

HASLAM'S VIEW



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Nursing home patients are falling through the net

WE'VE GOT A PROBLEM WITH NURSING HOMES. THE ONES THAT YOU LOOK AFTER

may be fine but nationally I'm convinced that we've got a real problem. Surveys and reports keep flagging up concerns.

As the population ages, and the very aged become increasingly frail, the need for high quality care in nursing homes will become ever more important. At the moment it is all too often found wanting.

I know anecdotes are only anecdotes but they can often illustrate an important issue.

I recently visited a friend's father in a nursing home. He is very aged and very frail but still has all his marbles.

When we remarked that he was looking rather miserable, he replied: 'The night-time staff are really mean to me.' Every evening he got more and more agitated about the staff who were coming on duty. I offered to have a word with the manager. 'Oh no,' he exclaimed. 'You mustn't say anything. That will only make it worse.' How many old people suffer in silence because they fear the repercussions?

At one stage, his medication needed adjusting. The staff told me that his doctor was reluctant to visit. When he did, the visits were cursory. This was quite a large home and five different practices had patients there.

Each practice had different standards and ways of working. Some did weekly reviews of all their patients. Others visited grudgingly, if at all, and only on request. As a

result, the staff found it hard to know what to do for any given patient.

Last year, I was honoured to be a commissioner for the independent Commission on Generalism chaired by Baroness Finlay. One issue that we kept coming back to was the standard of care in nursing homes, pointing out at one stage that 'some patients in nursing homes languish without dedicated medical attention'.

'Some patients in nursing homes languish without dedicated medical attention'

For years I felt absolutely certain that patients should be encouraged to keep their own GP when they go into a nursing home, as long as geography and practice boundaries made this possible.

Now, after my experience on the Commission, reading numerous reports on nursing home care, and talking to people such as my friend's father, I am becoming absolutely certain that this is wrong. People in nursing homes need the highest possible standard of care. Our current systems are all too often not delivering this.

On the Commission we learnt about the situation in the Netherlands where there is a distinct specialist generalist role of nursing home medicine. Some model of GPs with a special interest in the quality of care in nursing homes might well be the best way forward.

Each nursing home would have at least one GP with a particular expertise in the complex generalist care of the patients in the home. Staff would know what to expect, there would be better consistency of care, and perhaps more than anything we could begin to escape one of the saddest situations that bedevils so many patients at present.

Another friend. Another elderly relative. After an active and enjoyable life, his aunt had developed severe Alzheimer's and had moved into a nursing home. After a couple of increasingly frail years there, she developed a severe chest infection. The out-of-hours doctor was called, didn't know the history, didn't know the patient, and felt the only answer was admission to hospital.

After two days in hospital, she died. Is this good medicine? Would it not have been kinder to have kept her in her home, her nursing home? Significant numbers of very elderly patients die rapidly after being transferred from nursing home to hospital. This doesn't feel like good medicine for anyone even though every individual is probably doing what they think is best.

So maybe it really is time for a rethink. What do you think?

Tell us what you think?

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