

Stoma Care

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How to ensure prescribed stoma care products are clinically appropriate and cost effective in order to stabilise spend.



Types of stoma:

• Ileostomy – small bowel stoma, passes porridge like consistency of stool. Drainable pouch, empties 4-5 times daily, changes every 2-3 days.

• Colostomy – large bowel stoma, passes 'normal' stool 1-3 times/day. Closed pouch used, changed 1-3 times/day.

Urostomy (ileal conduit) – constructed using small bowel, passes urine.
 Pouch emptied as required, changed every 2-3 days. Night drainage bag usually used.

Accessories:

Numerous accessories are available:















Issues:

Wastage











- Inappropriate switching of products
- Inappropriate use of products
- AURs
- DAC involvement

Appliance User Reviews (AURs):

- AURs can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. The
 specialist nurse CANNOT be employed by the NHS, company nurses are able to carry out AURs.
- A fee of £28 is payable for an Appliance Use Review conducted at premises managed by the pharmacy or appliance contractor. A fee of £54 is payable for a review conducted at the user's home.
- Nationally there were 14,064 AURs conducted in ostomates homes in the UK 2018 with an estimated cost of £2.2million while there were 12,314 AURs conducted in premises with an estimated cost of £340,000.
- The SCN's in all 3 areas carry out annual reviews either by telephone or face to face, in the acute Trust or the GP surgery meaning there is no clinical need for 3rd parties to be carrying out costly AUR's with little knowledge of the patient they are reviewing.

Dispensing Appliance Contractors (DACs):

- DACs provide a very good service to patients regarding delivery of products.
- The majority of DACs are affiliated to a manufacturer.
- DACs often have their own company nurses who will visit patients/talk over the phone if patients mention they have issues.

Cost:

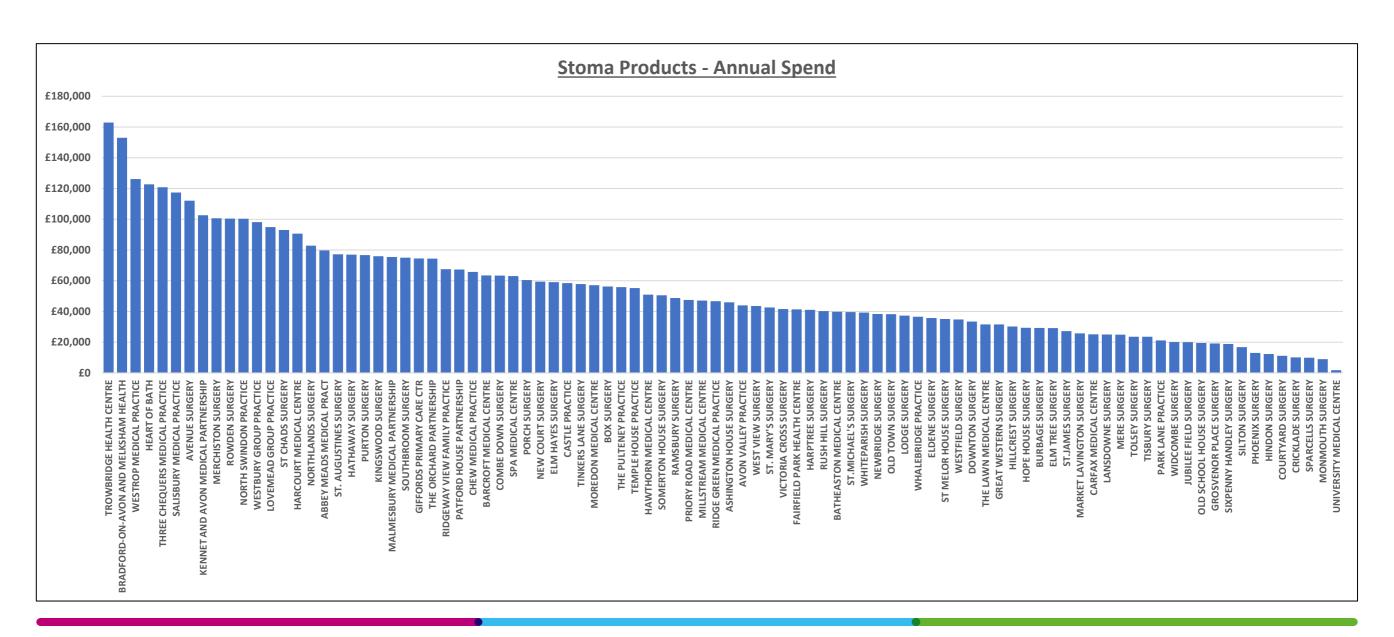
- Wide range of cost dependent on make and type of pouch:
- Colostomy and ileostomy pouches typically £100 per box of 30 flat pouches.
- Urostomy pouches typically £140 per box of 30 flat pouches
- Convexity pouches typically £50 per box of 10 pouches
- Accessories:
- Medical adhesive remover sprays: £5.10 £10.01 per 50ml bottle
- Medical adhesive remover wipes: £8.50 £16.59 per 30 wipes
- Barrier wipes: £12.95 £26.43 per 30 wipes

