

# District Nursing Service Summary





## **DISTRICT NURSING SERVICE SUMMARY (v2)**

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| Previous Version(s)         | v.1 - 'Access to and Referral Criteria – Adult Community Nursing |
|                             | Services' date not known   |
| Changes made since previous | Information added on:  |
| version                     | Workload   |
|                             | Community nursing structure                                      |
|                             | Geographical areas   |
|                             | Monitoring performance   |
|                             |  |
|                             | Changes made to referral categories                              |
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#### SERVICE PROVISION

District Nurses are registered nurses who have completed a Community Specialist Practitioner graduate course, and are responsible for overseeing nursing teams who deliver care in a variety of community settings. Each team consists of District Nurses, Senior Registered Nurses, Registered Nurses, and Senior Health Care Assistants who work in partnership to ensure the best possible care for our patients. We are committed to providing a high standard of professional care to individuals within the community setting, the care and support that we provide helps to prevent hospital admissions and allows for speedier discharges from hospital. We holistically assess and plan appropriate care/treatment in partnership with our patients. Our care is patient centred, researched and evidence based, with the emphasis on empowering individuals to self-care to the best of their abilities.

The District Nurses work in collaboration with GPs, Allied Health Professionals, Specialist Nurses, Long Term Condition Coordinators, Hospice Care, and Social Work teams, to deliver complex care in the patient's home environment. Our nurses also work with residential care homes, agencies, and the voluntary sector.

## **Hours of Work**

The service operates from 08:30 to 17:00hrs, every day. This includes weekends and Bank Holidays. Outside of these hours patients are advised to contact the Manx Emergency Doctor Service or the Ambulance Service.

#### Workload

The patients within each District Nursing team are divided into caseloads, which vary considerably in size. Due to the nature of our work, caseload numbers are continually fluctuating. Currently, all our caseloads remain under 100 per Whole Time Equivalent caseload holders.

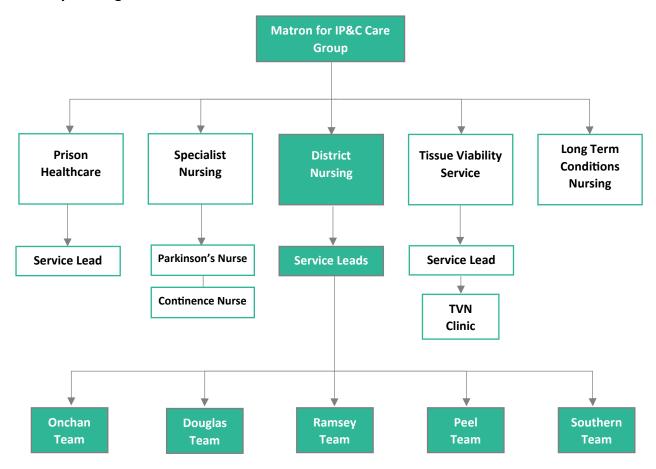


On an average day, a member of the District Nursing team will visit between 4 and 9 patients, however this depends on the needs of the patients and the complexity of the care required. Visits may vary from a 15 minute visit to carry out a venepuncture, to a 1.5 hour visit for bowel care.

The majority of visits are undertaken by lone practitioners, however, two nurses will be allocated to patients if there is any risk to staff or patient wellbeing. This may include (but is not exclusive to):

- Providing care to bariatric patients
- Visiting individuals with a known propensity to violence
- Carrying out complex dressings
- The administration of controlled drugs
- Moving and handling requirements

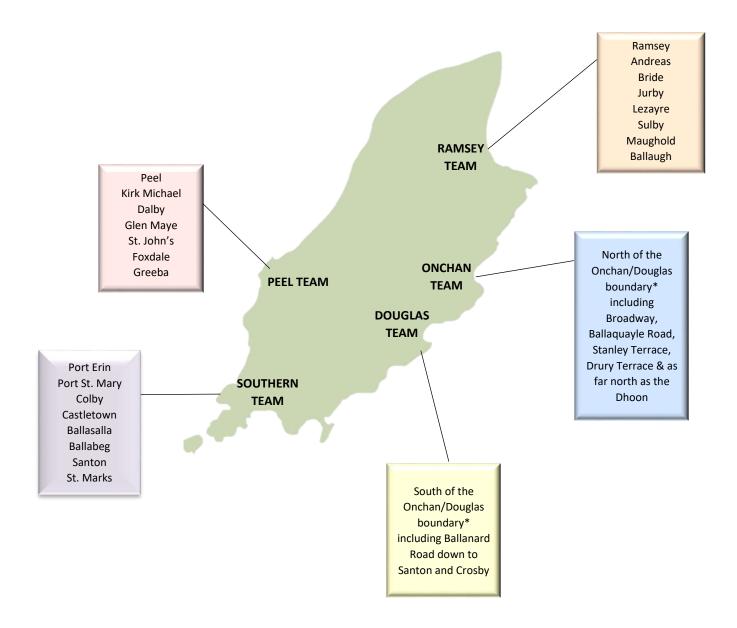
## **Community Nursing Structure**



# **District Nursing Teams and their Geographical Areas**

There are 5 District Nursing Teams across the Isle of Man. The teams work geographically so patients will be visited by the team who covers the area where the patient lives. The map below shows each team and the geographical area that they cover.





<sup>\*</sup>The boundary between the Onchan and Douglas teams is from Broadway up to Ballaquayle Road and out along Ballanard Road.

# **STAFF SAFETY**

All new staff to the service undergo a full induction or preceptorship package to ensure they are supported to become confident and competent within their role.

