SOUTH TEES HOSPITALS NHS FOUNDATION TRUST

Colorectal and Stoma Care Specialist Nursing Service

Operational Policy
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1. CONTACT DETAILS;

JAMES COOK UNIVERSITY HOSPITAL:

Inpatient service
Sarah Carroll, Tracey Pugh, Angela Stanley & Joanna Casson
Department of Colorectal Surgery
C/O Ward 7, JCUH
Marton Road
Middlesbrough
TS4 3BW
HOURS OF WORK: 8am – 4pm Monday to Friday
Telephone: 01642 854847 (Direct Line). Internal Extension: 54847
Fax: 01642 854847
Mobile phone available 8am-4pm via switchboard 01642 850850

COMMUNITY BASED STOMA CARE:

Middlesbrough, Redcar and East Cleveland Area
Specialist Nurses – Stoma Care Carole Younger and Julie Morrisroe
Stoma Care Advisory Service
Integrated Medical Care Centre
Community Nursing
East Cleveland Locality
South Tees Hospitals NHS Foundation Trust
Guisborough Primary Care Hospital
66 Northgate
Guisborough
TS14 6HZ

Telephone: 01287 284113
Fax: 01287 284256

HOURS OF WORK:

Monday to Friday
8.30 am to 4.30 pm
Out of office hours, a message can be left on the answer phone, contact GP practice or 111.
FRIARAGE HOSPITAL:
Inpatient service and community stoma care
Judith Smith and Mary Hugill
Colorectal / Stoma Office
MDHU
Friarage Hospital
Bullamoor Road
Northallerton
DL6 2JG

Telephone: 01609 764620 (direct line). Internal Extension: 64620
Fax: 01609 764720
Bleep: 119.
Mobile phone available 8am-4pm via switchboard 01609 779911

HOURS OF WORK:
Monday to Friday
8am to 4pm

OUT OF HOURS ADVICE
Out of office hours, a message can be left on the answer phones or staff on
ward 7 (JCUH) or Allerton (Friarage) can give advice.
2. INTRODUCTION
This operational policy is intended as a guide to the functioning of the specialist colorectal and stoma care nursing service within South Tees Hospitals NHS Foundation Trust. This service is accountable to the Lead Nurse - Surgery and Lead Cancer Nurse/Consultant Nurse – Cancer (In patient care) and the Community Clinical Leader (Community care).

In view of the breadth and scope of the colorectal and stoma care nursing service and its evolving nature, this operational policy will be reviewed and modified to meet developments within the Trust and the colorectal and stoma care services.

3. ROLE SUMMARY
The roles undertaken by the members of the colorectal and stoma care specialist nursing team are many and varied, including direct and indirect care activities, however some of the main roles are:

- Using and applying technical knowledge of colorectal disease management to oversee and co-ordinate services, personalise the patients pathway to meet the complex information and support needs of these patients and their families.
- To provide timely expert stoma care management advice and knowledge and to ensure all patients, relatives, carers and staff have ready access to expert nursing support and advice.
- Acting as a key worker for the patient who is an accessible professional within the Multi-Disciplinary Team MDT, who can undertake active case management to ensure patients are guided through the complex systems of health care provision, safely, whilst ensuring a quality service across the pathway.
- To aim to alleviate the psychosocial issues associated with colorectal diseases including cancer and stoma formation, providing rescue work, symptom management and referring to other agencies/services as appropriate.
• Using evidence based knowledge and insight from the patient group experience to ensure that the service remains responsive to patient need, enhancing recovery and delivering care flexibly, supporting patients in choices around treatment and care as well as promoting and enabling self-management.

4. SERVICE PHILOSOPHY
The colorectal and stoma care specialist nursing team aims to provide a high quality, evidence based and effective service for all colorectal patients, being an accessible point of contact for patients, relatives, and other clinical colleagues both within the trust and the wider healthcare community. The team will endeavour to facilitate a positive and holistic healthcare experience at all steps within the colorectal disease trajectory.

