

Making the most of your C.A.R.E H.O.M.E GP

- C Coordinate & Communicate:** Talk to your colleagues and prepare a ward list that can be faxed to the GP before the ward round. Include residents you are worried about, check care plans and DNRs are up to date.
- A Assess your residents:** The numbers are useful blood pressure, blood sugar, saturations, pulse, Urine dip - but what else have you seen or heard? Does the resident need a pain, memory or mood assessment? Include nutrition and hydration issues.
- R Record your observations:** Present the GP with clear, concise dated records. Be prepared to highlight where in the notes issues of concern and changes in behaviour are documented.
- E Engage your patients and families:** Speak to the residents & families, understand what is important to them and ensure you communicate their needs and wishes to the GP if they are less able to themselves.
- H Hospitals:** Has the resident been admitted, discharged or had an outpatient's appointment? Keep the GP informed.
- O Opportunity:** Take the GP visits as an opportunity to work together. Explain / highlight any other issues that are going on at your home, i.e. staffing levels, CQC visits, new training or activities etc. Share good news too.
- M Medication management:** Highlight any worries about administration of medication. Allow enough time for monthly prescription requests; consider submitting them in week 1. Acute medications: remember to include the frequency and quantity you need. Your GP will need to review residents' medication periodically whether or not there are any concerns about them.
- E Experts in the community:** Refer if you need to; there is a wide range of community services e.g. podiatry, tissue viability, diabetes, mental health dietetics, wheel chair assessment team...these don't all need to wait for the GP. Just record the referral and keep your GP Informed.
- G GP ward round/visit:** Identify the nurse/carer who is managing the ward round? Ensure you have your medications administration records (MAR) charts and relevant paperwork is ready. Always make sure a member of staff accompanies the GP for the whole ward round.
- P Prioritise, Plan, be Proactive:** Prioritise residents on basis of need, proactively think of any suggestions you can contribute, remember advanced care plans. Document the plans for the resident following the GP review and share recommendations with those who need to know e.g. the resident, relevant staff, and families /carers and put into action. Document the impact of any changes for the next GP ward round.