

# GP SERVICES IN CASWELL HOSPITAL

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BERNADETTE HARD

ALED DAVIES

SIMON ROGERS



# THE CHALLENGE

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- Caswell is an NHS medium secure unit with 61 beds, most of them long stay
- Patients are not engaged with primary care in the community
- Patients have a variety of challenging and complex health needs
- Delivery of healthcare to this group needs to take into account their mental state

# MY VISION

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- I imagined a desk. Perhaps a leather swivel chair ( for me!)
- I imagined a screen- with a comprehensive integrated IT system ( Vision/ System 1)
- I imagined a neat clinic list with times allotted and patients sitting in orderly fashion
  
- AND THEN I WOKE UP!!!

# YOU START WHERE YOU ARE NOW

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- We had patients who were often asleep
- We had no electronic notes
- We had no IT systems to manage prescribing or chronic disease registers
- This place is HOME to the 61 clients. They trust their environment. This trust is hard won and of paramount importance in the delivery of ANY effective care
- Many of the 61 patients have learned NOT to trust professionals
- You reach medium secure often as many previous placements have broken down

# HOW WE DELIVER CARE

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- We receive requests for GP attendance from any member of the team including the clients
- We go and visit the patients. We ask if they would like to see the GP and we are patient while they prepare, decide and pick a location
- We take time to listen.
- We have a presence on the ward.

# TYPICAL GP TYPE PROBLEMS

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- Acute infections- sore throat/ LRTI/ UTI
- Skin- Infections/ eczema/ fungal infections
- Wound concerns
- Substance misuse
- IV access for tricky clients

# PHYSICAL HEALTH EVALUATION

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- Database including :
- Qr2 /Cardiac conditions
- DM/ Thyroid conditions
- Respiratory conditions
- Gastro conditions
- BMI/ smoking status
- Dental register

# DM RISK REVIEW

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- This was evaluated for every patient using the NICE recommended DM UK tool



# DM REGISTER

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- All DM reviews done by the GPSI in DM
- To include retinal scan register
- To include HbA1C/ Gluc/ U and E/
- GP to carry out foot check and patient review

