

<b>SBAR</b>	
<b>National Stoma Quality Improvement Short Life Working Group: NSQIG</b>	
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<b>Date</b>	<b>10.01. 20</b>
<b>SITUATION</b>	
This SBAR is to provide information of the key findings and recommendations detailed in the National Stoma Quality Improvement SLWG report	
<b>BACKGROUND</b>	
<ul style="list-style-type: none"> <li>• The National Stoma Quality Improvement Short Life Working Group (NSQIG) was commissioned by the NHS Scotland Executive Nurse Director Group (SEND) in February 2018 with sub group scoping work complete March 2019</li> <li>• The aim of NSQIG was to identify, prioritise and progress areas of work requiring a national “<i>Once for Scotland</i>” approach, complementing NHS Boards stoma quality and efficiency activities aligned to key NHS Scotland Health and Social Care policy documents, highlighted within the NSQIG report.</li> <li>• The Scottish Deputy Nurse Director Group (SDNDF) nominated a chair and vice chair to provide governance and leadership to the work of NSQIG.</li> <li>• NP provided funding for analyst and GP sessional support</li> <li>• NSQIG membership includes regional Stoma Nurse representation, Health Board prescribing support, pharmacy, G.P representatives, Colorectal Surgeon, procurement and prescribing analyst support.</li> <li>• Wider engagement was established with Directors of Pharmacy, Health Board Stoma Fora and commercial partners. / dispensing contractors: (BHTA &amp; CPS)</li> </ul> <p><b>NHS Scotland Healthcare policy documents that inform this work are:</b></p> <ul style="list-style-type: none"> <li>• Stoma Care Quality and Cost Effectiveness Review Scottish Government (2016)</li> <li>• National Clinical Strategy (2016)</li> <li>• Chief Medical Officers report on Realistic Medicine (2016, 2018)</li> <li>• Achieving Excellence in Pharmaceutical Care (2017)</li> <li>• Primary care transformation (2017)</li> <li>• General Medical Services Contract in Scotland (2018)</li> <li>• Excellence in Care: EiC (2017)</li> <li>• Transforming Nursing Roles (2018),</li> </ul> <p><b>NSQIG sought to adopt a values - based approach to identify how stoma care is optimised by delivering the best possible patient outcomes in the most efficient way to ensure resources are allocated for maximum clinical and financial value.</b></p>	
<b>ASSESSMENT</b>	
<b>Objectives developed within NSQIG terms of reference guided the work</b>	
<ol style="list-style-type: none"> <li>1. Review the current product prescribing data across Health Boards and identify and develop Opportunities for optimal data reporting to drive quality and efficiency.</li> <li>2. Review current Health Board formularies and scope the feasibility of a National evidenced-based ostomy product guidance that could be used as an equitable and pragmatic aid to decision making.</li> <li>3. Review current processes for product access identifying alternative models to GP prescribing to support timely, efficient, equitable patient product access.</li> <li>4. Identify the process for measuring effectiveness of product use and patient outcomes with minimal annual patient-reported outcomes measures (PROMs) that includes patient related feedback.</li> <li>5. To review the role of e-health / assistive technology in stoma care and identify opportunities for quality improvement in patient care.</li> <li>6. To explore effective partnership working with Dispensing Appliance Contractors that would support data sharing of product use and develop variance monitoring against agreed national guidance.</li> </ol> <p><b>Three sub groups were identified to deliver on key project objectives:</b></p> <ul style="list-style-type: none"> <li>• <b>Data Sub group</b></li> <li>• <b>Formulary Sub group</b></li> <li>• <b>Process Sub group</b></li> </ul> <p>Commercial engagement was established with British Healthcare Trade Association (BHTA) and Community Pharmacy Scotland (CPS) to discuss and progress objective 6.</p>	

## Key Messages

1. Stoma care is an area where there is evidence of increasing primary care expenditure, with over ordering and wide variation in product use and patient monitoring reported across the United Kingdom.
2. Across the UK, over **£300 million** is spent annually on stoma products. Stoma appliances and accessory costs in primary care range from **£780- £2,300** per patient per annum. In situations where there is inappropriate product use, the cost can rise above **£6000 per annum**.
3. **NHS Scotland, stoma expenditure has risen by 65% over five years with a current expenditure of £31 million per annum. In contrast, the number of stoma patients has risen by 10% over the same period.**
4. Published research reports that stoma related morbidity such as leakage and skin complications range from 3% - 80% and are associated with increased product use and negatively affect quality of life, however, variance exists in methodology across studies with definitions of morbidity poorly defined.
5. Improving stoma prescribing practice through effective appliance selection, patient monitoring and prescribing scrutiny will ensure the appropriate selection and use of stoma products, early detection of stoma complications and faster referral for clinical review and remedial action.

