Understanding the complexity of community nursing care

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Project Summary

- To understand the complex work of community nurses
- To develop a method of capturing and analysing these data
- To test a model (Cassandra) previously developed for the specialist nurse/case managing community.
- Funded by NHSE and HEE regional level
Great data → Great model → Garbage results → Poor decisions

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Great data → Great model → Great results → INSIGHT!
False assumptions

- Nursing is linear
- Nursing is a series of primarily physical tasks that occupy time
- Nursing is the application of a task based skillset with little decision making
- Data collection mostly linear-measuring
Modelling is about building a representative “whole system” rather than trying to measure bits
Activity of specialist APRNs

Things that specialists do

Outcomes
Emotional effort
Intervention
Time
Context
Numbers
Date
Form

Things that Cassandra records

Physical
Psychological
Social
Admin
Care management
Cassandra- what does it do?

- 70-100 hours activity per practitioner
- Intervention, context, time, people, care left undone/activity left undone
- Instant report generation at 70 hours
- Organisational report providing detailed analysis of workload activity across bands
What does the tool look like?
Data input for each care episode

Cassandra matrix™ for community teams

Welcome to Cassandra for community teams. This is a specialist data collection tool used as part of a study looking at the complexity and workload of specialist practice. You can download the instructions here. At the end of the day please tell us how much unpaid overtime you have worked.

Date:

22 August 2014

Is this data entry for:

Please select

Where/how did this take place?

Please select

How many hours did you work today? Include any unpaid overtime or worked through lunch breaks

0
Why is this different?

• Models a complex system
• Relies on understanding relationships not just tasks that occupy time
• This includes modelling “negative space” i.e. work left undone
• Is more sensitive than averages
• Can be used to construct optimum caseload “blackbox”
• Is iterative, takes longer and requires large amounts of data to look for patterns
Spread across the intervention spectrum (2x context)
Next steps

• Develop data ontology for community nursing
• Data collection allowing for pattern recognition
• Optimum caseload calculations using stochastic methods
• Detailed analysis of workforce resourcing patterns and gap analysis
England Centre for Practice Development

- Flourishing People, Workplaces and Care

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