5. OVERVIEW OF SERVICE
The colorectal and stoma care specialist nursing service within South Tees Hospitals NHS Foundation Trust is available across both sites of, James Cook University Hospital, Middlesbrough and The Friarage Hospital, Northallerton, this includes acute and community stoma care provision. It provides both cancer and benign colorectal services for the North of England Cancer Network - South (population of over 800,000) and further afield covering the whole of the North of England (population of over 1.5 million) for regional spinal injuries, anal cancer and gynaecology patients requiring colorectal surgery as part of their care. The service also provides stoma care training in community hospitals, GP practices, medicine management, schools, residential and nursing homes and care agencies.
6. SERVICE LEADS
Due to the wide scope of the service provision the following nurses take the lead on service development and user issues for the following areas:

**James Cook University Hospital:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sister Sarah Carroll</td>
<td>Anal and rectal cancer patients</td>
<td>MDT patient and users issues, Sponsorship management</td>
</tr>
<tr>
<td>Specialist Nurse-Colorectal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sister Tracey Pugh</td>
<td>Colon cancer patients</td>
<td>Cancer follow-up patients and survivorship service development, Colorectal cancer support group</td>
</tr>
<tr>
<td>Specialist Nurse-Colorectal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Angela Stanley/Joanna Casson</td>
<td>Enhanced recovery pathway patients</td>
<td>Complex benign colorectal disease patients undergoing surgery including ileoanal pouch surgery, Stoma care - staff training and link worker programme, Ward based stoma care</td>
</tr>
<tr>
<td>Colorectal Sisters</td>
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**Community Team - Middlesbrough, Redcar and East Cleveland Area**

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
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</thead>
<tbody>
<tr>
<td>Sister Carole Younger &amp;</td>
<td>Management of community stoma care</td>
</tr>
<tr>
<td>Sister Julie Morrisroe</td>
<td>provision for Middlesbrough, Redcar and East Cleveland locality</td>
</tr>
<tr>
<td>Specialist Nurse–Stoma care</td>
<td>East Cleveland locality</td>
</tr>
</tbody>
</table>
Friarage Hospital – Northallerton & Hambleton & Richmondshire.

**Sister Judith Smith**  
Colorectal cancer patients

**Specialist Nurse-Colorectal**  
Cancer follow-up patients and survivorship service development  
Benign colorectal disease patients undergoing surgery  
Management of acute and community stoma care provision for Hambleton and Richmondshire locality

**Mary Hugill – Colorectal Sister:**  
Stoma care - staff training and link worker programme  
Acute and community stoma care
7. REFERRAL POLICY

Criteria:

- All patients who have a diagnosis or a suspected diagnosis of colorectal cancer.
- Patients with inflammatory bowel disease who require surgical intervention.
- Patients who require an appliance for the management of an enterocutaneous fistula.
- Any stoma patients requiring assessment or advice.
- Health care professional, family, carers and self-referrals for any of the patient groups as above.

Methods of referral:

- Referrals will be accepted from any member of the multidisciplinary team in both primary and secondary care via telephone, fax or referral letter. The referrals will then be assessed and triaged as appropriate.
- Direct access via telephone, pager, referral letter or faxed request for consultation.
- If direct patient contact is required, in most instances it is necessary for the patient to be aware of their diagnosis or suspected cancer diagnosis.
- Patients and relatives can also self-refer for advice and/or support via the direct telephone lines.
8. NEW CANCER PATIENTS
New colorectal or anal cancer patients are required to have a specialist nurse in attendance when they are initially told their diagnosis (NICE 2004). Outside of the team’s usual supported clinics, prior notice is required so as to facilitate meeting this requirement. If not achievable the specialist nurse will contact the patient as soon as possible after the consultation, either by telephone or face to face if they are in the hospital.
If a member of the team is not available for such a consultation, it is the responsibility of the person informing the patient of their diagnosis to inform the patients GP within 24 hours of the "serious diagnosis" (DOH 2004). This must be carried out so as to facilitate communication between primary and secondary care, ensuring the patient is supported appropriately. This is a peer review measure.

