

Case Study – SystmOne Secure Children’s Home

The Leeds Community Healthcare (LCH) Children’s Looked After and Safeguarding (CLAS) nursing team cares for male young people aged between 10 and 18 within a secure 27 bed unit. The young people come to the service through the courts as part of the Youth Justice Board or through welfare. The service cares for young people with a range of needs, such as physical, mental, emotional or substance misuse. CLAS is using SystmOne to help manage the diverse patient care it provides, ensuring informed and timely care for all patients. This includes managing immunisations and medication, creating and updating health plans and viewing the patient’s medical history.



This really saves time and helps us to provide the right care for our patients.

Every patient has an individual health plan, and this is managed through SystmOne. Collette Spencer, Specialist Nurse for LCH CLAS explains *“All patients are given an immediate healthcare plan within one working day of arriving. This is an initial assessment so we can establish any urgent care needs. Within the next two days, they will have a full mental and physical assessment. Following this, they may have further assessments if required, such as for substance misuse. All these health plans are conducted through SystmOne templates. These have been set up with everything we need, such as the CHAT (Comprehensive Health Assessment Tool).”* The use of templates ensures the correct information is recorded and standardises the assessment process. Collette goes on to say *“It is also really useful that we can generate a summary health plan which we can share with relevant staff. This gives an overview of the patient information,*

so staff can easily see a patient’s medication or anything else they need.” As the secure unit is open 24 hours, 7 days a week, most care staff work on a shift basis, whilst the nurses work office hours. Having the summary health plans ensures a smooth handover and that staff are always up to date with the latest information.

Since November 2013, the Leeds CLAS has enabled external healthcare organisations to share patient information into the service. This means that CLA nurses can see information recorded in the patient record from other organisations, such as the patient’s GP, walk-in centres and other specialist units. Collette explains why this is such a benefit in caring for their patients: *“Due to the transient nature of our young people, when a patient comes to us we often have minimal information about them. We have to make a lot of calls to their GP or parents to try and piece together their medical history. You will often have gaps in their healthcare – missed immunisations for example - but it can be hard to track this down. Having access to the patient record on SystmOne is really helpful to ensure high quality patient care. We often use the journal to view historical information. We can see immunisations, medication, letters, previous addresses; it all really helps in giving the patient the right care as soon as they arrive. It would be good if everyone was using SystmOne, then we could really get a complete picture!”*

Some patient records from before November are still in paper format but the Leeds CLAS is keen to move things onto an electronic record. Collette says *“Now we try and record everything in the system, so if a GP comes in we can type up notes on the patient record to ensure we have up to date health information. For GPs not using SystmOne, the GP still writes notes in the paper record to minimise risk, as we don’t have the capacity and resources to digitise all patient records. We’re hoping to get more and more people using the electronic records so it is much easier to see the information and things don’t get lost or overlooked.”*

Sharing the patient record means anyone caring for the patient can have the most up to date information. Currently, if a patient from LCH CLAS has an A&E attendance, this is recorded on the system so this information can be viewed by other care settings. With the current model, information is only shared into the CLAS while the young people are being cared for. However, on discharge all information is shared out to the appropriate health provider. Sarah Cardus, Nurse Manager, said, *“Doing so will not only allow continuity of care for the patient but also improve information quality.”*

Sharing information, particularly between offender health services, can also improve the patient experience. Collette said, *“Without a doubt a shared record would improve the consistency of care. This is particularly important for our patients who may be cared for in wider community care settings as well as through our service. Unfortunately, we often see patients who will be in and out of custodial*

care. Historically, we spent a lot of resource acquiring data to support assessments through SystmOne, as it would take time to find all their notes from their last visit, and to try and fill the gaps from when we saw them last. An electronic record means we can get all that information straight away, and it is updated with anything that has happened in the meantime, such as if they’ve seen their GP. The time saved allows us to spend more time providing care and support for our young people.”

