

Livewell Southwest

**Operational Procedure for the Out of Hours  
District Nursing Service**

**Plymouth, South Hams and West Devon**

Version No.1

Review: April 2020

**Notice to staff using a paper copy of this guidance**

**The policies and procedures page of Intranet holds the most recent version of this guidance. Staff must ensure they are using the most recent guidance.**

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**Asset Number: 955**

## Reader Information

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<b>Author</b>	Sonia Green, Out of Hours Team manager
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<b>Name &amp; Job title</b>	Sonia Green, Out of Hours Team manager
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<b>References/sources of information</b>	Livewell Southwest District Nurse Service Specification Livewell Southwest District Nurse Operational Policy The Care Quality Commission Guidance and Regulations

	End of Life Strategy Royal Marsden Clinical Competencies European Pressure Ulcer Advisory Panel Guidelines on pressure ulcer prevention and management Transforming Community Services Code of Conduct and National Minimum training standards for Healthcare Support workers.
<b>Equality analysis checklist completed</b>	NA
<b>Is the Equality and Diversity Policy referenced</b>	NA
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<b>Associated documentation</b>	District Nurse Information Leaflet
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#### Document review history

Version no.	Type of change	Date	Originator of change	Description of change
0.1	New document	February 2017	Team Manager	New document
1	Minor changes	March 2017	Team Manager	Ratified

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# Operational Procedure for the Out of Hours District Nursing Service Plymouth, South Hams and West Devon

## 1 Introduction

- 1.1 The Out of Hours District Nursing Team provide a quality nursing service to adult patients across 260 square miles covering the areas of Plymouth, South Hams and West Devon, who are temporarily or permanently housebound within their own home or a care setting without Nursing provisions.

The Out of Hours District Nursing Service is a Community Nursing Team made up of Registered and Unregistered staff who work cohesively to provide nursing care within the community between the hours of 17:00 -08:00, 365 days per year.

## 2 Purpose

- 2.1 The purpose of this Operational Policy is to reflect the core business of the team, responsibilities, scope and remit. The policy exists to provide a comprehensive and clear framework for the operational procedures in relation to the Out Of Hours District Nursing (OOH DN) service. It works alongside the operational policy for District Nursing.

## 3 Duties & responsibilities

This policy was devised by the senior manager

- 3.1 The **Chief Executive** is ultimately responsible for the content of all policies, implementation and review.
- 3.2 The **Locality managers** will support and enable operational clinical team leads and Managers to fulfil their responsibilities and ensure the effective implementation of this policy within their speciality.
- 3.3 The **Modern Matron** will support the team managers to define and assure high standards of quality care, through their clinical presence and vision for the development of community services for all staff and those who use the services.
- 3.4 The **Team Manager** is responsible for ensuring that the development of local procedures / documentation doesn't duplicate work and that implementation is achievable.

3.5 **Clinical staff** have a responsibility for ensuring they have read, understood and adhere to local Protocols and Policies

## **4 Description and Scope of Service**

### **4.1 To Provide:**

A responsive service to meet the needs of people who are 18 and over and registered with a GP within the Western locality of NEW Devon CCG to remain in their own homes, maximise their independence and improve their health outcomes and quality of life.

Quality care for all adults referred to the service, working in an intergrated way with primary care and social care to deliver patinet centered care.

### **4.2 Footprint:**

The footprint of the Out of Hours District Nursing Service within the Western Locality of Northern Eastern Western Devon ( New Devon CCG) can be devided into three separate areas: Plymouth, South Hams and West Devon. We cover all of these areas between 17:00 – 08:00 hours.

### **4.3 Local Defined Outcomes**

Prevent people from dying prematurely.

Enhancing quality of life for people with long term conditions.

Helping people to recover from episodes of ill health or following injury.

Ensuring people have a positive experience of care.

Treating and caring for people in safe environment and protecting them from avoidavble harm.

### **4.4 Methods of Referral:**

- Professional referrals between 16:30 - 17:00 via Out of Hours Team professional line **01752 434427**.
- After 17:00 all referrals should be made via Devon Doctors professional line on **01392 822342**
- Patient/carer referrals via Devon Doctors patient line on **0845 2419130**

**All referrals will be assessed and triaged for priority in line with the referral criteria.**

All referrals made to the service will require:

- Name and Date of Birth
- Demographic details including telephone contact details
- NHS Number
- Registered GP details
- Clinical presentation /reason for referral.
- Any relevant associated risks
- Any further details in relation to property location within rural areas including accuracy of satellite navigation device route if applicable.
- A valid prescription chart if the administration of medication is required.

#### **4.5 Acceptance /Referral Criteria**

The OOH DN Service is available to any person over 18 registered with a GP within the Western Locality of Northern Eastern Western Devon Clinical Commissioning Group (New Devon CCG) who are defined as housebound and require DN care.