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Spend:

- Estimated to be 176,824 people living with a stoma in the UK
- 2020 total stoma spend in England was £244,380,573.67
- BSW CCG annual spend £4,626,440.37
- Each year the number of new stomas created is:
- GWH 200 220
- RUH 280 300
- SFT 140-160
- NB.Not all are permanent

Annual spend per surgery 2020:



Higher spend areas:

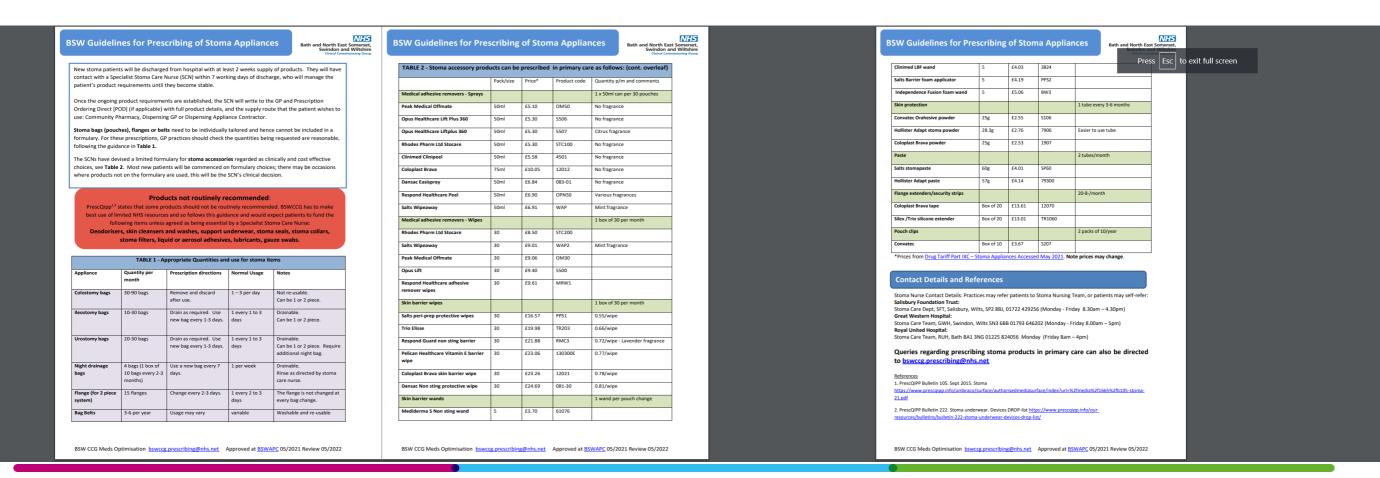
Areas highlighted are those areas where savings can potentially be made:

