# Diabetes and Homelessness Quality Improvement Project

### **Specialist Diabetes Nurses**

### Instructions

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Undertake the Quality Improvement project outlined below within your service.

The questions below try to identify barriers to accessing your service for people experiencing homelessness and other vulnerable groups, and to help you to identify areas for potential change.

You can either do this totally by yourself or ask members of your team to get involved.

#### Learning from the results

Once the exercise has been undertaken discuss the results with your wider team.

- What have you learned as a result of undertaking the project?
- Are there any areas in which care could be improved?
- What is your action plan for Quality Improvement going forwards?
- What could you share with the wider group of nurses about what you have learned from the process?

#### Write up for your service

As a result of undertaking this exercise, you might want to write the work up as quality improvement piece for your own organisation.

If you do this, things to write in the introduction to give context to your project would be:

- What is your job title / the nature of your role?
- What health setting do you work in?
- What is the geographical area that you currently serve?
- How many patients do you see in an average week?
- How big is your staff team?
- Why are you concerned about people experiencing homelessness with diabetes specifically?
- How many patients with diabetes who are also homeless do you currently have?









### **Project Outline**

Consider the following questions (this could be gone through as an individual, or used for a team discussion)

Choose at least one area (you could choose several, or work on them all – this is your choice), to work on to improve your care for people experiencing homelessness.

#### How accessible is your appointment booking service?

- How do people book appointments? Do they ever have to book the appointment themselves? Is this an online process? Can people book in other ways?
- How are appointments sent out? Are appointment letters sent out? Are texts sent out? How would someone without an address or a regular phone number get an appointment? Can carers / keyworkers be contacted about appointments? How would staff know when to do this?
- How easy is it to contact the clinic directly by phone to check on an appointment?
- When a new patient comes in, are they asked about barriers they have experienced when attending?
- What improvements could be made to your appointment system? (both immediate, and longer term) Are any deliverable in the immediate term?
- Is there any good practice in appointment booking that you could share with others?

### What is your DNA (Did not attend) policy, and could it be discriminatory?

- How many DNAs result in a discharge from your clinic?
- What happens when people DNA? Is any attempt made to follow them up / find out why people have DNA'd?
- What improvements could be made? (both immediate, and longer term) Are any deliverable in the immediate term?
- Is there any good practice regarding DNA policies that you could share?

#### How welcoming / accessible is your waiting room?

- Is the clinic welcoming? Are there posters indicating that the service is inclusive?
- Do patients have to fill in any forms on arrival? If so, are they offered help?
- Are there places for people to wait separately from others if they want?
- Are there long waiting times?
- What would happen if someone had a dog, or lots of possessions with them, or a friend with them?
- What improvements could be made? (both immediate, and longer term) Are any deliverable in the immediate term?
- Is there any good practice regarding your waiting room that you could share?

#### Does your service have any adaptions for people with complex needs?

- Are appointments made longer for people with complex needs?
- Would your service know if someone booked in for an appointment was homeless, or had mental health problems, addiction problems, a brain injury, or other complex needs?
- Are you able to arrange flexible appointment times if people need longer, and/or book them longer for their next visit?
- Do you provide extra support to people who are at risk of non-concordance? What is this?
- What reasonable adjustments exist to support people with complex needs / communication issues e.g. brain injury, complex trauma, neuro diversity?
- Is your service trauma informed?
- Do you have psychology input?
- What improvements could be made to better meet the needs of people with complex needs? (both immediate, and longer term) Are any deliverable in the immediate term?
- Is there any good practice regarding the lengths of your appointments that you could share?

# Do you record housing status? (either in demographics or in clinical notes / assessments)

- If yes, how is this done? Is this part of the booking in process? Is this part of the assessment?
- Is this coded in hospital records?
- If yes, would it be possible to search your database to find out how many people experiencing homelessness are engaged with your clinic?
- If yes, could a clinical audit be undertaken to look at the comparative outcomes of that group?
- If no, could any changes be made to enable this?

Do you ask about practical aspects of people's home environments as part of clinical assessments? (e.g. whether people share their facilities, have safe storage facilities, have a fridge, have their own bathroom, have cooking facilities)

- If yes, is this done in a structured way?
- If no, what stops this happening?
- Could any improvements be made to the way this is assessed? (both immediate, and longer term). Are any deliverable in the immediate term?
- Is there any good practice that you could share?

#### Do you have / use accessible information leaflets?

- What leaflets do you use / have available?
- Do leaflets meet NHS accessibility standards? (font, typeface, images etc)
- Do you have leaflets for people who have literacy issues?
- Are the leaflets always available / and or are there any barriers to using them?
  (like e.g. printing access)
- Are there any improvements that can be made to leaflet provision?
- Are there any good leaflets that you would like to tell others about?
- Is there any good practice that you could share?

#### Do you use / have translated leaflets?

- What leaflets do you use / have available?
- Are any languages missing?
- Are there any improvements that can be made to leaflet provision?
- Are there any good leaflets that you would like to tell others about?
- Is there any good practice that you could share?

#### Do you have access to / routinely use interpreting services?

- How easy is it to get interpreting services?
- Are they ever not used when they should be?
- Are there any improvements that can be made to interpreting provision?
- Is there any good practice that you could share?

#### Do you have any peer support programmes?

- Are there peer support programmes for diabetes and/or people experiencing homelessness?
- Are they used for people experiencing homelessness?
- Are there any improvements that could be made to the peer support offer?
- Is there any good practice that you could share?

# What engagement does your service have with service users? (e.g. feedback, Experts by Experience)

- How do you get feedback from service users?
- How do you get feedback from vulnerable groups?
- Do you have any service user input in developing services?
- Are there any improvements that could be made to service user feedback?
- Is there any good practice that you could share?

#### How connected are you with homeless and inclusion health services locally?

- Have you made connection with homeless services locally?
- Have you made connection with inclusion health services locally? (assuming they exist)
- Have you ever met with either?
- Do you know what options exist for partnership work with community services?
- Do you have any resources available for people with homelessness / housing issues?
- Do you have any resources available for people with mental health / addictions issues?
- Are there any improvements that could be made to connections with homeless and inclusion health services locally?
- Is there any good practice that you could share?

#### Do you have a homelessness lead in your service?

- Is there a practitioner in your service who is linked into local homelessness services?
- Would local services know who to contact if they had a complex case?
- If no, could someone take on this role?

## Are you currently aware of any patients on your caseload who are currently homeless?

- Do you feel their care is optimal?
- Do you have any concerns about self-neglect?
- Are there any care providers you could link in with to assist?
- Have case conferences been organised?
- Are there any improvements that could be made to care for people that are currently homeless in general?
- Is there any good practice that you could share?