

SCDIP Discovery Phase – Leeds City Council

The team have considered the development of software accessed through a handheld device which supports care home staff and health partners in handling urgent health issues in the event a resident needs to be transferred to hospital.

Improving information sharing between care homes and health care services

The context

Leeds has a growing population of older people, with the number of people over the age of 65 expected to increase from 130,000 (16.4% of population) in 2019 to more than 170,000 (20% of population) by 2039. As people live longer, they also live with increasingly complex health problems. To meet the demands of an aging population, Leeds has an expanding independent care sector providing over 5,200 care beds across 88 older people's care homes, with a further eight homes and over 300 beds directly provided by the local authority. Currently care providers across the city do not have a means of securely sharing electronic records with the other health and social care providers meaning that challenges arise when a resident goes to hospital.

The challenge

The Leeds City Council project team focussed on addressing the problem question: "*How might we improve the experience for individuals living in care homes, their family, and for staff, when an emergency transfer from a care home to hospital takes place?*".

What did the project involve?

During the discovery phase the project team conducted a wide range of research including:

- desktop research
- surveys
- 40 one to one interviews with stakeholders
- ethnography (focused observation) of stakeholders in care homes
- journey mapping with stakeholders
- ideation workshop with stakeholders
- development of wireframes (simple prototypes).

Stakeholder engagement and user research

Through the discovery phase the team engaged with a wide range of users. This included care home residents, their families, care home staff and health and care service staff. The project team used a combination of interviews, workshops and surveys to develop a series of user needs. The project team grouped these needs and concerns into the following stakeholder groups: people living in care homes, families of people living in care homes, care home staff and health and care service staff. They conducted an ideation workshop with stakeholders in which they created personas, looked at journey mapping for residents, identified potential solutions to the problem statement, and developed a prototype of how a solution may look and function. *Images of workshop prototype and wireframe below.*



Benefits of the proposed solution

For discovery phase the project has produced the following benefits:

- better understanding of the problem from different stakeholder perspectives and user needs
- a prioritised idea for a solution, a prototype that can be further tested with stakeholders
- identification of additional opportunities and potential barriers which informed the implementation plan.

In the implementation phase, the council plan to further refine the prototype and the following benefits are anticipated:

1. **Benefits for people living in care homes:** staff available more of the time to support individuals' needs; and improved understanding of individual needs as health and care services have access to their information.
2. **Benefits for families of people living in care homes:** reassurance that the individual requirements of their family member are considered in the event of an incident and better information on of the status of their family member when an incident occurs.
3. **Benefits for health and care service staff:** better provision of information through the sharing of real-time, relevant information digitally; and able to provide the right care to the right person at the right time, quickly and consistently.
4. **Benefits for care home staff:** better provision of information through the sharing of real-time, relevant information digitally; and more time to spend with residents.

Key strengths of the project

- **stakeholder engagement:** a wide range of stakeholders, including service users, care home staff, and paramedics were engaged to gather views and feedback
- **time sensitive progress:** a rapid and agile process was used to create a tangible concept
- **identifying priorities:** the key concerns of the stakeholder groups have been identified and the potential benefits that this project will bring have been mapped against these
- **collaborative working:** the project team worked with Leeds Clinical Commissioning Group's (CCG) red bag scheme which has led to improvements in this system.



The potential impact

The team achieved what they were hoping for from the discovery phase and have developed a logic model to guide the implementation phase and to help in quantifying the inputs, activities, outputs, outcomes and impacts which are likely to result from the delivery of this project. From this, a number of key outcomes and measures of impact have been identified as follows:

- increased staff awareness of residents and family's preference for care
- improved communication / relationships between care home staff and health care services
- improved staff confidence / experience in handling urgent health care issues in care home environments
- staff resource time saving.

The team have established the following outcomes as success measures for their solution going forward which include:

- improved staff confidence and ability to understand individuals' needs
- improved resident experience
- reduced admissions to hospital due to improved knowledge of care home staff on how to address situations and who best to contact
- reduced delays to dispatch due to improved communication around transfer of care
- increased use of NHS111 and the telemedicine service
- staff resource time saving.

Challenges to delivery and lessons learned

- timescales have been a challenge - if more time had been available, the project team may have been able to progress further with technical options for inclusion in their application for the next phase
- the team decided to bring on a research partner to assist with completion of user research within the timeframe, however the team found that the procurement side of the project was challenging and felt that due to this the appointment process for the partner organisation was very time-consuming
- engaging stakeholders during the summer holiday period was challenging and led to some a rationalisation of the number of workshops which could be held
- in the ideation workshop, several concepts emerged that could not be fully scoped due to time and budgetary restrictions, such as, possible classification as a medical device and the integration of wearable devices to the system.

Next steps, including sustainability and spread

If the project receives funding for the implementation phase then there is the potential to collect quantitative and qualitative evidence of the expected benefits/ impacts. This in turn would support the scale up to care homes across Leeds, estimating approximately 40% coverage as a feasible first step due to these care homes having already engaged with the digital requirements to gain access to the Leeds Care Record. There is then the scope to scale this up across the remaining care homes in Leeds and nationally.

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Link to relevant documents

Leeds City Council's Discovery Phase review report:

<https://www.local.gov.uk/sites/default/files/documents/Leeds%20Discovery%20Phase%20Review.pdf>