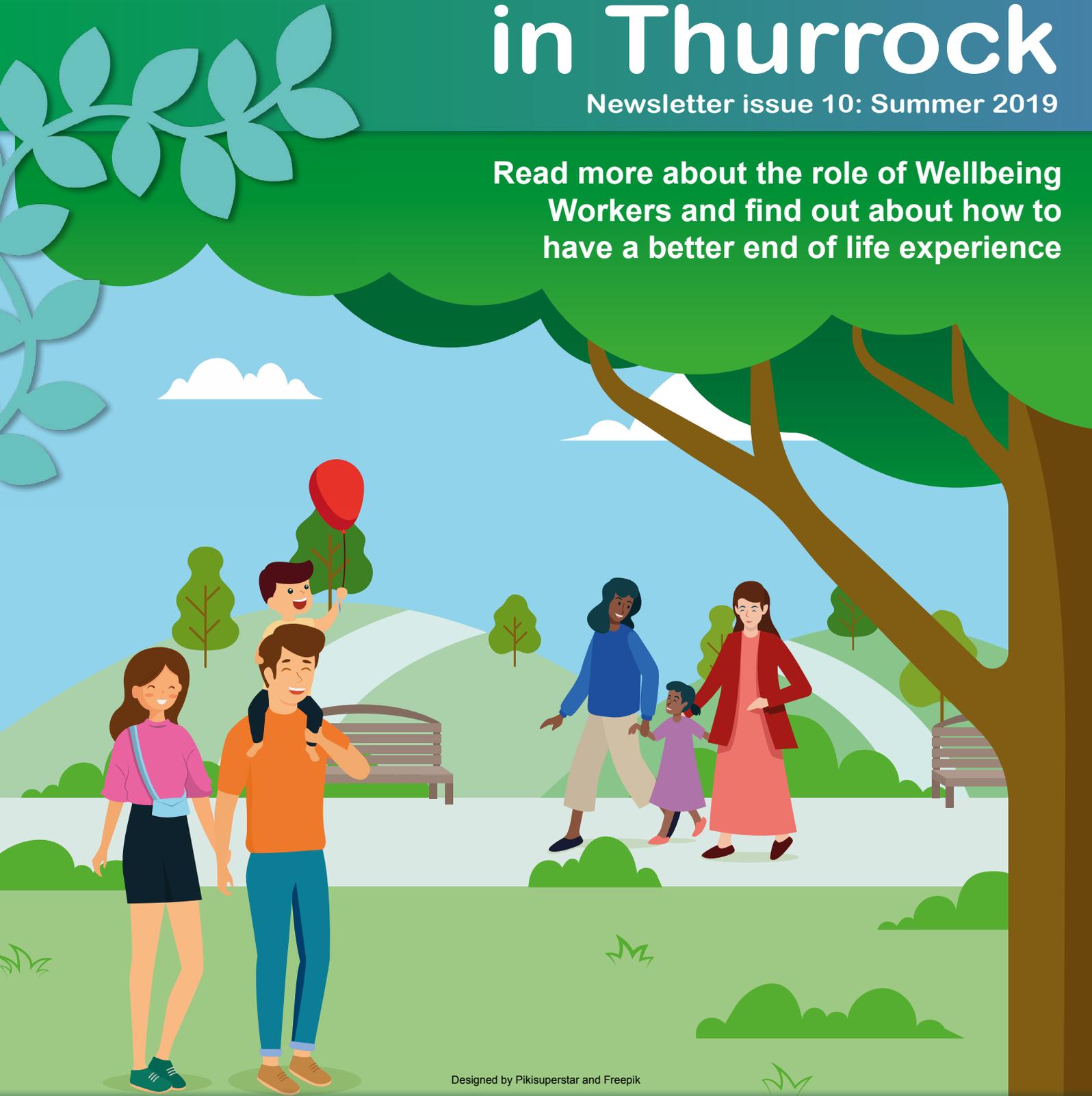


For Thurrock in Thurrock

Newsletter issue 10: Summer 2019

Read more about the role of Wellbeing Workers and find out about how to have a better end of life experience



Designed by Pikisuperstar and Freepik

Working together to bring health and care to you

Farewell to For Thurrock in Thurrock, our newsletter...

This Summer issue of For Thurrock in Thurrock will be our last issue of the magazine in this format. For Thurrock in Thurrock was originally part of the Clinical Commissioning Group's strategy to transform health and care in Thurrock. The first issue of this magazine was out three years ago, introducing our vision. Following lengthy consultation and outreach to the public, things have moved on at a fast pace. We now work together as health, social care, mental health, community and voluntary sectors. We are now an Alliance working together to make Thurrock a better place to be. The next time you see a magazine about the journey to transform services in Thurrock it will be called: Better Care Together Thurrock.

