patients. Using NEWS2 at that time made a huge difference to the speed that we identified deteriorating patients and quickly put in place a care plan for each individual.” Jacqui Kent, Community Pharmacist, Hall Practice.

Overview summary

NEWS and NEWS2 has been established over a period years and was Developed by the Royal College of Physicians for the early recognition of deterioration in patients within the secondary sector of the NHS.

There has been an increasing need to have a standardised tool to recognise deterioration in care home residents and a proactive approach in escalating that deterioration.

RESTORE2 is a physical deterioration and escalation tool, designed and developed by West Hampshire CCG, which encapsulates NEWS2 and ‘soft signs’ for use in care homes. It is designed to support homes and health professionals to:

- Recognise when a resident is deteriorating or at risk of physical deterioration by using physical and ‘soft signs’ of deterioration.
- Act appropriately according to the residents advanced care plan to enable the correct and most appropriate care for that resident.
- To ensure that help is summoned in a timely fashion to ensure the correct support is appropriated for that resident
- Provide a concise escalation history to health professionals to support in their professional decision making.

This project identified 3 care homes who were high users of emergency care for their residents. Training was provided to these nursing homes in the use of the tool and supported during the implementation of the tool in the nursing home. The care homes were encouraged to develop and use advanced care planning to work alongside the RESTORE2 documentation.

The outcomes were monitored by gathering data from the homes for baseline observations, the use of the escalation tool, resident care pathway, advanced care planning and the outcome for the resident.

Other data was sourced from SCAS and A & E admissions to the local hospital.

Challenge identified

NEWS and NEWS2 has been established within secondary healthcare system for over 8 years with great results in deterioration and escalation of that patient's needs being addressed sooner.

There has been a need identified for a 'track and trigger' system within the care home sector to ensure the resident receives the right treatment at the right time in the right place.

Research has shown that quite a high proportion of care home residents are admitted to hospital when they could have been treated within the care home itself with more support. The RESTORE2 document which encompasses NEWS2 has been used successfully in West Hampshire and it was decided to pilot the document in Buckinghamshire.

Using RESTORE2 encourages the care homes to use advanced care planning alongside it, therefore, ensuring that the resident and next of kin have agreed a care pathway throughout their time in the care home. Likewise, RESTORE2 aids staff and other agencies make informed decisions about that resident's care. Therefore, care homes have had to ensure that an advanced care pathway has also been implemented for all their residents.

Actions taken

A stakeholder group was convened including care home, CCG, acute provider and GP representatives. Three care homes were selected for the pilot study who were high users of emergency services.

Oxford AHSN funded a clinical project lead to support the implementation of RESTORE2 in the 3 pilot sites.

Support was sought from West Hampshire CCG who shared their learning package which was adapted for local use by the acute trust Clinical Lead Nurse for Sepsis and the clinical project lead. It was delivered to over 50 members of staff from the 3 care homes at a launch event in January 2020. Further teaching was delivered within the care homes at appropriate times according to the numbers of staff available. In total, over 80 members of staff were taught and supported to implement RESTORE2 in their care homes.

Prior to the teaching some staff was surveyed about their confidence in summoning help and then they were surveyed again at the end of the training. Around 8 out of 10 staff surveyed found that RESTORE2 would enhance their confidence using this tool in practice.

Commencement of the RESTORE2 documentation was encouraged to be used as soon as the training was delivered and therefore many residents, if not all, had a baseline set of vital signs recorded monthly which also gave them a baseline NEWS2 score.

Care homes were encouraged to implement advanced care pathways for their residents to work alongside the RESTORE2 documentation.

The care homes were visited regularly to provide support and discuss any issues arising from the documentation.

Impacts/outcomes

RESTORE2 was found to be a good escalation tool to work with. Some staff has found that it has helped to endorse their intuition that their resident is not well.

One care home has fully embraced the RESTORE2 escalation tool. They have found that it has enhanced alerting staff to the deterioration of the resident and enabled staff to get the correct care in a timely fashion:

‘A member of staff was calling for an ambulance and they were having difficulty in trying to stress that this was an urgent call until another nurse came with the NEWS2 score of 8 from the patient in question. The ambulance arrived within the 18 minutes required and the resident was taken to hospital. The staff felt that without the NEWS2 score, the resident may have had to wait sometime for an ambulance and their condition would have deteriorated. The resident was returned back to the nursing home after a shorter stay in hospital’. Clinical Lead, Chalfont Lodge

Carers have also found the ‘soft signs’ of RESTORE2 very useful particularly when English is not their first language:

One carer says ‘It is much easier to explain your concerns to the nurses’

Another carer said ‘not only is it useful for the staff to use but the residents also found it helpful to explain what the problem is’ Chalfont Lodge.

The second home has found it challenging to implement RESTORE2 and were unable to realise the benefits. The pandemic has meant limited access, even virtually, with care homes from the project lead, therefore we have been unable to understand what the barriers were for this care home at present.

The third home has found the tool to be useful and has requested the training materials to begin spread across all 14 of the homes in their chain, ahead of the planned roll out across Buckinghamshire (see future plans).

It is difficult to demonstrate quantitative impact of RESTORE2 in this pilot study due to the concurrent Covid-19 pandemic and the issue of small numbers. However, the initial data indicates a possible trend of earlier identification and escalation resulting in reduced hospital admissions and length of stay for the engaged sites. Further work is needed to evaluate the impact of RESTORE2.

AHSN priorities addressed

AHSNs

- Promoting health equality and best practice
- Speeding up adoption of innovation into practice to improve clinical outcomes
- Building a culture of partnership and collaboration
- Positive experience of treatment and care
- Treating people in a safe environment and protecting them from avoidable harm.

NHS England

- Care and quality
- Funding and efficiency

Future plans

- Buckinghamshire CCG are now in the process of rolling RESTORE2 out to all 129 care homes with a GP registered in the county, linking this in with the telemedicine service Immedicare (Airedale) and pulse oximeters, both of which have been provided to all care homes.
- Buddy up care homes that have successfully implemented the tool with those that require additional support to realise the benefits.
- A short video following a resident's journey and the use of RESTORE2 is planned with Chalfont Lodge
- Oxford AHSN is connecting academics with Buckinghamshire CCG and Airedale to triangulate data and evaluate the use of RESTORE2

Tips for adoption

- RESTORE2 is a tool to support communication, empower care home staff and above all ensure right care at the right time in the right place. It should be treated as a partnership project with care homes
- Engagement at all points of the resident's journey is key – this is a system wide project
- The initial training needs to be followed up with ongoing support in the care homes, building relationships and trust and focusing on small wins e.g. certificates to praise staff when they have used the tool effectively
- Early engagement with the GP's is essential to communicate the RESTORE2 programme and documentation in order to enhance the residents care pathway.

Contact

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