

# Introduction of a 7 day Clinical Nurse Specialist service, a partnership approach

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Care and support through terminal illness

Marie

Curie

#### Background

As part of the Lothian redesign programme, a model of 7 day access to Clinical Nurse Specialist teams was introduced in both St Columba's Hospice and Marie Curie Hospice Edinburgh. Alongside the introduction of 7 day local co-ordination of the Marie Curie Nursing Service, a partnership approach was taken to 7 day care for patients.

The model of working includes enabling Clinical Nurse Specialists to be available 7 days per week. Supported by Hospice teams, the service provides support to both patients and clinicians, aiming to improve access to specialist palliative care advice and to work in partnership with existing weekend services available in Lothian to support patients at home.

The service was implemented in October 2015, followed by a service evaluation from month 6 for a period of 12 months.

#### Aims

- Increase access to specialist symptom control advice and support during the weekend period
- Provide emotional support to patients and families whose care needs were complex and changing, recognising their vulnerability in the out of hours period.
- Work in partnership with existing weekend services to support patients at home
- Provide an expert resource to support decision making around place of care, enabling patients to stay at home if this was their choice, and facilitating appropriate admissions to hospice or hospital according to need

#### Methodology

A mixed methods approach to evaluation was taken including activity data and qualitative feedback from patients, families, clinical partners and staff delivering the service

### **Service Highlights**

- 738 CNS interactions
- 95% of patients known to hospice services
- 166 occasions where patients were at risk of hospice / hospital admission
- 101 admissions avoided
- 196 patient and family survey responses
- 95% of staff reported experience of working with CNS team was good or very good

#### **Key Results**

- 738 contacts made with CNS team at weekends
  - 49% from patient or family member
  - 36% from District Nurses
  - 3% from GPs
  - Remainder from external parties
  - 23% of contacts related to medication advice / information
  - 30% of contacts provided advice regarding symptoms
  - 27% of contacts provided support to patients over the phone
  - Over the course of a year, 101 potential admissions to Hospital or Hospice were avoided. Based on these
    results and on previous research, an estimated saving of £84,840 could be achieved over the course of a
    year. This is based on the lower cost of providing care in the community, a potential saving of £840 per
    patient.

### **Patient and Family Feedback**

A survey was distributed to patients and carers shortly after their first interaction with the service, and again at 12 weeks after the patient had died. Between April 2016 and March 2017 803 surveys were distributed with a 24.4% response rate. A key theme of reassurance was evident throughout the responses.

"Dad got his wish to be cared for in his own home by his family which meant the world to him, he died in his own bed with his family all around him"

"It has been great support and reassurance to have the service. It has been a huge support that we could not have done without."

# What is the impact on health care within Lothian?

- Reassurance for other healthcare professionals
- Improved care for patients
- Ease of access to service

- Improved symptom management
- Reduction in avoidable hospital admissions
- Facilitation of appropriate admissions

## Conclusions

The 7 day Clinical Nurse Specialist service has provided a robust service to patients and families across the hospice catchment areas. The service has received overwhelmingly positive feedback from both professionals and service users. Strong themes of partnership working have emerged with enhanced relationships with out of hours teams. Patients and families have had improved outcomes in the form of a reduction in the number of avoidable admissions and the easy access to specialist palliative care irrespective of the day. Alongside this, the service has proven to be cost effective, with additional investment in hospice services showing potential savings elsewhere in the healthcare system for local health and social care partnerships.

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