

In  
Focus  
December 2009

## Less is more when providing integrated, personalised and holistic care

**St Catherine's Hospice is using Crosscare to take hospice care into the next century, providing integrated, personalised and holistic care for patients wherever they choose.**

At **St Catherine's Hospice, Crawley**, the vision of staff and trustees has always been to help patients approach death 'informed, supported and free of pain'. Now, in line with national strategy and respect for patient choice, the hospice is expanding its community services so that more patients can choose to die at home.

St Catherine's team already cares for patients in a variety of environments, including a day hospice and two in-patient wards which can accommodate up to 18 patients. Over 70% of patients St Catherine's works with are cared for at home, but the hospice is expanding its community care provision to provide a 7-day palliative care service, allowing even more patients to stay at home, and providing more support for families and carers.

It's an ambitious project, and one which is possible thanks to the advanced clinical management system which St Catherine's has implemented. In 2006, prompted by a desire to improve reporting and auditability, St Catherine's replaced their paper-based

quiet space/ St Catherine's peaceful gardens patient records with Crosscare, a Windows-based clinical management system. Since then, St Catherine's has been able to increase its caseload by around 30%, with just a fifth more nursing staff.

The move to a paperless system has enabled St Catherine's to provide more flexible and integrated care. *"The community teams can now take a laptop out with them so they have up-to-date data and can take information for all patients - they wouldn't be able to take paper notes for that many people and if they did the notes would be unavailable for other colleagues,"* says **Jane O'Donnell, Nurse Specialist** for day hospice and outpatients, and one of the clinical leads for the implementation. A paperless system allows the different teams and clinicians to offer a more integrated service. *"I'm often in the situation where I have to take calls for my colleagues who aren't around, and with a paperless system it's easy for me to do so and give the patient confidence,"* says Jane.

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The implementation of Crosscare was led by a steering group of managers from a variety of disciplines with support from IT literate and enthusiastic 'super users' who could share time and expertise with less confident colleagues. The success of the implementation was due largely to the dedication and enthusiasm of this team. Jane and her fellow clinical lead Patricia Brayden, a specialist consultant in palliative care, spent many hours summarising and uploading over 270 sets of notes, as well as tailoring the system to exactly meet St Catherine's needs.

They were aided by Crosscare's adaptability. Although the system comes with a number of set modules – including hospice specific ones such as a module supporting lymphoedema clinics - they can be configured to fit the individual needs of each organisation.

The team at St Catherine's had already invested time and effort in optimising their paper notes, and wanted to ensure they would be able to replicate and improve on this system. "We're still responding to clinical suggestions," says Jane.

Record keeping, reporting and auditability have also been improved. Logging visits and activity onto the patient database was previously an onerous activity: "We had highly qualified nurses tapping in numbers with no gain for patient care," says Jane.

"With Crosscare it's integrated, so by filling in your notes its logging your figures. We get a much more accurate picture and it's not a task staff end up with at the end of the week." Extracting data and reports is also much

simpler – information for MDS submissions can now be gathered in hours by one person.

The breadth of reports also has benefits for day to day working, as Jane explains: "We run reports on OOH (out of hours) calls, which enables each team member to see at a glance if a patient from their case load has called in and they can follow up with a call promptly. We also run a report to identify how frequently we have discussed preferred place of death - this makes it is easy to identify people for whom a discussion needs to take place."

There are administrative as well as clinical advantages of a paperless system. Sally Hill, Co-coordinator of clinical administration systems, has worked hard to ensure St Catherine's is getting every possible benefit. She has developed an array of mail merge documents which extract data from the system, allowing staff to produce common letters and forms easily and accurately.

Starting with the notice of death form which must be sent to the Healthcare Commission, Sally has developed templates for things like discharge letters, letters to GPs updating on case review meetings and minutes of MDT meetings. As well as saving time, creating these files on the system means they are automatically and indelibly stored.

As St Catherine's continues to optimise its paperless system with the help of Crosscare's flexible system, staff will be freed to care for patients and allow them to live as fully as possible as they approach death in whichever setting they chose.

## For more information

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