



integrated working



# JIGSAW

PIECING TOGETHER CARE IN WEST SUFFOLK

December 2014

## MAKING EVERY CONTACT COUNT

By Rob Kirkpatrick, Area Manager,  
Social Work Services - West, Suffolk County Council

**In this edition of Jigsaw, you will find information which you can use to promote planning and improve healthy living with people who might need some suggestions on how to look after themselves a bit better.**

Most of you will know about Making Every Contact Count (MECC) as it is already in use across organisations to encourage conversations about behaviour change. This edition of Jigsaw will give you more facts to help you in your work.

### NHS 111

By Mandy Wegg, Head of 111, Care UK

**NHS 111 can help with all kinds of non-emergency healthcare over the winter months. It is open 24/7 and staffed by a team of advisers, supported by experienced nurses and paramedics. They will assess a patient's symptoms and provide healthcare advice or direct them to the local service that can help them best.**



**when it's less urgent than 999**

Where possible, the NHS 111 team will book your patient an appointment or transfer them directly to the service they need to speak to. They can also arrange for an ambulance to be sent to the patient immediately, if this is required.

Patients should also be encouraged to call NHS 111 before going to the emergency department, as A&E might not be the best place for them to get treatment.

Patients should still call 999 in life-threatening situations, and for less urgent matters they should still contact their GP surgery direct.

### STOCKING HOME MEDICINE CABINETS

By Linda Lord, Chief Pharmacist, West Suffolk CCG

**Having a first aid box or medicine cabinet at home that contains a range of products to treat minor ailments means that patients can react quickly when illness strikes - potentially avoiding a trip to the GP or even to A&E.**

Medicine cabinets can be stocked with all of the essentials using non-branded medicines for around £20. It means treatment for minor ailments can be started as soon as the symptoms arise, providing rapid relief.

Recommended products to keep at home are:

- Paracetamol tablets or capsules for adults and liquid for children (to treat pain or reduce fever)
- Indigestion remedy (to ease stomach pains and heartburn)
- Plasters and medical tape
- Sterile bandages
- Diarrhoea capsules, e.g. loperamide (to reduce the frequency of diarrhoea in adults)
- Rehydration salts (to replace lost fluids, especially for children suffering with diarrhoea)
- Pain relief gel
- Antihistamine tablets, e.g. loratadine (to treat allergies)
- Eye wash
- Thermometer

Advise people to have plasters for various grazes and cuts. Strip plasters are good for closing slightly larger wounds, without having to go to A&E to have it stitched up.

People should always read the label and information leaflets that are supplied with all medicines so that medicines are used safely and the right doses are administered.

Local community pharmacies can help with choosing the right medicines and products for home medicine cabinets.

A small leaflet detailing what medicines you ought to have in your cabinet is available online at [www.westsuffolkccg.nhs.uk](http://www.westsuffolkccg.nhs.uk)

More information can also be found at: [www.treatyourselfbetter.co.uk](http://www.treatyourselfbetter.co.uk)

# PREVENTING FALLS IN WINTER

By Caroline Ratcliff, West Suffolk CCG

**A third of people over 65 who live in their own home will fall at least once a year (some 2.5 million people in England) and half of the over 80s will experience a fall each year. Whilst many falls do not result in serious injury around 5% of those who fall will fracture or need hospitalisation.**

Falling can cause distress, pain or injury and often results in a person losing confidence to go outside and a reduction in their independence. The estimated cost of falls to the NHS is around £2.3 billion a year. In West Suffolk there were 3,374 ambulance call outs for falls in the over 65s from September 2013

to August 2014. During the same period 1,508 fallers were taken to hospital.

Across Suffolk the prevention of falls and falls-related injuries is a priority. NICE guidance states that: "Older people in contact with healthcare professionals should be asked routinely whether they have fallen in the past year and asked about the frequency, context and characteristics of the fall/s." (NICE clinical guideline 161)

With winter approaching the incidences of falls will increase.

Please share the top tips below with your patients and clients to help prevent falls:

## GO SLOW IN THE ICE AND SNOW!

- Wear appropriate clothing.
- Wear sturdy shoes or boots that support your ankles and have suitable treads.
- Do some light stretching before you venture out; it will make you physically more able to prevent a fall.
- Avoid walking on surfaces that may be icy if you can. If you can't, slow down, shorten your stride.
- Replace worn rubber tips on canes, walkers and crutches.
- Dry off shoes, canes, crutches and walkers as soon as you get indoors.
- If you are going out alone, carry a mobile phone; know who you will call if you fall, and make sure that person knows what to do if you call.
- Drink plenty of water to prevent dehydration, which can affect your balance.
- Ask your doctor or physiotherapist about indoor exercises that can help you maintain strength and balance when you can't venture out.
- Carry a cleaning cloth and stop immediately to clean your glasses if they fog up going from outdoors to indoors.
- When in doubt, don't risk it. Ask for help if you don't feel safe doing something.
- Try to stick to pathways that are well maintained and well lit. Don't take shortcuts.
- Give yourself plenty of time to get where you are going. Don't hurry and be observant of conditions.



# BUNDLES OF CARE FOR PATIENTS WITH AIRWAYS DISEASE (ASTHMA AND COPD)

Linda Pearce, Respiratory Nurse Consultant, West Suffolk Hospital and Suffolk Community Healthcare.

**Proactive healthcare interventions have been shown to improve morbidity and mortality in COPD.**

For people with an acute exacerbation of COPD, there are two new initiatives which are:

- Working with Suffolk Community Healthcare (SCH) to support earlier interventions to support admission avoidance and early supported discharge. Now GPs and other referrers can promptly telephone a referral (as an alternative to paper referral) to the Care Coordination Centre to request a same day admission avoidance home visit from the COPD specialist service. A clinician based in the Care Coordination Centre will complete the referral form and forward to the COPD team.
- Quality standards have been introduced for patients discharged from WSFT hospital following acute exacerbations of COPD and asthma. Prior to discharge, a 'discharge bundle' is completed to ensure patients have an understanding of their condition; how to reduce future risk; information on their condition, a self-management plan; ensure medication is discussed and inhaler technique assessed to support correct use and concordance; follow up arranged and in place and, where appropriate, onward referral, e.g. for pulmonary rehabilitation.

The discharge bundles have been tested on the respiratory ward with positive benefit and are in the process of being rolled out across other wards for asthma and COPD patients.

A 'ward' checklist has also been developed to ensure that each patient is at an appropriate stage of their care prior to referral to the COPD service for assisted discharge or home oxygen supply to smooth the transition of care for SCH.