

Apps to Support Care Providers



Sam Varo



Yellow Card

The Yellow Card Scheme is the UK system run by the MHRA* for collecting and monitoring information on suspected adverse reactions to all medicines including vaccines, blood factors and immunoglobulins, herbal medicines and homeopathic remedies, and all medical devices available on the UK market.

- Report a suspected side effect to a medicine (including vaccines)**
- Track new safety information published by the MHRA about medicines**
- Create a watchlist for alerts to medicines of interest to you**
- View numbers of reports received by the MHRA to medicines and vaccines**



Yellow Card



ISTUMBLE

WHEN SHOULD AND SHOULDN'T YOU LIFT SOMEONE WHO HAS FALLEN

ISTUMBLE is used by paramedics and carers to assess fallen residents

BEGIN THE "ISTUMBLE"
FALLS GUIDE

In association with:



ISTUMBLE

Risk and health assessment tool that can be used when a resident has fallen, to check for injury and tell staff when to call for an ambulance and when safe to lift.





Is the person who has fallen...

- Clear of dangers?
- Are they responsive?
- Are their airways open?
- Is their breathing adequate?
- Do they have a pulse?

YES

to all the above

NO

to any of the above

Call 999

- Keep the person:
 - Calm
 - Still
 - Comfortable
- Answer all questions and follow instructions from the 999 call taker
- Wait with the fallen person until an ambulance arrives
- Inform their next of kin

Call 999 Now 

ISTUMBLE

REACT TO HOME ABOUT INFO CONTACT

CH from Crocodile House

**REACT
to FALLS**

Part 1

What is a fall and why is it important to think and react to prevent falls?

07:22 vimeo

Part 1: What is a fall and why is it important to think and react to prevent falls?

CH React To Falls Part_2 from Crocodile House

**REACT
to FALLS**

Part 2

Why do residents fall and what are the risks?

07:27 vimeo



React to Falls

App that can be used as part of refresher training and to help prevent a fall. Helps identify areas of risk that might cause a fall, giving practical tips in bite size pieces of information that have been shown to reduce falls and reduce the effects of falling over. Risks are categorised into six areas – Activity, Communication and Understanding, Environment and Equipment, Review Medical History and Physical Health and Personal Hygiene.

- **Provides realist and practical suggestions of what you can DO**
- **Prompts to tailor the actions to support each individual resident**
- **Provides detail that will give you confidence that you are doing the right things**
- **Helps you react to falls before they happen**
- **Supports residents to remain active and make their own lifestyle choices**
- **Recognises managing falls is a continuing process**

Uses same resources and theory as the CCG's React to Falls Prevention Training. This is still available both virtually and in person- For more information follow this [link](#) or contact h.degnan1@nhs.net



React to Falls

Welcome to React to Falls

React to Falls is based on Research by the University of Nottingham. Below are the different sections of Risks, to get started just pick a section...



Activity



Communication and Understanding



Environment and Equipment



Review Medical History and Physical Health



Personal Hygiene

Extra Resources

React to Falls

Welcome to React to Falls, a set of guidelines developed by the Division of Rehabilitation, Ageing and Wellbeing at the University of Nottingham, School of Medicine.

[Learn more about Reacting to Falls](#)

Videos

As an additional resource, there are training videos for React to Falls, created by Crocodile House - click below - please be aware, this part of the Application requires an



