

# STB 28 How to Add Special Patient Notes & Palliative Notes

NAME:(PLEA	ASE PRINT CLEARLY)
DATE OF BRIEFING:	
BRIEFED BY:	
STB 28: How to Add Special Patient Notes & Palliative Notes	
The purpose of this Service-Training Brief is to assist us in the service we provi	de to our customers.
The Training Team/Co-ordinator is responsible for delivering this brief to staft page of the brief, this will then be kept in your training file and the information systems. The brief content pages may be kept for reference as required.	
The information contained in this brief supersedes all previous commuprocedures.	nications, manuals c
STB 28 – How to Add Special Patient Notes & Palliative Notes	Signed
I have received a face to face briefing	
I fully understand the briefing and will implement this training.	
I have discussed any queries.	
STB	Date
Added to Rotamaster	

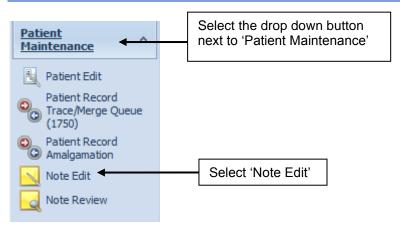
## **VERSION CONTROL**

DATE	CHANGE	CHANGED BY
Feb 2011	Original Version	CY
Nov 2015	Training Co-ordinator Added	CY
Dec 2015	Updated and restructured	CY
May 18	Updated	SBi

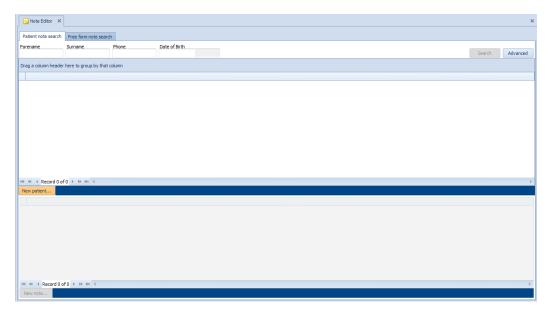
#### INTRODUCTION

Special patient notes and palliative care forms are sent from other agencies (for example surgeries, district nurses, nursing homes, ambulance service and hospitals etc) when vital information regarding patients needs to be added onto the Adastra system. This ensures the clinicians have a clear clinical picture regarding the patient's condition. If there are instances that you are unable to read what has been written on the form, contact the sender to clarify the details. Please follow the process below as to how to add the notes.

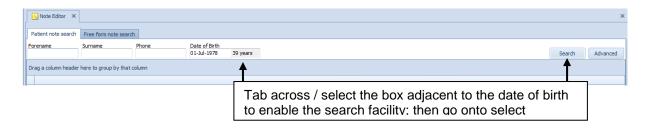
#### THE PROCESS



The screen below then comes up.