Stoma Appliances	£4,626,440.37
Adhesive (Pastes/Sprays/Solutions)	£956.53
Adhesive Discs/Rings/Pads/Plasters	£118,602.23
Adhesive Removers (Sprays/Liquids/Wipes)	£237,596.03
Bag Closures	£975.68
Bag Covers	£2,254.10
Belts	£56,665.84
Colostomy Bags	£1,442,818.90
Deodorants	£18,485.78
Discharge Solidifying Agents	£26,694.33
Filters/Bridges	£5,844.12
Ileostomy Bags	£1,405,278.02
Pressure Plates/Shields	£666.10
Skin Fillers And Protectives	£358,740.63
Skin Protectors	£176,522.25
Stoma Caps/Dressings	£20,175.67
Tubing & Accessories	£5,731.58
Two Piece Ostomy Systems	£361,930.55
Urostomy Bags	£386,502.01
Grand Total	£4,626,440.37

BSW CCG stoma care formulary:

Screen shot of formulary

https://prescribing.bswccg.nhs.uk/?wpdmdl=8549



Items which should not be prescribed except in exceptional circumstances:

- Deodorants, air fresheners purchased in retail outlets are sufficient in most cases.
- Underwear should not be prescribed but can be purchased direct from the manufacturers. Level 2 support wear if recommended by SCN can be prescribed – 3 pairs/year.
- Filters are integrated into the stoma appliances and therefore bridges are not required.
- Bag covers should not be prescribed, can be purchased.
- Skin cleansers, soaps or wipes are not clinically required and should not be prescribed.

POD surgeries:

- SCN recommendations should be emailed to the surgery for scanning onto patients notes only, and to Jackie Morgan (POD Appliance Assistant) who will action the request.
- Requests for appliance prescriptions should only be from the patient or nominated carer.
- 3rd party/DAC requests should not be actioned, a template letter should be sent to the DAC explaining the POD process patient only ordering.
- Prescription will then be issued by the POD and sent to the DAC for delivery.
- Patients should be discouraged from asking the DACs to request on their behalf, letter/phone call may be required to re-iterate the purpose of POD.

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Non POD surgeries:

- Recommendations emailed from SCN should be added to monthly repeat prescription.
- Ideally patients should be encouraged to request prescriptions and not 3rd party/DACs.
- If DACs are requesting on behalf of patients, any deviations from what is on repeat should not be issued refer to BSW SCN or local SCN.

Guidelines for prescribing appliances:

Ensuring that patients are prescribed appropriate appliances and accessories can greatly improve their quality of life. Liaising with the Specialist Nurses will help ensure that wasteful prescribing does not happen and that all your patients are receiving the appropriate products to manage their stoma.

Continence and stoma appliances are usually provided to patients by a prescription written by their GP or a nurse prescriber, which can then be dispensed by either:

- A Dispensing Appliance Contractor (DAC)
- · A community pharmacy contractor
- A dispensing doctor

Prescribing, Ordering and Review of Stoma and Continence related prescription products

Prescribing

All recommendations/prescriptions for stoma and continence products should be in line with locally agreed formularies or those recommended by specialists.

The frequency and quantities on a prescription should be guided by any local specialist advice.

Prescriptions should be issued on a separate form from the rest of the patients medication to avoid dispensing problems if a patient chooses to use a DAC and not a pharmacy contractor.

Patients should be made aware that they have a choice as to where their prescription can be dispensed.

Where a 3rd party dispensing supplier is used, patients should be made aware that the supplier is a non-NHS organisation and provide informed consent for their personal data to be shared.

Requests for new products should only be accepted from the appropriate prescriber and not directly from patients or from DACs.

Note: Although patients are able to request samples from various companies, please note that these should not be prescribed until the patient has undergone clinical review and they have been agreed by the prescriber.

Ordering/Prescription Requests via POD:

Prescriptions should only be issued at the request of the patient or the patient's carer.

DACs and pharmacy contractors should not be requesting prescriptions on behalf of patients.

Patients should be encouraged to order the appliance(s) when they get to a defined threshold quantity sufficient to allow time for delivery.

Practice's should record which DAC or pharmacy contractor is being used on the patient's electronic health

Continence or stoma products should not be supplied in advance of a signed prescription. However, in an emergency situation, a retrospective prescription may be issued by the prescriber, where this is at the request of the patient/patient's carer, or relevant health care professional.