The protection and safety of our nursing teams is of paramount importance to us. We are lone workers, therefore it is vital that we are provided with any information regarding potential or actual safety



concerns. If a community worker might be exposed to violence, aggression, dangerous weapons or animals, or if there is an environmental concern, it is expected that the team would be made aware of this by the referrer prior to visiting. To support this, we have an SOP for violence and aggression which incorporates lone working and risk assessing.

#### **SCOPE**

# **District Nursing Duties**

- Administration of insulin and monitoring of blood sugars
- · Continence promotion, including the assessment and management of incontinence
- Care of indwelling urethral or suprapubic catheters
- Administration or supervision of injections
- Palliative care
- Syringe drivers for end-of-life care
- Leg ulcer care and management
- Wound management and pressure area care
- Removal of sutures, clips, or staples for housebound patients
- Nutritional assessments, and support with parenteral nutrition for patients with special dietary needs
- Venepuncture
- Intravenous Therapy (including anti-biotics) depending if the team has the capacity
- Hickman and PICC line care

When our nurses visit patients in their homes, they can advise on a number of issues, including:

- Diet, exercise, and lifestyle changes to help weight control and promote wellbeing
- The use of (or need for) equipment to promote independence around the home
- Long term conditions such as diabetes or chronic airways disease
- Other services which may be able to provide support in the community

## **REFERRAL CRITERIA**

Referrals to the District Nursing service can be made by:

- The patient
- Carers or next of kin (with the patient's consent)
- GPs and other health professionals

To qualify for a visit, patients must be:

 Aged 16 or over and have an identified nursing need which requires intervention or advice from a Registered Nurse



- Housebound due to illness, surgery\*, or disability
- In a community setting (e.g., patient's home, sheltered accommodation or care homes)

District Nurses do **not** provide basic care (e.g., washing and dressing) or assist with shopping or meal preparation etc.

| Referral Category   | Target               |
|---|----------------------|
| URGENT  | Seen within 4 hours  |
| Blocked catheter  | between 08:30 and    |
| • Enema administration  | 17:00                |
| <ul> <li>End of Life symptoms/medication issues</li> </ul>                                  |                      |
| TIME SPECIFIC   | As specified by      |
| • Dressings   | referrer             |
| • Injections  |                      |
| Venepuncture  |                      |
| • IV Antibiotics  |                      |
| PRIORITY  | Seen within 24 to 48 |
| Palliative care   | hours                |
| • End of life care  |                      |
| NON-URGENT  | Seen within one week |
| <ul> <li>Long term support for patients with chronic or degenerative disease</li> </ul>     | of referral          |
| Care of Hickman/PICC lines  |                      |
| <ul> <li>Holistic nursing assessment</li> </ul>   |                      |
| <ul> <li>Assessment for specialist equipment</li> </ul>                                     |                      |
| <ul> <li>Wound management</li> </ul>  |                      |
| <ul> <li>Promotion of continence and assessment of incontinence</li> </ul>                  |                      |
| <ul> <li>Health promotion, advice and support</li> </ul>                                    |                      |
| <ul> <li>Promotion of self-care through education and empowerment of individuals</li> </ul> |                      |
| and their carers  |                      |

The referral process to the District Nursing Service is currently undergoing change due to the roll out of the wellbeing partnerships across the island. Eventually, all referrals to the service will be sent via the wellbeing partnerships using a generic referral form as part of integrated care.

## **MONITORING PERFORMANCE**

Regular audits are undertaken within the District Nursing Teams to ensure standards are being met and maintained. These include Infection Prevention and Control, Hand Hygiene, Record Keeping and Nursing Bag audits.

As a service, we welcome any feedback from patients/carers. We regularly distribute patient feedback forms and encourage these to be completed. Any complaints made to the service are fully investigated and dealt with in a timely manner. The service is constantly striving to improve our practices and as such, we

<sup>\*</sup>Post-operative patients may be asked to attend services in other health care settings once their mobility improves.



view any incidents or complaints as an opportunity to learn from mistakes, whilst taking the appropriate action to prevent recurrences and initiate change.

Care and Quality Visits are carried out in all of the District Nursing Teams.

Regular staff Personal Development Plan/Review Meetings are undertaken for all members of the District Nursing teams. As part of this process we encourage peer reviews to learn from colleagues and improve practice.

Staff are encouraged to report any incidents via the DATIX system, which are then investigated by the appropriate area. The outcome of any incident investigations is fed back to the staff within our team leader meetings.

#### SERVICE DEVELOPMENT

Staff within the service are allocated time to carry out their mandatory training, which is recorded and monitored. Staff are encouraged and supported to carry out post registration study sessions/days/courses which are thought to be of benefit to them within their role. The specialist practice programme provides an opportunity for nurses to become qualified District Nurses.

The service recognises our vital role in supporting students to develop and flourish. Student nurses are welcomed into our teams as part of their pre-registration programme to provide them with experience of nursing within the community. We provide mentorship and assessment, create an environment which is conducive to learning, seek out opportunities, and ensure students are fully supported for the duration of their placement to ensure they have the best possible experience.

We have a comprehensive preceptorship package which is very highly regarded with excellent feedback from those who have gone through the process. We welcome newly qualified nurses alongside those more experienced nurses to join our supportive, proactive and welcoming team.

People are living longer, often with several comorbidities, and the care required to enable them to live at home or die in their place of choice, is increasingly complex. This, along with the push for more services to be transferred into the community, will likely shape the future of community nursing and may lead to an expansion of the District Nursing service in the future.