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**Care Home Telemedicine Service: Frequently Asked Questions**

**This is a live document and will be updated on a regular basis with frequently asked questions about the Hampshire Hospitals Foundation Trust Telemedicine Service.**

# **Telemedicine**

1. **What are the benefits to the system in using a telemedicine service?**

**For residents, the service will:**

1. Enable them to stay at home and will reduce their likelihood of being agitated, disorientated and delirious
2. Reduce the risk of hospital acquired infections, falls and deconditioning
3. Enable them to die in their place of choice
4. Improve their experience and enhance their quality of life

**For the Care Home, the service will:**

1. Expediate access to secondary care professionals with experience of assessing and managing acute exacerbation for individuals living with frailty
2. Provide a real time, two-way discussion about deteriorating patients
3. Support the development of an agreed risk sharing plan about how to manage residents
4. Provide increased staff confidence and competence

**For the NHS, the service will:**

1. Support the appropriate utilisation of the workforce and resources
2. Improve bed flow, reduce the number of delayed transfers of care and reduce the length of stay of admitted patients, resulting in improved system resilience
3. Reduce demand on Out of Hours (OOH) services

# **Telemedicine Service Pathway**

1. **What number do I need to call to access the Telemedicine Service?**

You can contact the service on  **0300 772 7765**

1. **When can I call into the service?**

You can call the service 0800 – 2000 hours, seven days a week

1. **Why isn’t the service 24/7?**

The service is new, and we are actively recruiting team members, once we have a full team, it will be open 24/7

1. **What types of things can I call in with?**

Call the Telemedicine Service if your resident has a health event which is unexpected and/or sudden. For example:

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| --- | --- |
| * Higher than usual RESTORE2TM score | * Breathlessness |
| * General deterioration: The person is off food/drink, unable /unwilling to mobilise, not passing urine or opening bowels * Any type of fall or trauma (incl. head and neck) or broken bone: including those on blood thinners * Suspected infection (e.g. urine infection, chest infection) * Symptom control | * New confusion / delirium * Sudden and unstable diabetes management * Swallowing deterioration * Chest pain * Suspected stroke * Abdominal pain * General pain management |

1. **What should I not use the telemedicine service for?**

The service is not appropriate for routine and predictable care, such as those you would normally access via the GP or Community Pharmacy. For example:

* Repeat prescription
* Chasing a test result
* Stable RESTORE2TM

1. **How do I know when to call 999 and when to call the Care Home Telemedicine Service?**

If a resident **does not** have an Advanced Care Plan e.g. a ReSPECT form, with **no** agreed ceiling to their treatment escalation, and the resident experiences a life-threatening event e.g. **weakness down one side, crushing chest pain**

## **ACTION - Ring 999**

1. **When should I call the telemedicine service?**

If a resident **is experiencing symptoms not thought to be life threatening or alternatively does** have an Advanced care Plan e.g. ReSPECT Form, with **an agreed** ceiling to their treatment escalation, and the resident experiences a life-threatening event e.g. weakness down one side, crushing chest pain

## **ACTION – Ring the Telemedicine Service**

The service will not stop access to 999 service, but it may be able to offer more appropriate care in the care home environment

1. **How is this service different to other services?**

The Care Home can access from a GP or the Out of Hours Service

You should call your GP surgery for ‘Routine and Predictable’ health needs, the Telemedicine Service is for ‘Sudden and Unexpected’ health needs i.e. sudden and unexpected deterioration. Out of Hours can only be accessed after the surgery is closed. The Telemedicine service once fully operational will operate 24/7.

1. **When should I call the 111 service?**

You can call 111 when you need advice for non-life-threatening situations, they do not offer a telemedicine service.

1. **What care homes are covered?**

The Hampshire Hospital NHS Foundation Trust will ultimately offer the Telemedicine Service to all care homes across Hampshire and the Isle of Wight (HIOW). HIOW is a large geography, as such HHFT have taken a step wise approach. From April 2020 all care homes across the following areas can access this service

* Romsey and North Baddesley area
* Winchester City and Rural Surrounding areas
* Andover
* Basingstoke and surrounding areas
* Alton areas

If unsure as to whether your care home is included within the initial rollout area, please call the service.

1. **What things does my care home have to have ready before they call the Telemedicine Service?**

Before you call, if possible, please assess the resident using RESTORE2TM/mini, check their Advance Care Plan (ideally this should be ReSPECT) and have relevant information available to complete the SBARD tool

1. **What about transport to and from the hospitals?**

If after a conversation with the Telemedicine Service, they feel that the residents need to attend the hospital for a face to face assessment or further investigation.  The Telemedicine service will arrange transport to and from.