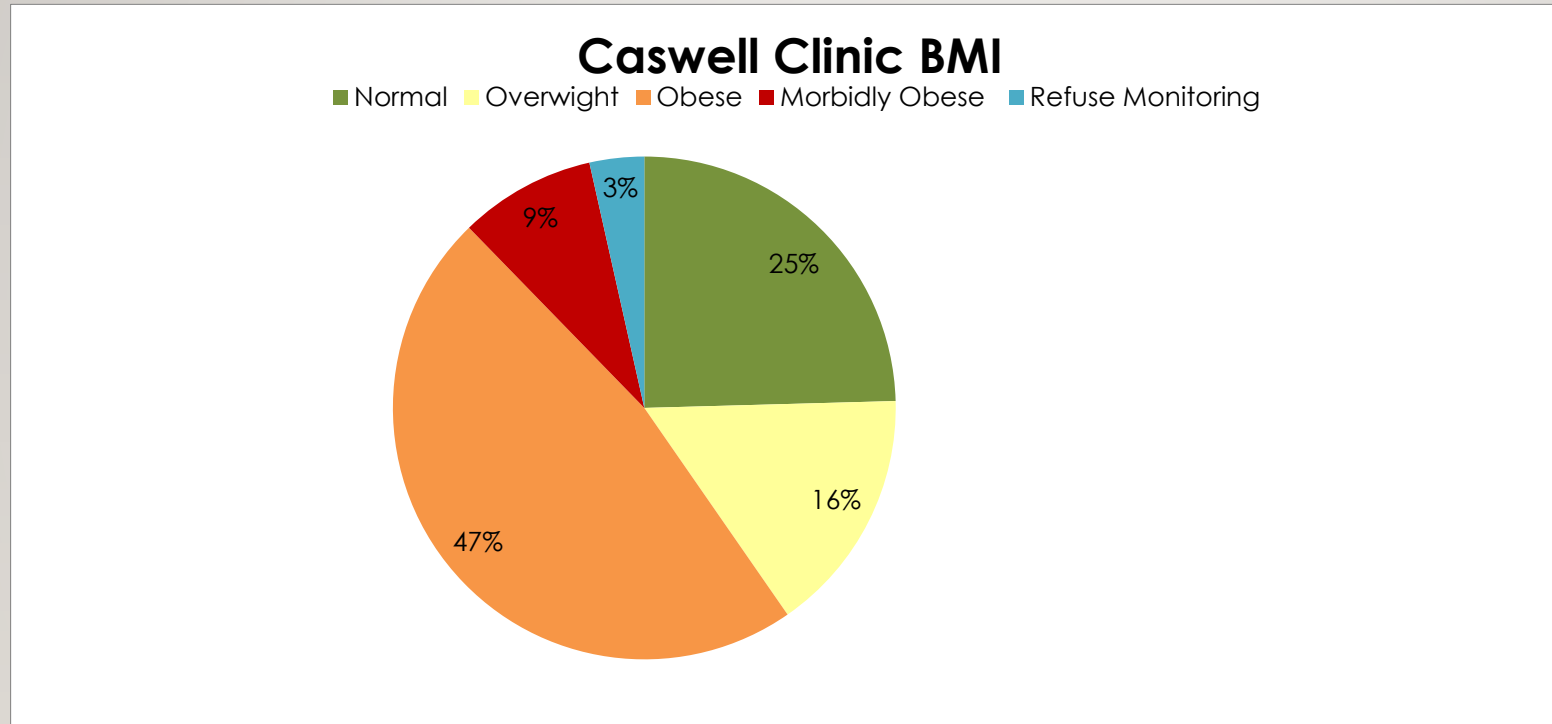
# CARDIAC RISK REGISTER

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- All clients with Qr2 over 10% are being reviewed by the GP
- Aims are to identify and reduce modifiable risks and consider use of statins

# BMI

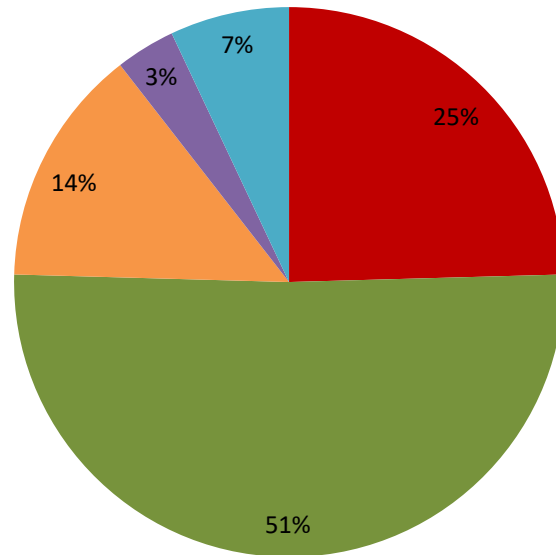
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# CARDIAC RISK