## Key Findings from subgroup scoping activities

- Variation exists across NHSS Board prescribing teams of the data intelligence processes used to identify over /under use of stoma products with limited intelligence across NHSS Boards regarding stoma patient numbers.
- NSQIG data metrics evidence excess product use across all stoma types benchmarked against national prescribing guidance from ASCNUK with variation in cost per treated patient across all stoma types.
- G. Ps are the main prescribers of stoma products with a lack of scrutiny of prescribing practice across Boards
- 80% of stoma patients access products via DACs with 20% via Community Pharmacy. **DAC's have highest cost per treated patient across dispensing types.**
- 2017/18 NHSS Stoma patients: 19,193: Long term patients = 11,100 (57%) of stoma population.
  - **Long term patients account for 76% of stoma prescribing**
- Variation in the process of how DACs, Community Pharmacy and Primary care identify and report stoma related complications that may require additional products or a change in products.
- NHS Scotland has no reliable clinical stoma morbidity data. Improvements in the accuracy and consistency of stoma clinical data capture is required to identify stoma related morbidity and clinical outcome reporting.
- A lack of clinical pathways to identify self-care, supported self-care and specialist care and clinical escalation pathway.
- Variation in the structure, format and product prescribing guidance across NHS Boards
- A lack of clear governance and accountability between the industry and professional interface identified.

## NSQIG key Deliverables:

- Development of agreed Data Metrics for strategic level Health Board Stoma reports
- Development of National Stoma Prescribing Guidance with product over use flow charts to support prescribing scrutiny, supporting equity of proactive and reducing variation
- Identification of alternative models to G.P prescribing for Proof of Concept testing
  - Serial Prescribing
  - PECOS Non-Prescribing Model

## NSQIG Recommendations

1. **NHS Boards who currently do not have an established Stoma Forum should consider this in line with the recommendations from the NHS Scotland Stoma Care Quality and Cost Effectiveness Review (2016).**
2. **SEND to consider development of a national approach to support the development of a national stoma care minimum data set, aligned to the established Excellence in Care (EiC) assurance measures, enabled by digital solutions, to improve monitoring of patient outcomes. This will aim to reduce current reliance on use of industry data software by NHS Board employed healthcare professionals.**
3. **NSS Information Statistical Division (ISD) to identify resource requirements to roll out strategic level stoma product prescribing data reports to all territorial Boards, supporting the scrutiny and monitoring arrangements across prescribing and clinical teams.**
4. **National prescribing guidance developed by NSQIG should be adopted across NHS Scotland to support NHS Board's equity of practice and facilitate improved prescribing practice. Dispensing Contractors should be informed of the process, contained within prescribing guidance for reporting stoma related adverse events within a clinical escalation pathway.**
5. **National Procurement (NP) to review and strengthen how it works with NHS Boards to provide improved governance, transparency and professional accountability in the commercial Value for Money (VfM) review process.**

6. SEND to remit SDNDG to review the leadership, reporting and accountability arrangements with the Scottish Stoma Nurse Group in order to strengthen the professional governance and strategic work of this group.
7. Primary Care Teams within NHS Boards to actively consider the use of serial prescribing within the Managed Care & Review service, supported by Primary Care Pharmacists and Stoma Nurses, to improve monitoring, effectiveness and efficiency of stoma prescribing.
8. Scottish Stoma Care Nurse Group to develop stoma care quality assurance measures, aligned to Excellence in Care (EiC) methodology. Quality assurance measures should cover early detection and management of stoma related adverse events. An integrated approach should involve the wider primary care team and provide clear clinical escalation pathways to specialist advice and intervention.
9. That NHS Boards' support Stoma Nurses to consider wider use of Technology Enabled Care such as Florence to support self-management, monitoring and outcome measurement.
10. SEND / DoP's to consider Proof of Concept evaluation of alternative models to stoma appliance and accessory product prescribing to see if improved patient outcomes and more effective and efficient product use can be achieved.
11. NHS Boards to review future Stoma Nurse workforce requirements in line with CNOD Transforming Roles Programme and the findings of this review.
12. Scope how NES can work with Scottish Stoma Nurse Forum to develop a framework of post graduate educational and clinical preparation requirements for stoma care nurses in line with the NES Career Development Framework and CNOD Transforming Roles Programme. This should include a review of the current industry supported education and CPD provision.
13. SEND to consider continuing the work of NSQIG in the form of a national leadership group to progress the recommendations contained in this report as Phase 2 of this work.
14. SEND / DOPs to consider establishing more integrated nursing and pharmacy leadership arrangements within NHS Boards to take forward the quality, efficiency and effectiveness work as recommended in both the NHS Scotland Stoma Care Quality and Cost Effectiveness Review (2016) and in the NSQIG Report (2019).

#### **RECOMMENDATIONS**

1. NHS Executive Directors of Nursing ratified the report in December 2019
2. Publication of the report will be via NSS following the approval from Chief Pharmaceutical Officer via Chief Nursing Officer.
3. SMT to approve publication of the report via NSS, with identification of a Senior Responsible Officer