In this issue enjoy reading about some of the new services being rolled out and meet Daniel, an Emergency Care Practitioner who has been working in Tilbury and Chadwell, offering triage and home visits.



Dr Deshpande, Chair NHS Thurrock CCG



Councillor James Halden, Portfolio Holder for Education and Health

A Focus On You As An Individual – Wellbeing Workers

The goal for Thurrock to achieve Better Care Together is: to provide better outcomes for people that are closer to home, holistic and that create efficiencies within the Health and Care system.

One of the ways we are meeting this goal is by testing a new approach to domiciliary care, transforming lives in Chadwell and Tilbury by doing the following:

- Providing a care and support service for people to reconnect with their community and finding out what matters most to them.
- Working in a smaller location so the team know everyone and the people they visit know them.
- Using technology to support a person living at home and update records in real time if a new service or solution has been provided for a person.

- Allowing people to have flexible choice and control over the support they need to meet their outcomes.

Mary Curran, from Wellbeing Teams said; "The teams in Tilbury and Chadwell have recently started working with local people and the feedback from those we support is already really positive. The Wellbeing Workers have quickly got to know what matters to everyone, so they are not only delivering personal care and support, but are looking for ways to reconnect people with others around them. Its early days but we are already seeing people benefit from this very different way of working."

This new way of working is being tested in Chadwell and Tilbury. If it works well, it could be rolled out to other areas of Thurrock in the future.

The Wellbeing Worker team tell us what they love about working with individuals



Alison "I do my job to make a difference to the people we visit and make improvements to their lives at home."



Angela "I am doing this job because of my love for humanity. I love to care for those that need support."



Joanne "Being part of the Wellbeing Team is more than a job as I get to meet people and have fun."



Kate "The best job in the world, makes me so proud to change people's life's."



Maddie "To know I have put a smile on someone's face and brightened their day makes me know I'm doing a good job."



Nichola "I love making a difference in people's lives and helping them to live well at home."



Tina "I do my job to make a difference in people's life."

What is an Emergency Care Practitioner?

Meet Daniel, an Emergency Care Practitioner at a GP practice in Thurrock.



We introduce a new person to you who works as part of the team in your local GP practice. Daniel is an Emergency Care Practitioner (sometimes you might hear people call him a Paramedic) and offers a service which means people who are ill and cannot get to a

practice can be seen by Daniel. Daniel can offer basic medical checks, reassure a patient, and call in a GP if he feels a patient needs further support.

Daniel talks about his work and what his professional background is:

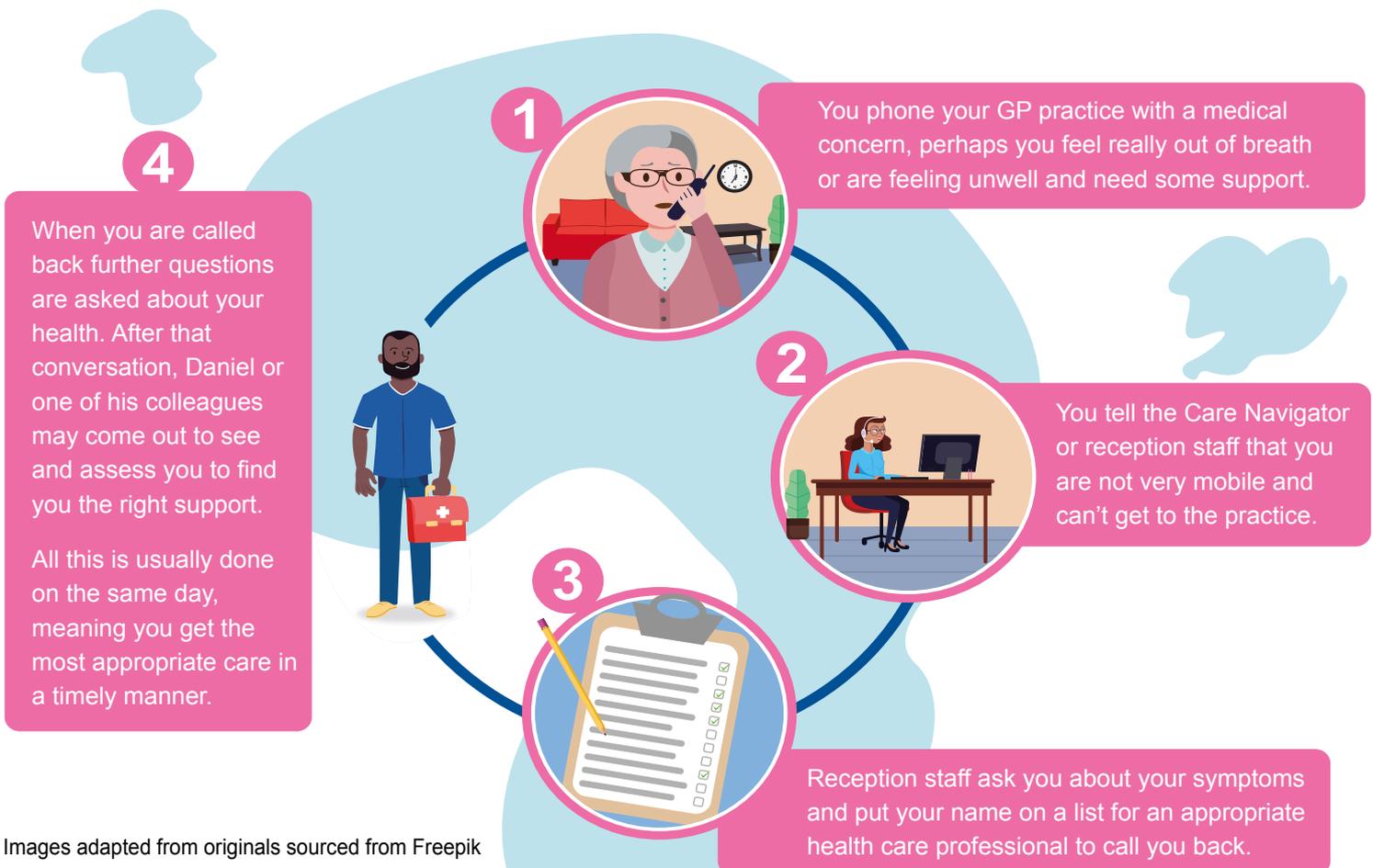
“I started working for London Ambulance as an Emergency Medical Technician (EMT) in 2001. I worked as an EMT for 7 years before taking the