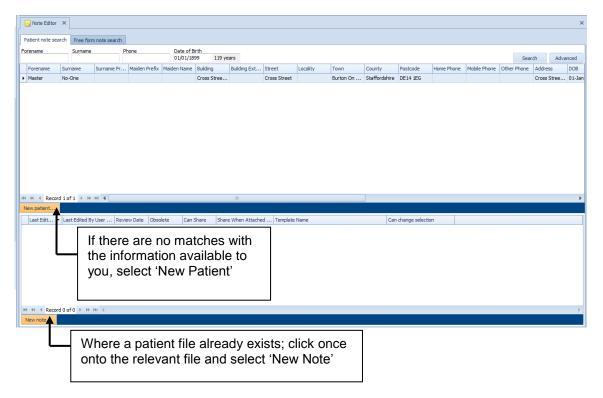




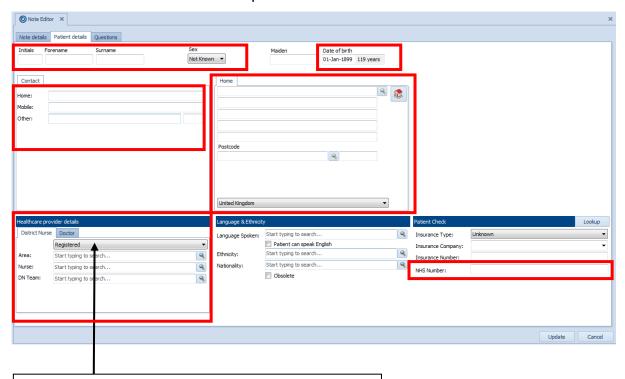


The reason that only the date of birth is selected as the search criteria, is that there is a possibility that names may have been misspelt where this is the case the mistake can be rectified and all relevant files amalgamated. If there is more than one file for the same patient, please follow the instructions in STB 79 How to do Patient Amalgamation

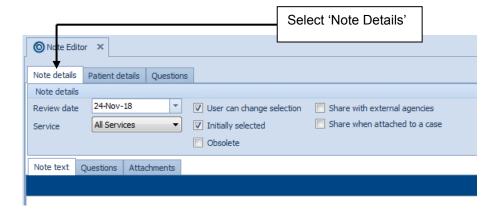
Now go back into 'Note Editor' and search for the patient again, there should only be one file for the same patient.



In 'Patient Details' ensure all the patients demographics that are provided are recorded as you would a GP or DN call. Depending on the format of the form used, a NHS number may be provided please record this number, if it has been provided.



When inputting GP details ensure you select the drop down menu and select 'Registered' and then enter the patient's GP details.



## PALLIATIVE CARE FORMS

ı



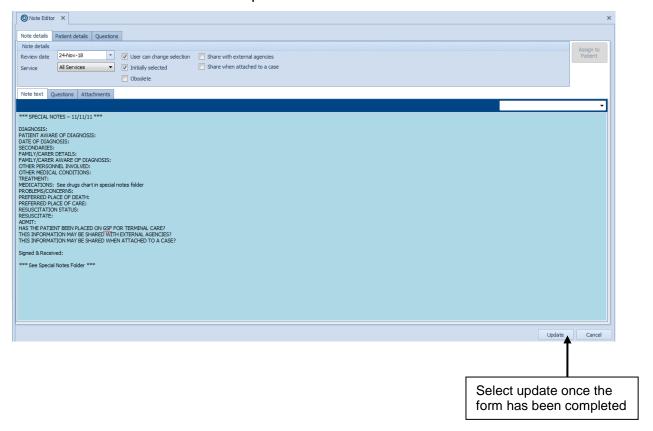
#### Notification of Patient Requiring Palliative Care Intervention

We frequently have problems dealing appropriately with patients requiring palliative care intervention at the end of life when we do not have any details of their illness. Often their relatives do not know that death is expected and as a result inappropriate interventions may be made, such as 999 calls or emergency admission. The only way we can improve this is for their GP to inform us. If you have a patient who requires palliative care intervention, please notity us so that we can flad this on our system. Please make a copy this form for future use.