Communication and Understanding

Communication

Is your resident communicating efficiently? >

Cognition

Does your resident know their limits? >

Comprehension

Does your resident speak coherently? >

Vision and Hearing

Are they seeing things properly, or mishearing? >

React to Falls

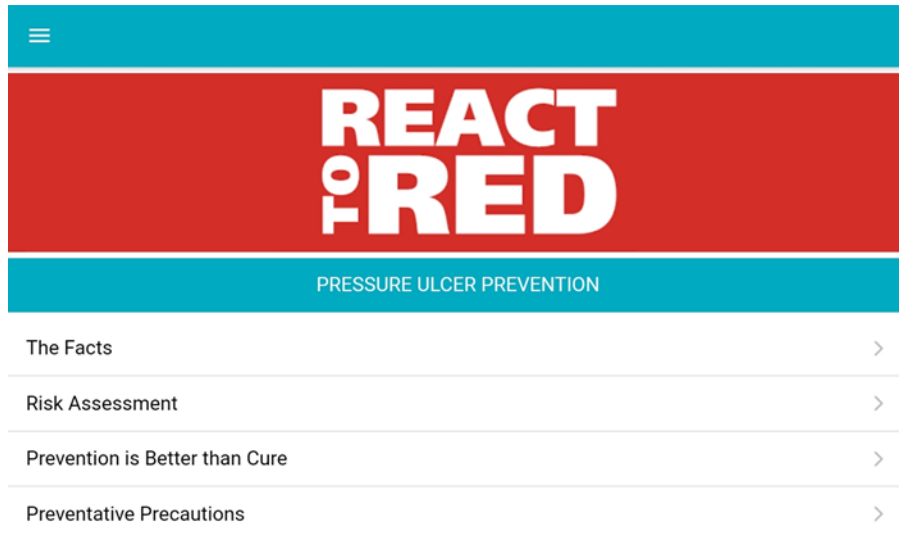
Developed by the Division of Rehabilitation, Ageing and Well-being at The University of Nottingham.



React to Falls



Vale of York
Clinical Commissioning Group



- App that can help educate staff on the risk factors that can lead to a pressure ulcer, as well as key measure to prevent them using the SSKIN framework (Surface, skin inspection, keep moving, incontinence and moisture, and nutrition and hydration).
- Key information on how pressure ulcers and how to spot them, as well as the impact they can have on residents as well on a care provider
- Underpins the React to Red training available through the CCG, which continues to be available either virtually or face to face. More information through this [link](mailto:h.degnan1@nhs.net) or by contacting h.degnan1@nhs.net



React to Red

Keep Moving

What you must do

If your resident/patient is identified at RISK, you should commence a repositioning schedule which must state how often and in what way your resident/patient needs repositioning.

IMPORTANT: This will vary depending on your residents/patients' skin inspection and their needs NOT by RITUALISTIC schedule (NICE, 2003).

Examples of keep moving



Moving feet



Transferring



Reclining



Encouraged to move independently



Regular toileting



Activities

Risk Assessment

Risk assessment is understanding a residents/patients likelihood of developing a pressure ulcer.

To do this you need to understand the risk factors.

Risk Factors

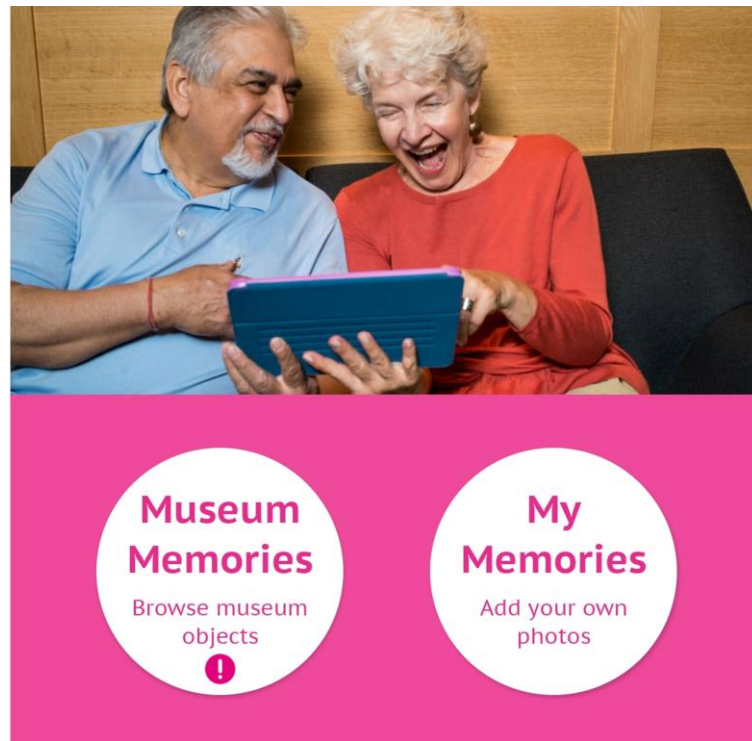
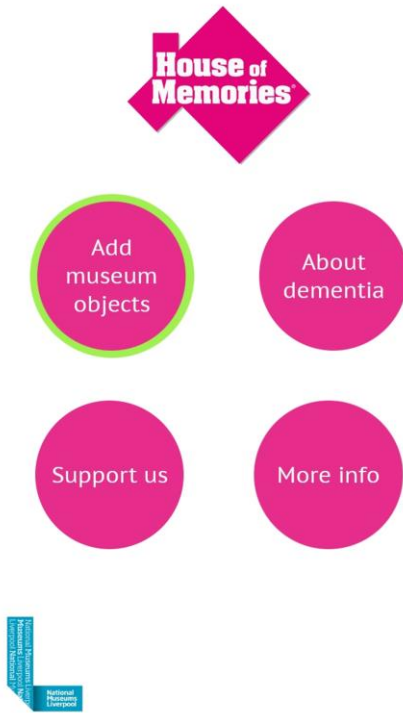
Pressure	▼
Shear	▼
Friction	▼
Mobility	▼
Sensory impairment	▼
Incontinence & moisture	▼
Loss of consciousness	▼
Posture	▼
Previous pressure damage	▼
Age	▼
Nutrition & hydration	▼