9. STOMA PATIENTS
Stoma patients should where at all possible be referred prior to any surgery where stoma formation is a possibility. This ensures they receive appropriate counselling and pre-operative stoma site marking can be done to avoid this group of patients being exposed to the higher risk of post-operative complications related to a badly sited stoma as well as the risk of the psychological sequela of difficulty learning self-management and delayed rehabilitation. (Rust 2009 & Black 2000)

Any established stoma patients not under the care of a surgeon during their admission at South Tees Hospitals NHS Foundation Trust who requires assessment, advice or support with a problematic stoma can be reviewed by the hospital based team. They need to be formally referred to the specialist nursing team with a request for consultation form faxed to appropriate team. The team will endeavour to visit the patient within 2 working days of the referral. Referral can be discussed with the appropriate team via telephone or bleep, but will require a formal request for consultation if a visit is required. Patients requiring follow up or review in the community should be referred to the team covering the appropriate locality via telephone, fax or referral letter.
Patients who have had a new stoma formed will be referred to the community based Stoma Advisory service as part of discharge planning. A visit to the place of discharge will be arranged via appointment within 7 days of discharge from hospital as per South Tees community protocol, with further follow up home visits as assessment and appointments to attend the patient’s local stoma clinic thereafter.

Referrals for these clinics are also accepted from established patients, family, carers, GPs, and other health professionals.

**10. STOMA CARE CLINICS**

Following stoma formation, it is important for patients to be supported in managing their stoma care, adapting to life as an ostomist, accepting their altered body image and recognising and resolving any problems which might occur (Breckman 2005).

Clinic visits are offered to discuss life style issues with a stoma, offer advice to manage problematic stomas and provide psychological support. The clinic gives an opportunity to review the stoma, the appliances used and to provide education on new appliances. The stoma care nurse will also be able to liaise with other agencies and health care professionals on the patient’s behalf, including social services, district nurses and voluntary organisations and advise on prescription requirements.

Middlesbrough and Redcar And Cleveland Community service:

**Clinics:**

- Cleveland Health Centre, Middlesbrough: Every Wednesday morning 9 – 12 noon
- Redcar Primary Care Hospital: Every Friday morning 9 -12 noon

Appointments for the above community stoma clinics can be made by calling 01287 284113
Hambleton and Richmondshire Community service:

**Clinics:**
Scott Suite Friarage Hospital:
Every 1st and 3rd Monday of each month 9 – 12 noon

Stokesley Health Centre
On the 2nd Tuesday of each month 1 -2pm

Appointments for the above clinics can be made by calling 01609 764620

**Please Note:** Community clinics are run on an appointments system, please contact the numbers as above to book an appointment.
11. JCUH PRE-ADMISSION CLINIC

This is provided on a weekly basis in a formal nurse led pre-operative counselling clinic, which runs from 10.30-4.30 on a Thursday. It is based on the surgical floor so as to facilitate patient orientation to the ward environment and staff as a part of the appointment. Appointment slots are 45 minutes long and includes nutritional assessment by the dietician, physiotherapy advise, enhanced recovery information and stoma counselling and teaching as appropriate. Most patients are seen the week before their surgery and appointments are booked by the specialist nurses or by calling extension 54847. Patients can have more than one appointment if required and patients for complex surgery for example ileo-anal pouch surgery or exenteration patients will usually be given a double slot to allow thorough discussion of the surgery so as to facilitate informed consent and ensure the patient is prepared for the major surgery.

Counselling is also provided across the 2 sites in other settings such as outpatient clinics, pre assessment clinic, telephone consultations, and nurse led clinics or by arrangement to meet patient needs on an ad hoc basis.
12. RECORD KEEPING/DATA COLLECTION
The specialist nurses use the Infoflex system and paper records to track patients and record workload and activity. The information collected is used for the purpose of audit and performance evaluation. Formal inpatient consultations are recorded in the medical records. An annual report documenting service activity, workload, service achievements and areas for future service development is produced and circulated to all stakeholders.

13. EDUCATION
The colorectal and stoma care specialist nurses play a vital role in providing information and education for patients and their families/carers. The colorectal and stoma care specialist nurses work in collaboration with other MDT colleagues to provide training opportunities either on a one to one basis or with the provision of study events for nursing and other healthcare staff.
14. REFERENCES.
NICE, (2004) Improving Supportive and Palliative Care for Adults with Cancer
Breckman, B (2005) Stoma Care and Rehabilitation, Churchill Livingstone, Edinburgh