

# Improving GP Services to Care Homes = Better Patient Experience

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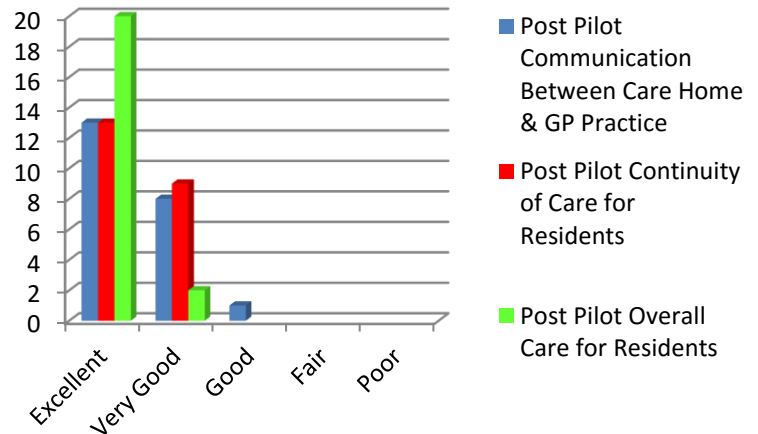
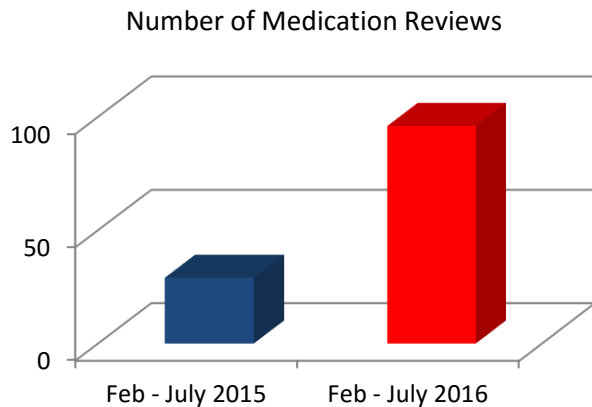
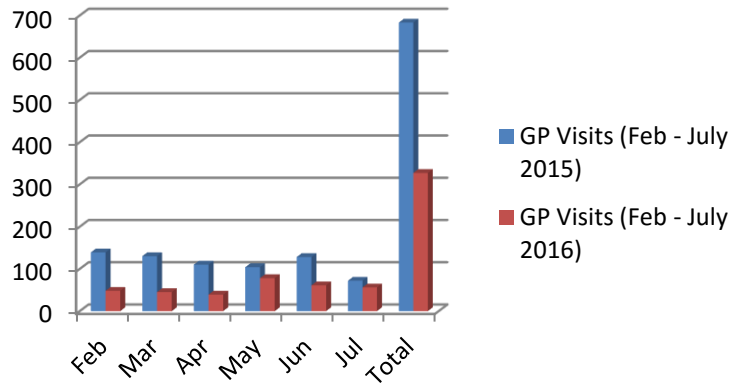
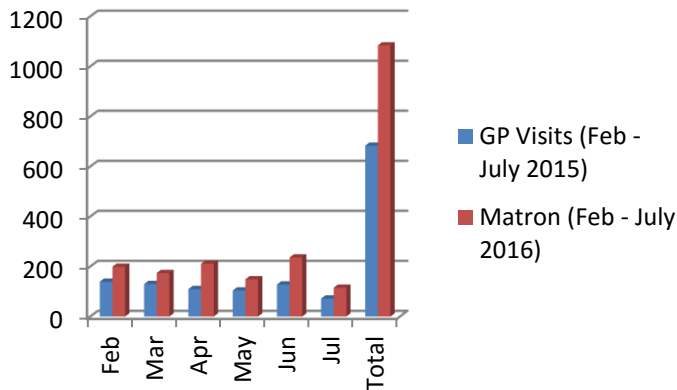
## 1. Evidence (NHSE, 2015)

- People > 65 years account for 65% of hospital admissions and 70% of bed days
- People > 65 years make up a third of GP workload
- 68% of care home residents have no regular medical review
- 44% have no review of medications

## 2. Setting/Methodology

- 1.0 wte Community Matron provided a proactive LTC service to 239 residents living in 8 Care Homes and 1 Supported Living Establishment for a 6 month period
- Proactive service provided Monday – Friday 09:00-17:00
- Direct advice telephone line Monday – Friday 09:00-17:00

## 3. Findings



## 4. Conclusions

- Visits to residents increased by 63% following introduction of CM Service
- GP visits to care homes reduced by 48% following introduction of CM Service
- The CM carried out 30% more medication reviews in 2016 than the GP for the same period in 2015
- Care Home staff report improved outcomes for residents

## 5. Recommendations

- A cost benefit analysis of using CM in place of a GP for Care Home visits should be undertaken
- The CM model in Care Homes should be considered as a high quality alternative by GP Practices
- Further work should be undertaken with this model to establish whether it would realise a reduction in the number of hospital admissions from care homes