What to look for?

Respiratory disease
 Spinal injury/Neurological conditions (CVA/MS)
 Parkinson's Disease
 Extremes of age
 Undergoing surgery
 Diabetes
 Heart failure
 Critically ill
 End of life
 Kidney failure



React to Red



My House of Memories

Created by National Museums Liverpool, My House of Memories allows you to explore objects from throughout history and share memories together.

Multi sensory app designed by National Museums Liverpool for, and with, people living with dementia or Alzheimer's disease, and their carers. This allows you to explore objects from throughout history and share memories together to build connections and stimulate the memory. You can find objects that relate to a residents own life, identity, and favourite hobbies. Ability to collect objects in your own house of memories including adding personal photos.





Back

Select new objects to add



Country



Fish connections



Maritime memories



Starter package



Work and family life



School and
childhood



Sports and hobbies



African & Caribbean
life in Britain



Liverpool life



Home and shopping



Music and
entertainment



Leisure and travel

Add new objects



Close



School and childhood

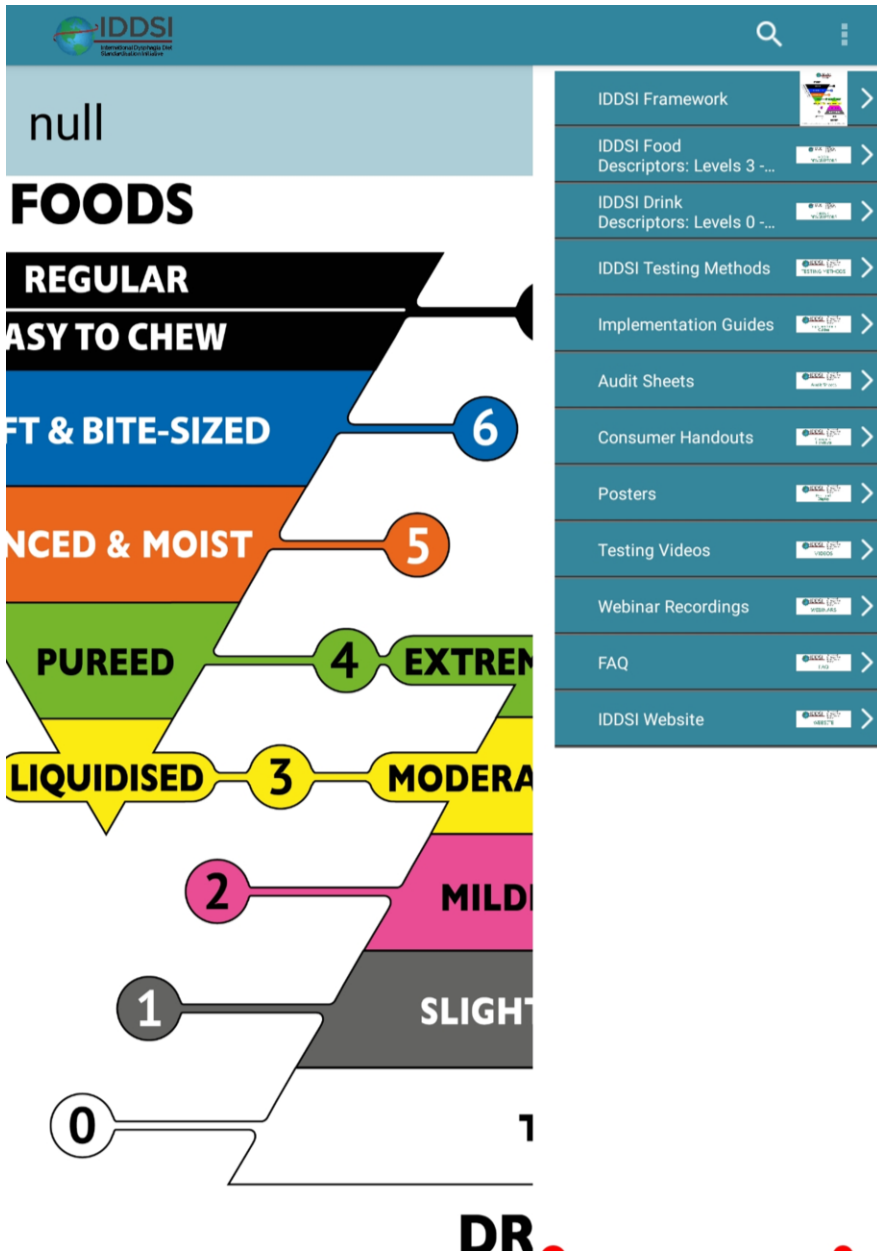
Revisit our childhood days, from the toys and games we used to play, to 'old school' classrooms and kit