The definition of housebound pertains to:

- Those people with a long term condition that prevents them from leaving their home.
- Those people who are **medically** compromised in the short term for a prescribed period and are unable to leave their home.
- Those people who for medical reasons are unable to attend the surgery due to their health needs and/or clinical risk to the patient. For example immuno-compromised patients due to chemotherapy.
- Who requires a home visit from their GP.
- Who is temporarily unfit to travel.
- Who is medically unfit to travel.
- For whom a visit from the District Nursing Service is seen to be appropriate as assessed by the District Nurse.
- Who requires palliative or end of life care.
- Who requires treatment which cannot be appropriately carried out in a surgery setting (e.g. bowel management).
- Those patients who are declared housebound due to reduced Out of Hours services will be assessed individually for priority and if required will be directed to alternative services within core working hours.

**Exclusion criteria:**

- < 18 years
- Any patients who do not fulfil the referral criteria
- Emergency responses e.g. 999 or 111.
- Non housebound, (those patients who declare the state of being Housebound due to reduced Out of Hours support services will be individually assessed and triaged according to priority or directed to alternative services within core working hours.)
- Patients requiring Intravenous Therapy at home will be referred to the Acute Care at Home Service (AC@H).
- Lifelong administration of non nursing medication (e.g Eye drops).
- Collection and delivery of prescriptions.
- People who display abusive violent threatening behaviour or have been excluded via the red card scheme.
- Personal care referrals due to reduced Services.

**5. Response times and details of prioritisation:**

All referrals will be triaged and assessed in line with response time guidance. Due to the significant expanse of area covered Out of Hours these are only guided recommendations. If response times exceed the guidance, clear communication and liaison with the patient must occur.

- Urgent – e.g. a terminally ill patient in pain or a patient in pain with a blocked catheter. All urgent referrals will be triaged by a Registered Practitioner and allocated in line with priority. These referrals will be triaged by the receiving Out of Hours Nurse within 1-2 hours of receipt of referral. Visited within 3-4 hours.
- Non-urgent – e.g. dressing renewal, bowel care, and non-urgent catheter care. Triaged by the receiving Out of Hours Nurse within 1-2 hours of receipt of referral. Visited within 4-6 hours.
- Routine – Routine visits for Out Of Hours administration of medication which require administration by a Registered Nurse will be accepted for post-operative/short term administration.

**6. Establishment**

The Team consists of experienced Community Nurses and Health Care Assistants who work jointly throughout the Out of Hours shifts. Out of Hours medical support is provided by the Out of Hours GP Service within Devon Doctors. Follow up referrals to services will be made by the visiting Community Nurse if required.



## **6.1 Patient Documentation**

The Out of Hours Service is working in line with the Livewell development into paper light clinical notes service. All patients will be registered on the Electronic operating system. The visiting clinicians will be required to input the outcome of clinical treatment during the requested visit onto a hand held device which holds clinical notes.

Patients visited within the South Hams and West Devon Areas will continue to have hand held notes until the introduction of the Electronic operating system within these areas. In these areas the clinician will be required to complete the paper copy and electronic copy recording clinical details.

## **6.2 Audit and feedback**

In accordance with Government and Organisation expectations, all patients (or their relative/carers) will be asked for their feedback on the standard of care received via a short questionnaire and/or telephone feedback. Allowing the opportunity for confidential feedback. This will assist the service in improving standards of care delivery and service.

## **7 Training implications**

All staff are required to attend mandatory training and essential training as deemed necessary by Livewell Southwest. The essential training required will be identified at induction depending on band and skills required. All staff are involved in a yearly appraisal process whereby a PDP (Personal Development Plan) is identified which may include some specific training issue.

All staff will be appropriately skilled, experienced and competent in their designated roles. Essential training identified for clinical staff within District Nursing. (This is detailed in the District Nursing Standard operating policy.)

All staff are required to undertake supervision as per LSW policy.

## **8 Monitoring compliance**

The following performance indicators are required to be produced on a monthly basis as part of Livewell Southwest's performance report.

- Number of patients referred to service
- % of referrals responded to within the specified timescales.

- QueSTT monitoring
- Peer reviews
- In accordance with Government and Organisation expectations, Services users are involved in all aspects of their care, along with carers as appropriate, and are assisted to access resources as required. Services Users (or their relative/carers) will be asked for their feedback on the standard of care received via a short questionnaire and/or telephone feedback. Allowing the opportunity for confidential feedback. This is completed on discharge and assists the service in improving standards of care delivery and service.
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- The OOH manager will attend monthly performance reviews with locality manager.

## 9. Information Governance

The Out of Hours Team will adhere to the Livewell Southwest policy on confidentiality (2016) and all data protection legislation in accordance with The Data Protection Act (1998).

**All policies are required to be electronically signed by the Lead Director. Proof of the electronic signature is stored in the policies database.**

**The Lead Director approves this document and any attached appendices. For operational policies this will be the Locality Manager.**

**The Executive signature is subject to the understanding that the policy owner has followed the organisation process for policy Ratification.**

Signed: Michelle Thomas, Director of Operations

Date: 10<sup>th</sup> May 2017

## Appendix A

### Your electronic patient record and the sharing of information



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