

Improving compliance of the Community CNS Team, in completing NHS GG&C Anticipatory Care Plan on Clinical Portal

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A quality improvement project was undertaken to evaluate the compliance of a Community Palliative Care Nursing Team in completing the NHS GG&C Clinical Portal Anticipatory Care Plans (ACP) of patients referred to the team. Data was collected on two occasions to assess two test of changes implemented to improve compliance. The results of this audit would suggest that the Community CNS Teams compliance of completing the ACP on GG&C Clinical Portal has greatly improved as a result of the changes implemented - a verbal prompt and visual prompt on the electronic patient record CrossCare.

1. HealthCare Improvement Scotland iHub (2020) Anticipatory Care Planning in Scotland- Supporting people to plan ahead and discuss their wishes for future care
2. National Gold Standards Framework Centre (2020) Advance Care Planning



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Background

It is well documented in the literature that completing ACP documentation on shared platforms (e.g. NHS GG&C Clinical Portal) allows key information to be shared with the wider multi-disciplinary team (1). This form of information sharing highlights patients' wishes and empowers Health Care Professionals to sensitively discuss with patients and their families how to achieve them (2) potentially improving overall holistic care.

There is currently no national standard for discussing and documenting Anticipatory Care Plans (1 & 2). As a result, PPWH Community Nursing teams have developed their own Gold Standard: a) all patients referred to the team will be offered an opportunity to have their wishes discussed and regularly reviewed; b) discussions and decisions should be documented on the ACP template on patient's electronic records and; c) the information should be carried over onto the ACP on NHS GG&C Clinical Portal to facilitate information sharing between multi-disciplinary teams.



Methodology

- Data was collected on two occasions
- First data collection were patients referred to the Community CNS Team in December 2020
 - This allowed for the first test of change to be assessed: a verbal prompt by the Community Team Lead to highlight the need to complete ACPs on Clinical Portal
- Second data collection were patients referred to the Community CNS Team in March 2021
 - This allowed for the second test of change to be assessed: written prompts on the patient electronic record Cross care as a visual reminder to update/complete ACP NHS GG&C Clinical Portal
- Both data collections were provided by the Clinical Governance Team.
- The auditor then searched the NHS GG&C Clinical Portal and assessed:
 - 1) If ACP was completed,
 - 2) If KIS was in place, and
 - 3) If the two documents had any discrepancies.



Results and Conclusions

1st Data Collection:

- 27 patients identified in December 2020
- 5 were excluded - as assessed by the auditor, thus minimising risk of bias
- 7 (31.8%) of remaining 22 patients had NHS GG&C ACPs completed
- 5 patients (71.4%) had completed NHS GG&C ACPs and a KIS recorded, and information contained in both were identical.

2nd Data Collection:

- 51 patients identified in March 2021
- 7 were excluded - as assessed by the auditor, thus minimising risk of bias
- 22 (50%) of remaining 44 patients has NHS GG&C ACPs completed
- 20 patients (90.9%) with completed NHS GG&C ACPs, had a KIS recorded - 13 patients (65%) of those patients had identical information with 6 patients (30%) only having DNACPR status recorded and 1 patient (5%) only had information regarding Power of Attorney (POA).

The results of this audit would suggest that the Community CNS Teams compliance of completing the ACP on GG&C Clinical Portal, greatly improved with the addition of a verbal and visual prompt. The auditor acknowledges that the results of this audit do not fully reflect the range of work on ACPs carried out by the Community Team and documented within CrossCare. However, it highlights that there is room for further improvement if the team is to meet their own Gold Standard and facilitate the sharing of information with the wider multi-disciplinary team.