Download now

What's included?

24 objects
63 images
15 sounds
2 videos





- Have the IDDSI framework to hand for those with dysphagia at your fingertips - get access to the descriptors and look up the different IDDSI food texture and drink thickness tests easily.
- Includes an audit tool, implementation guide and links to webinar recordings and handouts.



IDDSI

4 EXTREMELY THICK

IDDSI Audit Tool

Product or food tested			
If heated, heating method(s)			
Temperature when tested at:	°C time of service	°C 15 mins after serving	°C 30 mins after serving

Instructions

- Level 4 Extremely Thick critical tests include **Appearance + Fork Drip Test + Spoon Tilt Test** OR if these are not available Finger Test. Chopstick test not appropriate.
- The food item must pass or meet criteria for any row marked *

Tests: Suitable for drinks, soups, nutritional supplements, gravies, sauces, liquid medications	Meets criteria at		
	Time of service	15 mins after serving	30 mins after serving
Critical: Appearance			
* No lumps	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Critical: Fork Drip Test (metal dinner fork needed)			
* Food sits in a mound above the dinner fork (a small amount may form a tail below the dinner fork)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Does <u>not</u> drip or flow continuously through the dinner fork	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Critical: Spoon Tilt Test (teaspoon needed)			
* Holds shape on teaspoon	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Food slides off spoon with little food left on teaspoon (i.e. not sticky)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
May spread or slump slowly on a flat plate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alternative if Fork or Spoon not available: Finger Test			
* Hold a sample on fingers without it dripping through continuously	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Food slides smoothly and easily between fingers	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Food leaves noticeable residue on fingers	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Preferred but not critical: Fork Pressure Test			
Prongs of fork make clear pattern on surface OR food briefly retains dinner fork indentation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
OVERALL CONCLUSION: Does the sample meet the criteria for:			
Level 4 Extremely Thick?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

- Notes:**
- * Extremely Thick liquids need to be able to be put in the mouth and swallowed whole. No chewing and no bolus formation skills should be needed to eat this consistency
 - * Please see also <http://iddsi.org/framework/food-testing-methods/>.