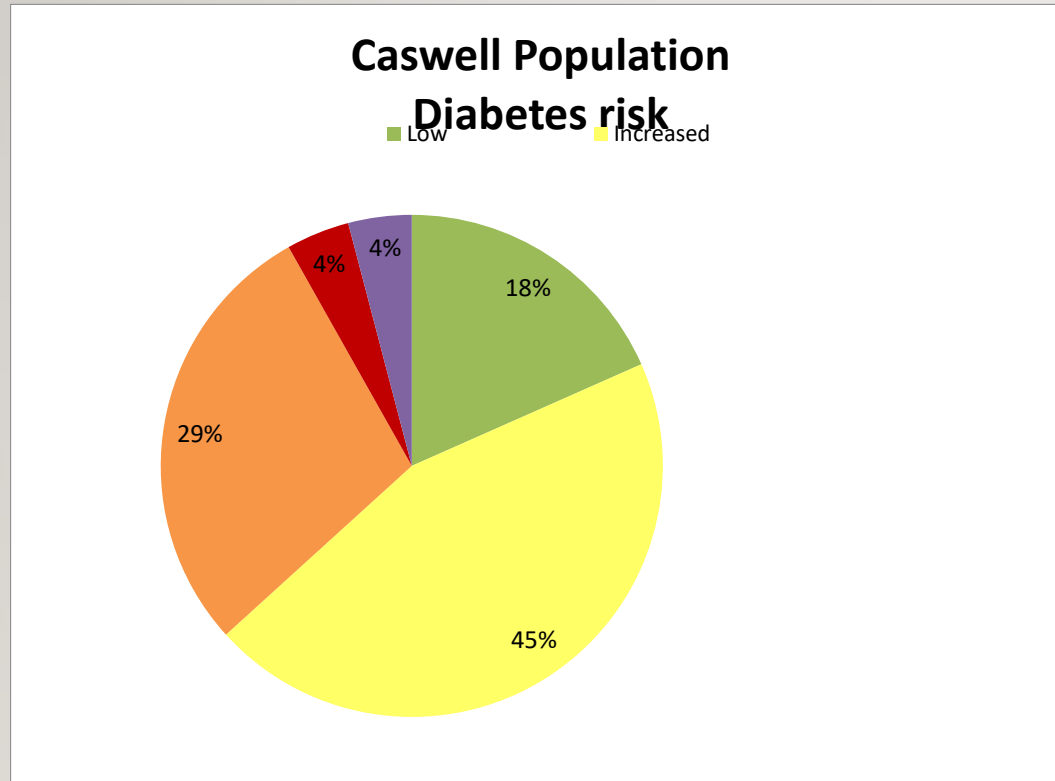
Qrisk 2 Data - Caswell Clinic Aug-16

■ Over 10% (High Risk) ■ less than 5% (low risk) ■ Between 5% and 9% (increased) ■ Refuse Monitoring ■ Patient <25



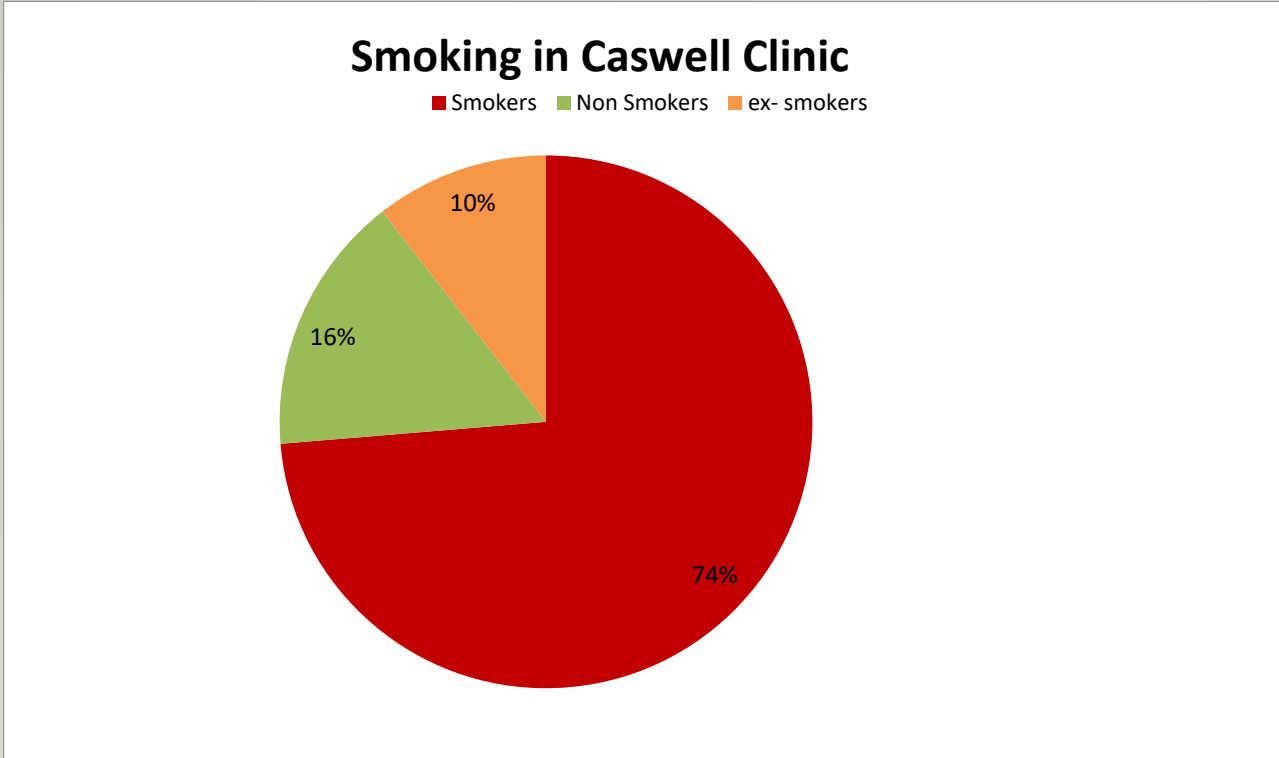
# RISK OF DIABETES

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# SMOKING STATUS

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# SOME FASCINATING CASES-WHERE THE UNIQUE ENVIRONMENT PRESENTS CHALLENGES

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- Health anxiety
- Shoulder pain
- Contraception
- Foreign body insertion

# THANKS FOR LISTENING



Area's for improvement?  
Different approaches delivery of care?  
Are we the galapagos of secure hospitals?