If a DAC or pharmacy contractor requests a prescription retrospectively, apart from in the instance cited above, the POD are entitled to refuse to supply a prescription.

Occasionally some patients may request more frequent or larger quantities than those recommended. Where there is an appropriate reason for patients to use quantities outside the usual range, this should be clearly documented. However, if this occurs, the patient should be referred to the Appliance Assistant who will refer to the appropriate specialist for review.

If it is unclear what the patient is using, the patient should be contacted and/or the specialist nurse to clarify the products being used.

For products that have not been requested for a long time, agreement should be gained from the prescriber/specialist so that these products can be deleted from repeat.

Patients should be advised to avoid stock piling as some products have a recommended shelf life and are influenced by changes in temperature.

Ordering/Prescription Requests via a GP surgery:

Patients should be encouraged to order the appliance(s) when they get to a defined threshold quantity sufficient to allow time for delivery.

Practice's should record which DAC or pharmacy contractor is being used on the patient's electronic health record.

Continence or stoma products should not be supplied in advance of a signed prescription. However, in an emergency situation, a retrospective prescription may be issued by the prescriber, where this is at the request of the patient/patient's carer, or relevant health care professional.

If a DAC or pharmacy contractor requests a prescription "post supply" apart from in the instance cited above, the GP surgery is entitled to refuse to supply a prescription.

Where a practice has identified concerns with the 3rd party ordering prescriptions, they may refuse to accept further requests.

Occasionally some patients may request more frequent or larger quantities than those recommended. If patients are identified as routinely over ordering continence/stoma products it may be appropriate for the individual to be reviewed by the appropriate local specialist. Where there is an appropriate reason for patients to use quantities outside the usual range, this should be clearly documented.

If it is unclear what the patient is using, the patient should be contacted and/or the specialist nurse to clarify the products being used.

For products that have not been requested for a long time, agreement should be gained from the prescriber/specialist so that these products can be deleted from repeat.

Patients should be advised to avoid stock piling as some products have a recommended shelf life and are influenced by changes in temperature.

Note:

DACs and pharmacy contractors must supply wipes and disposal bags with ostomy products free of charge which do not need to be added to the prescription.

All surgeries – POD and non-POD:

For any advice on ordering appliances or for further training from the appliance team please contact Jackie Morgan – Appliance Assistant – 01793 683713 or via MS Teams or via the POD admin inbox: bswccg.podadmin@nhs.net

To ensure cost effective stoma care prescribing:

- Place items recommended by SCN onto repeat prescription as quantities are less likely to get changed.
- Any deviation from the products/quantities on repeat prescription which has been recommended by the SCN should not be prescribed – refer to BSW SCN or local SCN for advice.
- If patients request higher quantities, this could indicate an issue refer to BSW SCN or local SCN for advice/assessment.
- Decline DAC request to change products if not agreed by local SCN who will know the patient - refer to BSW SCN or local SCN.

Useful contacts:

- Suzie Dukes Specialist stoma nurse BSW CCG <u>suzie.dukes@nhs.net</u>
- Salisbury Foundation Trust stoma care department sft.salisburystomacare@nhs.net 01722 429256
- Great Western Hospital stoma care department gwh.stomacare@nhs.net 01793 64 62 50
- Royal United Hospital stoma care department <u>ruh-tr.Stomatherapy@nhs.net</u> 01225 824056
- BSW prescribing inbox bswccg.prescribing@nhs.net
- ASCN (Association of stoma care nurses) <u>ascnuk@in-conference.org.uk</u>

BSW CCG SCN reviews:

- Commenced role March 1st 12 month secondment, 3 days/week
- Stoma patient prescription reviews via Systm One
- To date:
- 76surgeries/ 1300 patients
- £41,369 annualised savings
- Queries from pharmacists/GPs/prescribing clerks
- To follow:
- Complete reviews
- F2F meetings with prescribing clerks to highlight formulary/processes and contacts