Version: AuditTool4ExtremelyThick26Jun2020

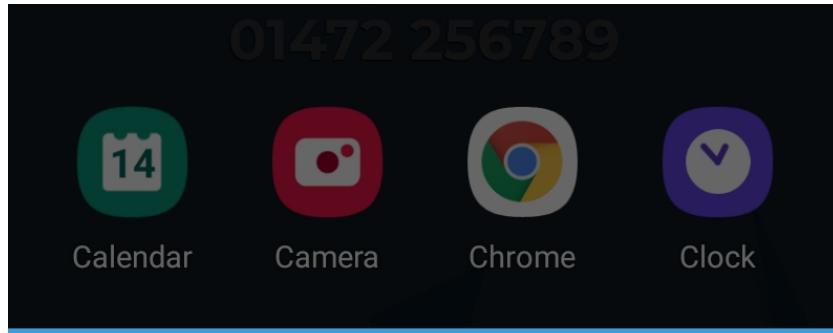


MINCED & MOIST

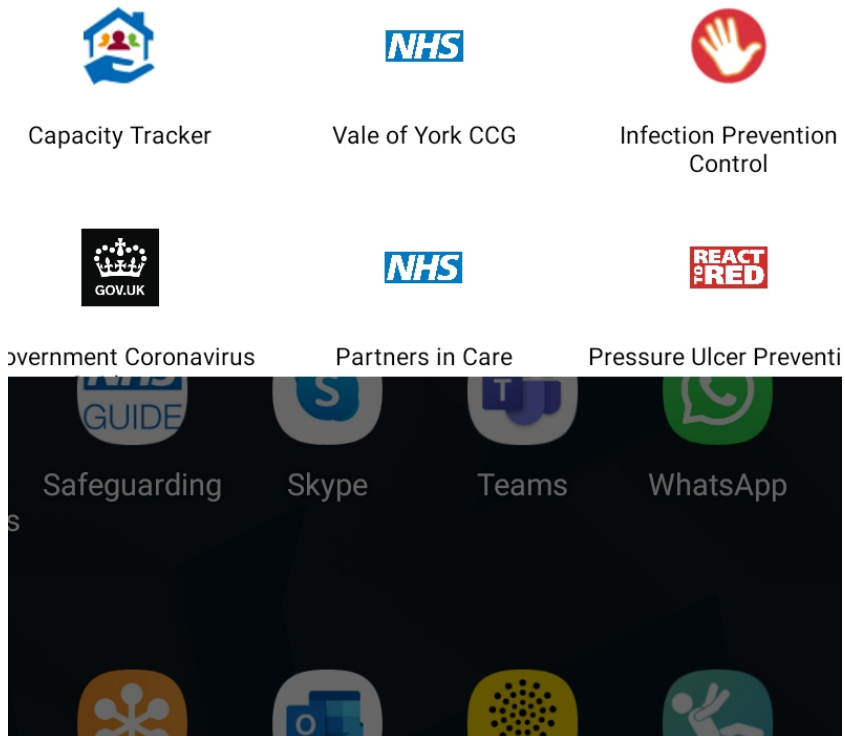


Description/characteristics	<ul style="list-style-type: none"> Can be eaten with a fork or spoon Could be eaten with chopsticks in some cases, if the individual has very good hand control Can be scooped and shaped (e.g. into a ball shape) on a plate Soft and moist with no separate thin liquid Small lumps visible within the food <ul style="list-style-type: none"> ➤ Paediatric, equal to or less than 2 mm width and no longer than 8mm in length ➤ Adult, equal to or less than 4mm width and no longer than 15mm in length Lumps are easy to squash with tongue
Physiological rationale for this level of thickness	<ul style="list-style-type: none"> Biting is not required Minimal chewing is required Tongue force alone can be used to separate the soft small particles in this texture Tongue force is required to move the bolus Pain or fatigue on chewing Missing teeth, poorly fitting dentures
<p>Although descriptions are provided, use IDDSI Testing methods to decide if the food meets IDDSI Level 5.</p> <p>TESTING METHODS</p> <p>See also IDDSI Testing Methods document or https://iddsi.org/framework/food-testing-methods/</p>	
Fork Pressure test	<ul style="list-style-type: none"> When pressed with a fork the particles should easily be separated between and come through the tines/prongs of a fork Can be easily mashed with little pressure from a fork [pressure should <u>not</u> make the thumb nail blanch to white]
Fork Drip test	<ul style="list-style-type: none"> When a sample is scooped with a fork it sits in a pile or can mound on the fork and does not easily or completely flow or fall through the tines/prongs of a fork
Spoon Tilt test	<ul style="list-style-type: none"> Cohesive enough to hold its shape on the spoon A full spoonful must slide/pour off/fall off the spoon if the spoon is tilted or turned sideways or shaken lightly; the sample should slide off easily with very little food left on the spoon; i.e. the sample should <u>not</u> be sticky A scooped mound may spread or slump very slightly on a plate
Where forks are not available Chopstick test	<ul style="list-style-type: none"> Chopsticks can be used to scoop or hold this texture if the sample is moist and cohesive <i>and</i> the person has very good hand control to use chopsticks

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IDDSI 2.0 | July, 2019



Web Shortcuts



Web Shortcuts

What Apps Do You Use In Your Service That Other Providers May Find Useful?