1. **Can the Telemedicine Service support homes when residents are nearing the end of their life?**

**Yes.** The telemedicine team can support you to care for end of life residents in the home setting.

* They can write electronic prescriptions that can be sent to the home or a pharmacy of the homes choosing to support comfort and symptom control
* They can organise for the Community Nursing Team to visit to put up syringe drivers
* They can organise for a specialist Palliative Care Consultant Assessment
* They can help interpret, create and amend Advanced Care Plans in the best interests of residents
* Ultimately, the service will be there to offer the team advice and support during this time

1. **If I want more information on the service who can I contact?**
   * Service Lead: [Sam.Jackson@hhft.nhs.uk](mailto:Sam.Jackson@hhft.nhs.uk)
   * Clinical Matron: [Laura.Osman@hhft.nhs.uk](mailto:Laura.Osman@hhft.nhs.uk)
   * Senior Responsible Clinician: [john.duffy@hhf.nhs.uk](mailto:john.duffy@hhf.nhs.uk)

# Clinical tools and Observations

1. **Where can I obtain more RESTORE2TM booklets?**

Please download resources from:  <https://westhampshireccg.nhs.uk/restore2/>

1. **What are soft signs?**

You do not need to be a registered health care professional to notice a soft sign. Soft signs can be subtle changes that give you an early indication that a resident may not be well.

Soft signs fall into three categories: Physical, Mental and Behaviour.

Physical soft signs may include:

* + shortness of breath and/or
  + decreased urine production and/or unsteady on feet
  + A sudden change in oral intake or mobility

Mental soft signs may be

* increased anxiety and/or
* agitation and/or
* withdrawal

Behaviour soft signs may include

* sleep disturbance and/or,
* tiredness and/ or
* restlessness.

NHS Health Education England with other NHS collaborators have developed a YouTube video to explain more fully, which can be found here <https://www.youtube.com/watch?v=7gMo13z3BYI>

1. **Where can I download more ReSPECT forms?**

<https://westhampshireccg.nhs.uk/restore2/>

1. **What does SBARD stand for?**

SBARD stands for Situation, Background, Assessment, Recommendation and Decision

1. **Which SBARD tool should I be using?**

Home should use the SBARD tool in the RESTORE2™ /mini form with the added information requested on the SBARD prompt card

1. **What if I cannot take clinical observations e.g. blood pressure?**

You can still use the telemedicine service. Explain that you are unable to take the residents’ observations advise. Use the SBARD communication tool format to explain your concerns and give a much information as possible – including the soft signs that were identified and prompted the need to seek advice

1. **Is there a website I can refer to?**

There are several useful resources that can be found on the websites below:

* **West Hampshire CCG resources** – to access the workbook, training pack, competency documents and online videos, please visit:

 <https://westhampshireccg.nhs.uk/restore2/>

* **Health Education England resources** – 14 short (2-3 mins each) videos, to help you improve the skills you need to use RESTORE2TM. Videos 5-10 are particularly useful for staff who are new to taking clinical observations (please note, these videos do not prove competence – your Nurse Facilitator or Enhanced Health Care Practitioner can guide you through the competency assessment). Video 12 shows how to use the SBARD tool to communicate the relevant information to the Telemedicine Service. Titles of the videos are shown in the table below, and all videos are available on YouTube from: [www.youtube.com/playlist?list=PLrVQaAxyJE3cJ1fB9K2poc9pXn7b9WcQg](http://www.youtube.com/playlist?list=PLrVQaAxyJE3cJ1fB9K2poc9pXn7b9WcQg)

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| --- | --- |
| 1. Introduction to sepsis & serious illness | 1. Preventing the spread of infection |
| 1. Soft signs of deterioration | 1. NEWS What is it |
| 1. Measuring the respiratory rate | 1. Measuring oxygen saturation |
| 1. Measuring blood pressure | 1. Measuring the heart rate |
| 1. Measuring the level of alertness | 1. How to measure temperature (ear) |
| 1. Calculating and recording a NEWS score | 1. Structured communications & escalation |
| 1. Treatment escalation plans & resuscitation | 1. Recognising deterioration in people with learning disabilities |

# DIGITAL

1. **Why do I need a NHS.net generic email account?**

Care homes have been set up with a generic NHS net email account for the whole care home rather than individual accounts, so that anyone within the Home can access emails, this is particularly important as there will be staff handovers, staff leave and sickness and leave. As such, having access to a generic account makes the care home more resilient and better able to care for its residents. After contacting the telemedicine service a summary of the consultation with an agreed action plan will be emailed to both the care home and GP service directly so it is very important that we have access to an email address that meets appropriate data protection standards.

1. **I need some guidance on how to use Teams, can you help?**

Please visit the website below to download an easy to use guide:

 <https://westhampshireccg.nhs.uk/telemedicine-for-care-homes/>

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