plunge to become a Paramedic. I qualified in early 2010. After working for NHS111 I wanted to come back to work in the community and support people in need.

“My routine changes daily, but as a rule I’ll be visiting patients in their homes, helping to deal with urgent problems that perhaps don’t need a GP but a person needs some support. This gives me the chance to reduce demand on GPs, treat patients in a timely and effective manner, and help to reduce unnecessary ambulance calls and hospital admissions.

“Emergency Care Practitioners liaise closely with GPs where necessary and can even bring a doctor, nurse or Physician Associate with us if the situation requires it. Our focus is currently on getting to those residents that cannot get to their GP practice due to frailty, infirmity or other mobility problems. We’re bringing primary care to the patient where needed.”

How would I be able to access an Emergency Care Practitioner?



End of Life Care – ‘Beryl’s’ Journey

In 2016, the CCG launched an ambitious service improvement programme, featuring a fictional patient called ‘Beryl’. Beryl’s revised programme of care saw her health, social and wellbeing needs being met through an integrated care plan, delivered via joining up providers and removing any barriers to health, social and voluntary sector professionals working together to meet the needs of the person.

Recently, the CCG was asked ‘whatever happened to Beryl?’

It’s likely that Beryl has entered or will soon enter her last years of life, potentially requiring further support from health and/or social care services.

Nationally, it is recognised that the greatest need for services generally occur in the first and last years of a person’s life. Case studies show us that, where health organisations have actively worked with patients in their advance care planning, people can be better cared for, in accordance with their personal wishes.

Working together we have created a culture where a person’s preferred place of care, which is usually home, is more closely supported, enabling them to spend their last few months and weeks where they would wish to be.

In Thurrock, based on National statistics, approximately 1,730 people will be within their last year of life.

Thurrock’s Palliative and End-of-Life services are provided through St Luke’s Hospice. Commissioned

by NHS Thurrock CCG, the hospice has received national recognition for its innovative models.

‘Beryl’ and other Thurrock residents in need of palliative and end of life care are able to take advantage of the services at St Luke’s Hospice. In order to provide the very best experience to people like Beryl, it is important that patients and professionals from health, social and voluntary care are willing to have open conversations about care.

Whilst these discussions can initially be daunting, the benefits to those involved can be positive and long-lasting. This way of working ensures people experience good care during their last days while also providing support for loved ones in their bereavement.

One Response is a co-ordinating service for people with palliative care needs or needing care at the end of life. It can be accessed 24 hours, 7 days a week on: **01268 526 259**.

“To the wonderful nurses who kindly looked after our dearest Beryl: you were all so lovely and so much care and respect was given to her. You also helped support mum and I more than you will ever know. The wonderful ‘One Response’ team were just amazing and we can’t thank them enough.”

