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| **Intervention:** | **Community Nursing** | **Treatment Room** | **Notes:** |
| **Bowel Care** | Yes | No | Includes administration of enemas and suppositories Routine bowel care / management – only accepted in exceptional circumstances and following clinical triage All patients must have been examined prior to referral Please ensure the patient has the medications available prior to the visit request with clear directions for use i.e. dose/frequency/route documented  |
| **Catheter Care**  | Yes | Yes | Male / female / suprapubic changes undertaken First change of a supra-pubic catheter must have occurred prior to this referralPlease ensure the patient has catheter equipment available prior to the visit / appointment request and arrangements for on-going supply route in place  |
| **Central venous access devices (CVADs)**  | Yes | Yes | Includes routine flush / chemotherapy pump disconnect / blood sampling A copy of the hospital protocol for care of the line should be included with the referral or available to view within the patient recordPlease ensure the patient has adequate supplies of consumable products available  |
| **Diabetic Annual Health Checks – Hull only**  | Yes | No | Undertaken for Hull GP registered patients only Only refer patients who are unable to attend their GP Practice for care Referrals will be accepted for patients who are in receipt of nursing care within a registered Nursing Home  |
| **Enteral Feeding – Hull**  | Yes | See note | Care and management of devices - including balloon water changes and tube changesTreatment Room - balloon water changes undertaken in exceptional circumstances onlyPlease ensure the patient has adequate supplies of consumable products available  |
| **Enteral Feeding – East Riding**  | Yes | See note | Care and management - balloon water changes only NO tube changesTreatment Room - balloon water changes undertaken in exceptional circumstances onlyPlease ensure the patient has adequate supplies of consumable products available |
| **Medication Administration**  | Yes | No  | Includes requests for insulin and low molecular weight heparin administration Other requests for subcutaneous and intramuscular injections / infusions e.g. B12 injections accepted following clinical triage Patient / family / carer should be encouraged to self-administer sub-cutaneous injections prior to referralPlease ensure the patient has the medications available prior to the visit and ensure the prescription provides clear directions for use i.e. dose/frequency/route - see embedded **REF 933 Transcribing within Adult Community Services V3.1** page 5, for information relating to GP/ prescribers responsibility to support transcribing  |
| **Observations**  | Yes  | No | Blood pressure recordings – referrals to the Community Nursing service for BP recordings should be a last resort and only made when all other options have been explored and exhausted, where possible the patient should be made aware that Blood Pressure testing is available:* At most pharmacies
* At GP surgery
* At an NHS Health Check appointment offered to adults aged 40 to 74
* In some workplaces
* At a health event
* Or they can also test their blood pressure at home using a home testing kit

Ref: Blood pressure test - NHS (www.nhs.uk)Blood glucose recording – only in exceptional circumstances following clinical triage for patients in receipt of insulin administration by Community Nursing Service  |
| **Palliative Care** | Yes | No | Includes palliative nursing care needs and support with some elements via telephone when appropriate Deteriorating palliative patient care including administration of medications for symptom management and syringe driver care and management  |
| **Indwelling Peritoneal and Pleural Catheters:**  | Yes  | Yes | Please ensure the patient has the consumable equipment available prior to the visit / appointment request and arrangements for on-going supply route in place |
| **Palliative Care – Verification of Death**  | Yes | n/a | Verification of Death only undertaken for the expected death of patients known to, and in receipt, of palliative care by the service Please ensure the patient has the medications available prior to the visit request with clear directions for use i.e. dose/frequency/route documented |
| **Lower vaginal swabs**  | Yes | No | Only refer patients in Residential Care homes  |
| **Symptomatic Bowel Cancer – two week wait pathway**  | Yes  | No | Community Nursing Service will take a blood sample and deliver a FIT bowel cancer screening kit - the patient will then need to arrange to have this returned to the surgery |
| **Venepuncture**  | Yes*see notes* | No*see notes re Goole* | Referrers are requested to refer only if patient is unable to leave their home for care Requests for ‘BCP’ will not be accepted – individual clinical test(s) must be specified Requests should not be made more than 4 weeks prior to the required due date Hull GP registered patients - the service DO NOT accept Annual / QOF requests for patients not registered with the serviceAll patients must be made aware of the referral request by the referrer and information relating to access issues/need to contact carer prior to visit must be shared at time of referral with the service  |
| **Wound Care**  | Yes  | Yes *see notes re ER post op care*  | For new patients with a wound, ulcer or break to the skin on the foot, below the ankle (malleolus) please make referral to the PODIATRY SERVICE and request a Lower Limb Pathway AssessmentFor new patients with a wound, ulcer or break to the skin on the leg, on or above the ankle (malleolus) follow NWCSP Identification & Immediate and Necessary Care Guidance – (see link: [Copy of lower limb summaries (nationalwoundcarestrategy.net](https://www.nationalwoundcarestrategy.net/wp-content/uploads/2024/05/NWCSP-Leg-Ulcer-Recommendations-summary.pdf) ) and make referral to the Community Nursing / Treatment Room service requesting a Lower Limb Pathway AssessmentPlease upload recent wound image to patient record or send with referral Services provide assessment / treatment / care and management of wounds requiring dressing including:Negative Pressure machine / dressing - ensure 2 weeks supply of consumable products are available prior to visit / appointment request Care / removal of post-operative drainsAssessment / care and management of vulnerable pressure areas with a pressure related skin injury evident Skin Tears –immediate first aid care and management must be provided prior to referral with signposting to UTC / Pharmacy / self -care, and the patient only advised to contact the service if the wound has not healed after 7 days. Post Operative wound care i.e. removal of Clips / Sutures with date to be provided by referrer and patient given advice and guidance regarding self-care of their wound prior to clip / suture removal - ensure 2 weeks supply of dressings is provided if required Notes re ER post op care:ER GP registered patients – post operative wound care is only provided by the Treatment Room service for patients registered with Eastgate Medical Group, Hornsea and The Park Surgery, Driffield  |