Community Health Services

District Nursing Referral Guidelines Summary

1. The aim of the District Nursing Service is to
   • Assess patients holistically and plan care to meet identified health and nursing needs. This may lead, with patient’s consent, to referrals to other health and social services, including voluntary agencies.
   • Provide care to meet the health and nursing needs identified; enable, support and teach patients and carers to achieve independence and self-care by sharing knowledge and skills and promoting health education.
   • Care for people in their own homes, prevent unnecessary hospital admissions and A & E attendance and ensure continuity of care, act as the patient's advocate and liaise with other professionals.
   • To support the patient to self manage through self management programmes where appropriate.

2. Referral criteria to the District Nursing Service
   The team accepts appropriate referrals from patients, other health professionals, social services, voluntary services, carers, friends, family and patients. Referrals from professionals must be by email or fax as set out below in section 5.

   Patients need to be adults, aged 16 and over and have a clear need for skilled nursing intervention.

   Home visits are for housebound patients.

   Patient consent should be obtained prior to referral being made.

3. What district nursing teams do
   Guys and St Thomas District nursing team offer the following services:-
   • Assessment, planning, implementing, monitoring and evaluating needs of the patients and their carers in their own homes. This may include actual and potential health and nursing problems. Patients may be acutely ill, terminally ill, chronically ill and in need of clinical care, advice and support
   • Assessment and prescribing of appropriate equipment to facilitate care in the patient's home and manage risks and prevent complications to patients, carers and staff
   • Assessment and treatment of continence. The service aims to provide a proactive focus on achieving continence rather than the management of incontinence.
   • Catheter care and management
   • Contributing to Chronic Disease Management, e.g. Diabetes, Coronary Heart Disease, Chronic Obstruction of Airway Disease, in partnership with GP practices and other professionals
   • Immunisation programs
   • Promoting self management, enablement, health promotion and education, teaching and support for self care particularly for patients with diabetes and other long term conditions.
   • Diagnose, treat and prescribe from the Nurse Formulary
   • Wound management, e.g. leg ulcers and surgical wounds
   • Tissue viability and pressure area care, with an emphasis on prevention
   • Rehabilitation following an episode of ill health
   • Medication, including intravenous antibiotics and management of central venous lines, and syringe drivers
   • Parental and enteral feeding
   • Ear Care
   • Managing and leading a team of qualified and ancillary staff
   • Teaching and assessing pre-registration students
   • Act as a resource, mentor and facilitator for pre and post registration students and staff placed within the District Nursing team.

4. What District Nurses don’t do
   When referring to the district nursing service it is important that the patient has an identifiable nursing need as outlined above. In order to avoid creating false expectations, or overloading the District Nursing service with inappropriate referrals, it is important to be explicit about what the District Nurses don’t do.
   • Visit non housebound patients
   • Check visits or social calls
   • Collect and deliver prescriptions
   • Emergency calls
• Help with routine personal hygiene, bathing, meals, housework, day care, respite care, getting up, going to bed or toileting. This should be referred directly to Social Services, as they may be considered as part of the package of care
• Nail cutting
• Annual checks for patients with diabetes who are not on the caseload
• Over 65 screening for patients not on the caseload for other reasons
• Routine Doppler assessments for patients without leg ulcers or with healed ulcers who are not already on the caseload.
• Patients requiring intermittent self catheterisation need to be able to perform this for themselves
• Flu immunisation for patients not on the district nursing caseload
• Cover for practice nurses sick leave, annual leave or vacancies.

5. How to Refer

i) GP referrals
The District Nursing referrals NHS Net email address gst-tr.SwkDNReferrals@nhs.net was launched for all Southwark GP practices on 15th July 2013 following a pilot to test the technology and processes to enable emailing of referrals. The Lambeth District Nursing NHS Net email address for referrals is gst-tr.ReferralsAdultCustomerService@nhs.net. The referral form for District Nursing is available in an EMIS web and vision compatible format. A copy of the referral form is appended to this guide.

ii) Hospital Referrals
Staff should verbally contact District Nursing teams and send either a faxed or email referral form via NHS Net to ensure smooth and safe transfers home. The District Nursing team should be informed, as soon as the need has been identified, preferably 48 hrs before discharge to enable the team to order and ensure delivery of any required equipment or supplies.

Before making a referral, hospital staff should check if the patient is self-caring or can receive help from carers, friends or relatives.

Up to date information must be given on the day of discharge via the discharge summary otherwise the referral will not be accepted. Dressings, medications, etc. should be given for at least 5 days to enable the GP or Nurse Prescribers to assess and issue prescriptions.

Patients requiring equipment need to be assessed by a trained health care professional. Home environment and equipment already in place should be taken into consideration, before referring for equipment. Ideally, family and carers should be involved in the assessment and the decision making process.

While in hospital, district nurses should be included in case conferences of patients with complex needs. The frequency of district nurse visits will be determined during the initial home visit and assessment.

6. Hours of Service
The service currently operates from 8am -11pm, every day of the year including bank holidays.

The service works in collaboration with the HomeWards, Enhanced Rapid Response Services and GSTT community partners in health and social care and the voluntary sector.

7. Service response
Following a referral the district nursing team will prioritise the visit using the following criteria:-

Urgent – Immediate access within 4 working hours: this could include end of life patients who want to be cared for at home; visits that can prevent an unnecessary attendance at A&E or unnecessary hospital admission and can be safely managed at home

Non-urgent – Access within 24–48 hours: patients in need of curative care e.g. acute and chronic wound management, post–operative patients, medications.

Routine – Access at a convenient time: for example bereavement visits, flu immunisations, blood tests and continence assessments.

Patients or carers will be contacted within 24 hours of receipt of referral and an appointment will be made for the first visit. For non-timed treatments, visit times are not specified however patients are given a time band.
A named nurse within the District Nursing Team will be allocated to each patient; however, patients can contact other members of the team, when required.

The district nurse will provide a summary update of any concerns about the patient to the GP practice at their monthly meetings or more frequently if required.

Other information

Zero tolerance policy
Guy’s & St Thomas’ Foundation Trust (GSTT) Community Service has a zero tolerance policy. Abuse to district nurses, either verbally or physically, by patients, carers or staff, will be addressed in accordance with the policy and may lead to services being withdrawn.

Concerns and complaints may be raised directly with the nurse manager, via quality alert or via the GSTT complaints department.

This document is part of the ambition to reshape the District Nursing Service in Lambeth and Southwark, to develop services that are innovative, responsive, flexible and tailored to the needs of the population and make a real difference in improving the health of local communities. The guidelines are a beginning to setting a framework to the service, and will develop and change in line with the GSTT’s objectives and the national agenda. District nurses will add new dimensions to their increasingly changing role, building on the framework set out in the Vision for District nursing.