

# Brent MDP Care Homes Outreach Service Pilot: Urgent Care Plan Evaluation Report

## Overview

The Brent MDP Care Homes Outreach Service Pilot was included as part of the Winter Access Fund scheme to reduce pressure on services in the borough. The aim of the pilot was to have an indirect impact on primary and secondary care by reducing acute hospital admissions and relieving pressures on GPs. The goal was to refresh at least 200 care plans with medication reviews. Currently, a total of 87 care plans had been refreshed.

Healthwatch Brent have been asked to evaluate the success of the scheme. We spoke to 38 care home residents and their carers/families to understand their experiences.

## Findings

All 38 of the patients we spoke to have an urgent care plan for end-of-life care in place. Of these plans, all had been reviewed with health professionals, including nurses and GPs, and the health professionals had explained the details of the urgent care plan to all patients, their loved ones or carer.

When the residents of the care home were asked if they were happy with how they were involved with their care plan, only a small number of residents were able to respond unaided. Three residents responded that they were directly involved and had the capacity to make decisions.

However, most residents did not have the capacity to be fully involved in their own care. 35 of the residents we spoke to told us that family members, such as their spouse or children, were involved in the urgent care plan on their behalf.

Some of the reasons that residents gave for this included:

- "I am not able to take advanced decisions. Nurses and doctors (GPs) make advance care plan for my best interests."
- "My daughter is involved; I suffer from dementia."
- "I suffer from a brain injury, and I am cognitively impaired."

A further three residents stated that family and loved ones were not actively involved in their urgent care plan; these individuals had the full capacity to make decisions and directly made decisions about their urgent care plan.

When asked if their wishes and needs were considered, all of the residents we spoke to were satisfied and felt their needs were considered.

## Summary

Our evaluation of the pilot found that it was very successful from the residents' point of view, giving them more control over their own end-of-life care. Overall, residents or their families/carers expressed that they felt that wishes and needs were considered. Urgent care plans were in place for each individual that we spoke to.

Although only a very small number of residents had the cognitive ability to review their own urgent care plans independently, processes were in place to ensure that families and carers could review the plans on behalf of their loved ones. The residents or their family all believed that their wishes and needs were considered.

The data from the survey indicates there was a high level of communication between staff and residents. Residents who still had cognitive abilities were very satisfied and felt they were looked after very well. Good communication was also in place with family, relatives and carers – so that those residents who had conditions such as dementia were able to have their wishes and needs actively considered.

This pilot scheme is going to be expanded into a Brent-wide initiative. A small multi-disciplinary team of GPs and Nurses will be the conduit for care homes' support. They will be responsible for facilitating the refresh of care plans and medication reviews with involvement from patients or their family/carers. Crucially, the team will also ensure that these plans are available for the wider systems colleagues to view especially during times of crisis, supporting the Urgent Emergency Care (UEC) teams.

UEC services are currently under an enormous amount of pressure and supporting primary care and community health services is one way to help manage the demand. The Brent MDP Care Homes Outreach Service can support this both by reducing admissions and by ensuring that UEC teams are able to access patients' information more rapidly.



Healthwatch Brent

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