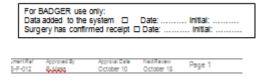
	Improve this is for their GP to inform us. If you have a patient who requires pallative care intervention, please notify us so that we can flag this on our system. Please make a copy this form for future use.							
	The following information is to be reviewed on:							
#	Patients Details (Please use Block Capitals	9)						
	Full Name:	•	Date of Birth:	Telephone Number:				
	NHS Number:							
	Home Address:			GP & Surgery:				
	Details of Diagnosis Diagnosis:	Data of	Diagnosis:	Secondaries:				
	Diagnosis.	Date of	Diagnosis.	Securidanes.				
	1							
	1							
	Patient aware of diagnosis Y / N Family / Carer Details:	Other	ersonnel Involved:	Other Medical Conditions:				
	ramily / carer betails.	Other P	ersonnei involved:	Other Medical Conditions.				
	1							
	1							
	Family / Carer aware of diagnosis Y / N							
	Details of Treatment / Medication							
- 1	Treatment:	Current Medication:						
	Problems / Concerns:							
	Preferred place of death:	Resu	scitate: Y/N Admit: Y/N					
	Has the Patient been placed on the Gold Stan	dard Fra	mework for Terminal Care?	Yes / No (Delete where applicable)				
	This information may be shared with external : This information may be shared when attached	agencles'	? Yes / No					
	This information may be shared when attached	u wa ca	se: Teb / NO					
	Signed:		Print Name:					
	Surgery:		Date:					
	Please return during office hours to:							
	Duty Team Leader, BADGER Group, Badger	House,	For BADGER use only: Data added to the system	□ Date:Initial:				
	121 Glover Street, Birmingham, B9 4EY Fax: 0121 766 5135			ipt 🗆 Date: Initial:				
	For further Information Tel: 0121 766 2101		-					
	Please check that Badger has received this							
	Author or Department Insue Date Version	Dec.m	nt Raf Accround By Accrount	tale Next Sevien m 4				

Enter all the information that has been completed on the form. Where there are blanks on the form simply disregard this section and do not enter below. Ensure all information is recorded below as it has been completed on the form itself; the only case where this is generally not followed is when arrows have been used to indicate an increase or decrease in possibly medication levels. When recording current medications, the list can be vast at times, in this case simply record the name of the medication. Where this has been completed please record at the bottom of the note: 'Please see Special Notes Folder on Mission Control for full details'.

Please utilise the standard template for each service which can be obtained from your Team Leader.



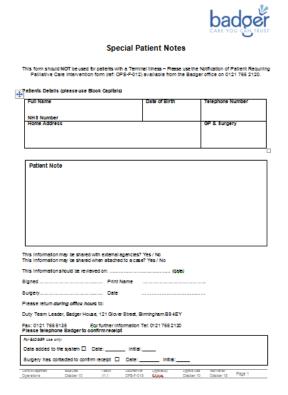
Once the form has been added on Adastra ensure the box in the bottom right hand side of the form has been filled out.



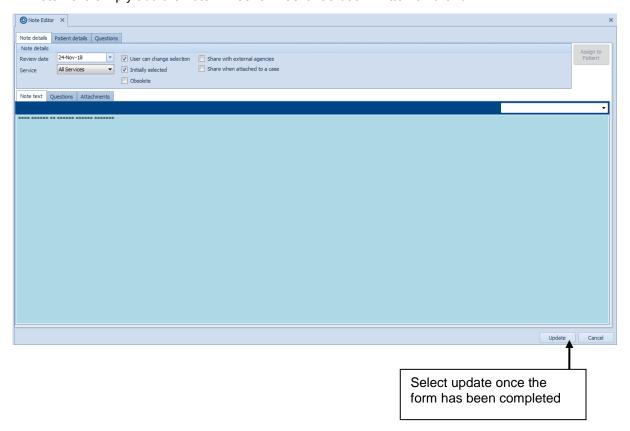
For the forms that have a different format to the BADGER forms ensure you record on the top sheet the following: 'Added to System [DD/MM/YY]' followed by your initials.

The paperwork must then be filed in the correct folder behind mission control.

#### SPECIAL PATIENT NOTE FORMS



In 'Note Text' simply add the note in free form as it has been written on the form.



Once the form has been added on Adastra ensure the box in the bottom right hand side of the form has been filled out. For the forms that have a different format to the BADGER forms ensure you record on the top sheet the following: 'Added to System [DD/MM/YY]' followed by your initials.

The paperwork must then be filed in the correct folder behind mission control.

Author or Department	Issue Date	Version	Document Ref	Approved By	Approval Date	Next Review	Desa 7
Training	February 11	V1.3	STB-028	B.Moss	February 11	May 21	Page /