



## Stoma Care Prescribing Tip October 2013

This prescribing tip will provide prescribers with key information to promote appropriate, rational and cost effective prescribing of Stoma Care products.

- Wakefield District spent **£1.5 million** on Stoma Care products in 2012/13.
- Prescribing for appliance products is becoming an increasingly complex process given the variety of products available and large number of external companies supplying to patients.
- While it is essential for the patient to carry adequate stocks of their stoma appliances and to order additional supplies in plenty of time, this must be balanced against patient tendencies to over order.
- Over prescribing and over ordering of stoma appliances are frequently identified in general practice as important causes of wasteful prescribing.
- Appliance contractors often make third party requests for an appliance prescription without the patients consent and after supply has already been made to the patient which is NOT acceptable.

Fittleworths are one of the leading Home Delivery Companies in the UK, specialising in stoma, continence and wound care products. They have informed the Medicines Management Team that they have implemented the '**no release without order**' initiative in Wakefield. This means they will no longer supply patients with products until prescriptions have been received from the GP surgery. Fittleworths will still contact the GP surgeries for prescriptions, but they will ensure that no orders are released without having a prescription first.

### Stoma Clinic

The stoma clinic is a patient accessed clinic and should be the first point of access for the patient when having any problems or issues relating to their stoma. The nurses are based at Pinderfields Hospital but also travel around the Wakefield District area, making home visits.

They order the first prescription after the first home visit following a hospital stay. Any new items ordered by the patient/patients representative are flagged up by the appliance contractor to the stoma nurses. This allows the nurses to review whether the patient actually needs the item or to get the patient in to see them if something has changed in their treatment needs.

The nurses recommend the flat bags, first line, and before the patient is switched to a convex bag or any other type of bag they should firstly be seen by a specialist nurse for assessment and fitting.

### Mid Yorkshire Stoma Nurses contact emails:

Pam Jackson: [pam.jackson@midyorks.nhs.uk](mailto:pam.jackson@midyorks.nhs.uk)

Janet Ong: [janet.ong@midyorks.nhs.uk](mailto:janet.ong@midyorks.nhs.uk)

### **References:**

Quantity of products per month guidance provided by Stoma Nurses at Mid Yorkshire NHS Trust.

*For more information please contact the Medicines Management Team on 01924 317529*

