Sepsis strategy for Lancashire Care Homes 2017-2020

Aim - To improve sepsis related experiences and outcomes for care home residents across Lancashire

SIGNS OF SEPSIS CAN INCLUDE:

Slurred speech

Extreme shivering or muscle pain

Passing no urine (in a day)

Severe breathlessness



'I feel like I may die'
Skin mottled or discoloured

WHY?

Together we want to prevent avoidable illness, harm and unnecessary deaths caused by sepsis

Post infection reviews for MRSA & C.*difficile* (from 2015) with care homes found:

- A lack of consistent and evidence based approaches for detecting sepsis
- Variation in the use of language and clinical evidence to communicate to key health care providers
- 'We think this is sepsis' was not stated
- Delays in the timely escalation for appropriate healthcare
- District nurses and care home staff also tell us sepsis is a problem that needs to be addressed

2 WHAT?

Our sepsis training and development sessions for Lancashire care homes are designed to improve staff knowledge, confidence and skills to shape better sepsis care for residents

Our training and development sessions include how to:

- Prevent infections in care homes
- Identify & report signs of infections early and request appropriate treatment from GPs
- Safety net residents using NEWS with understanding of normal baseline observations
- Identify deterioration and suspicion of sepsis early = NEWS + signs of infection + soft signs of sepsis
- Escalate residents for time critical and appropriate healthcare
 Improve care of residents post sepsis

WHERE?

When care home staff are trained, implementation of approaches in our residential and nursing care homes looks like this:

LEADERSHIP & MANAGEMENT

Managers Deputy managers Nurses Senior carers:

Inspire & lead changeDevelop teamsEmbed and sustain new approaches

PERSON CENTRED CARE

Residents:

- Receive monthly baseline observations + records
- Infections, where appropriate, are treated at source
- Are tracked for deterioration
 & suspicion of sepsis
- Staff are more aware of care needs post sepsis diagnosis

diagnosisRaise public and professional awareness of

4 WHEN?

We are currently improving the management of suspected and diagnosed sepsis with our partners: clinical commissioning groups; GPs; community nurses; acute trusts; NWAS & NHS England within Lancashire care homes and across community and hospital care pathways

sepsis

When our approaches are implemented by care home staff, our anticipated outcomes are the:

- Implementation of sustained and consistent evidence based and best practice approaches to the prevention and management of sepsis in care homes
- Improved communication between health and social care professionals with regards to the management of residents with sepsis
- Improved and timely responses across community healthcare providers to attend to the needs residents with suspected sepsis
- Rapid referral of residents to local acute trusts for appropriate and time critical treatment of sepsis
- Increased awareness of the care needs of residents post sepsis diagnosis
- Improved public awareness of sepsis in Lancashire care homes



Our residents have said:
We like having our
observations taken,
knowing they are within
normal range and if
they are not, we know
something will be done
about it. We feel reassured.

Our staff have said:

We are very excited at the skills and knowledge we have gained from the Sepsis Training Course for Lancashire care homes and we are looking forward to implementing the approaches in our home.

Julie Carman, sepsis survivor and UK Sepsis Trust volunteer:

The care home staff will know
their residents well and be able
to advocate for their residents
if needs be...It is my belief that
this work will improve timely
treatment, diagnosis and
outcomes for this age group and
empower the staff.



