

## **Best Practice Document – Top Tips:**

### **Virtual Ward Rounds and communication with Health and Social Care Professionals**

As part of GP provision of medical care for their registered patients who reside in care homes, a virtual ward round is part of the weekly timetable.

Planning for these calls, as for any call or visit from a Healthcare Professional, is essential to get the most out of the time, access to their expertise and support for residents' care. It can also save further unnecessary calls or emails for things that are not urgent.

#### **Things that should be considered:**

Care Staff on the call:	<ul style="list-style-type: none"> <li>• Senior member of Care Staff, familiar with the residents and their medicines.</li> <li>• Not distracted by other members of care staff.</li> </ul>
Location:	<ul style="list-style-type: none"> <li>• Room away from busy areas, with no distractions or ability to be overheard when talking about confidential matters.</li> <li>• This may enable removal of the carer's face mask to improve communication during the call.</li> </ul>
Internet access:	<ul style="list-style-type: none"> <li>• Device is hardwired into network socket or WiFi provides a good connection.</li> </ul>
Record keeping:	<ul style="list-style-type: none"> <li>• List of residents for discussion is sent to the relevant professionals the day before the virtual ward round so they can be triaged.</li> <li>• Clinical observations e.g. blood pressures, pulses, weights, follow up information etc. requested from the previous week should be available for discussion.</li> <li>• Notes and Healthcare Professionals' instructions must be taken down by the care staff during the virtual ward round for each resident.</li> <li>• Notes should be kept in one place to allow for continuity of care and communication e.g. notebook or A4 diary for the purpose of the ward rounds.</li> <li>• An A4 diary would enable notes to be written in for the weeks ahead e.g. as a reminder for follow up.</li> <li>• Notes that need to be typed into electronic records are completed immediately after the ward round has finished. (It may be possible to do this during the ward round if Care Staff are confident to do this and have the device availability).</li> <li>• Changes to paper or electronic Medicine Administration Records must be made immediately after the ward round has finished.</li> <li>• The MAR/eMAR alterations are checked by another suitably trained Care Staff member as per the home's medicines policy.</li> <li>• Medicines that are no longer needed are handled as per care home's policy e.g. remove supply from use and follow disposal/returns procedure.</li> <li>• Urgent Healthcare Professionals' instructions must be communicated to other relevant Care Staff immediately.</li> <li>• Healthcare Professionals' instructions must be communicated to other relevant Care Staff during handover using agreed paperwork.</li> </ul>
Follow up:	<ul style="list-style-type: none"> <li>• Information provided to the relevant Healthcare Professional as needed – this may be at the next ward round or sooner, depending on the urgency.</li> <li>• Written instructions provided by a Healthcare Professional are to be added to the care plan and actioned e.g. a medication review letter.</li> </ul>