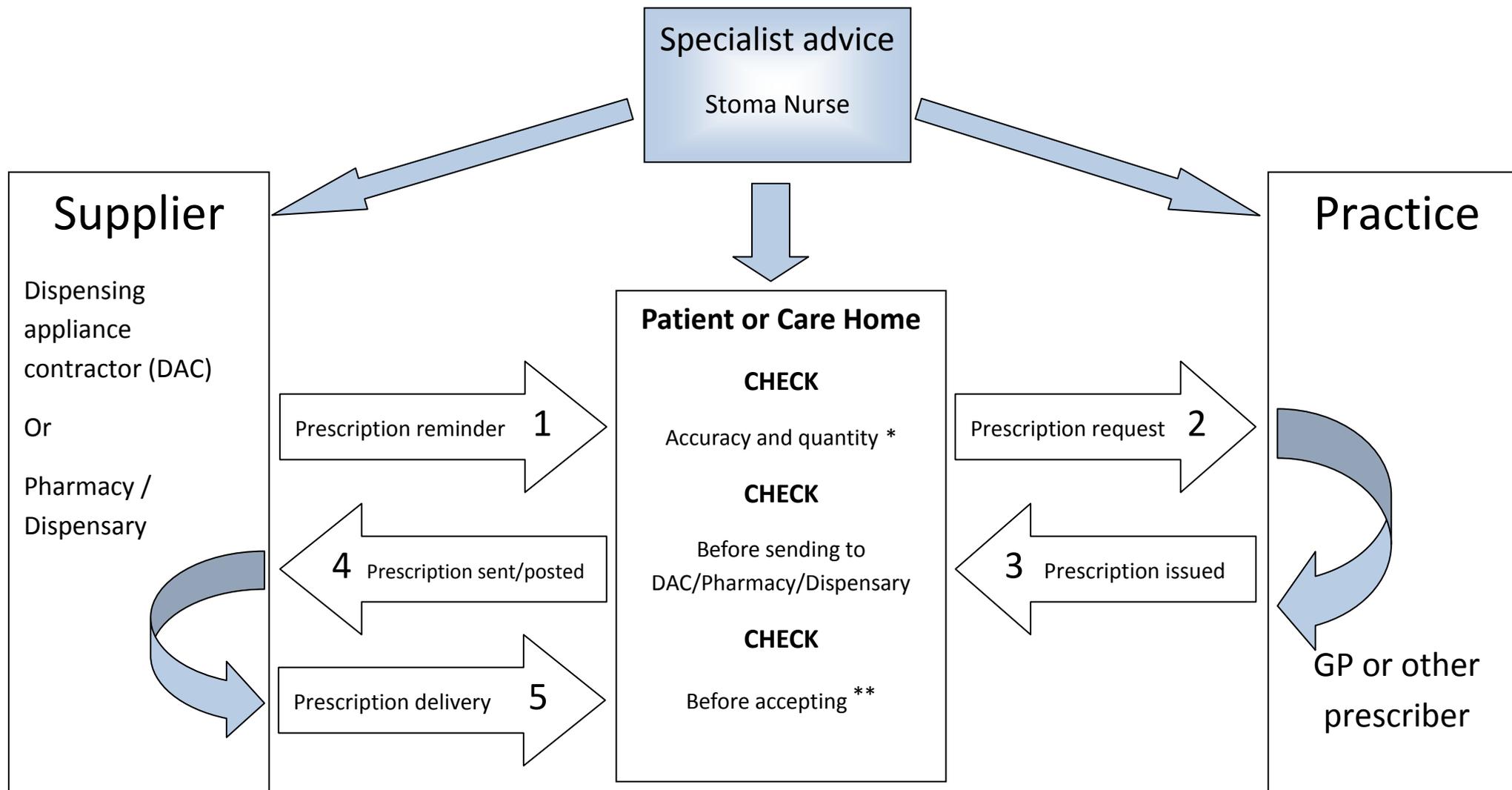
**Promoting Quality, Reducing Risk**

# PREFERRED PRESCRIPTION PATHWAY

Guidance from provision of NHS prescriptions including supply of specialist products: - continence and stoma appliances, wound management products and nutritional support



Wakefield Clinical Commissioning Group



\*28 days supply or nearest pack size.

\*\*Please check items against the prescription, with the driver before the delivery is made. Once the prescription has crossed the threshold, if it is wrong for any reason, it will be wasted as it will not be re-used by the dispensing appliance contractor or the pharmacy. It can be returned but it will be destroyed.

APPLIANCE	USUAL MONTHLY QUANTITY	PRESCRIPTION DIRECTIONS	NOTES
Colostomy bags	30 -90 bags	Remove and discard after use	Bags are not drainable/ reusable. Usual use: 1-3 bags per day. Flushable bags only to be used on advice of bowel / stoma nurse.
Ileostomy bags	15-30 bags	Drain as required throughout the day. Use a new bag every 1-3 days	Bags are drainable.
Urostomy bags	10-20 bags	Drain as required throughout the day. Generally replace bag every 2 days	Bags are drainable.
Night drainage bags for urostomy patients	4 bags (1 box of 10 bags every 2-3 months)	Use for up to 5 days	Bags are drainable.
Flange (base plate for two piece systems)	15 flanges	Change every 2-3 days	The flange is not usually changed at every bag change.
Flange extenders (for one and two piece systems)	10-90 flange extenders	Change every time bag is changed	Often required for extra security if the patient has a hernia or skin creases and there is leakage around the stoma.
Belts (for convex pouches)	3 per year	1 to wear, 1 in the wash, 1 for spare	Washable and re-usable.
Adhesive removers	1-3 cans (depending on frequency of bag changes)	Use each time stoma bag is changed	Sprays are more cost effective than wipes. 'Non-sting', silicone based products are recommended. Adhesive spray is used for ease of appliance removal wipes are used to remove excess adhesive from the skin.
Deodorants	Not routinely required. Maximum 1	Use as needed when changing stoma bag	Should not be required. If correctly fitted, no odour should be apparent except when bag is emptied or changed. Household air freshener is sufficient in most cases.
Lubricating deodorant gels	2 bottles	Put one squirt in to stoma bag before use	Only recommended if patients have difficulty with 'pancaking'. Bottles are more cost effective than sachets. A few drops of baby oil or olive oil can be used as an alternative.
Skin fillers	Follow directions of bowel /stoma nurse	Change each time bag is changed	Filler pastes/ washers are used to fill creases or dips in the skin to ensure a seal
Skin protectives (wipes, films, pastes and powders)	Follow directions of bowel /stoma nurse	Apply when bag is changed as directed	SHORT TERM USE ONLY (acute prescription): may be used on skin that is broken, sore or weepy to promote healing. If used for >3 months, refer patient to bowel / stoma nurse. Barrier creams are NOT recommended as they reduce adhesiveness of bags/flanges.

### **General Notes**

- If quantities ordered exceed those listed without good reason (e.g. number of bags in times of diarrhoea), refer patient to specialist nurse.
- 'Stoma underwear' is not necessary and should not be prescribed, unless a patient develops a parastomal hernia and has been advised to wear 'support underwear' or a belt.