

Policy/Procedure Ratification Form

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Department	Children's Services
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Approved	
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Services for Children & Young People

Epilepsy Nursing Services Operational Procedures

Ref. CYP12/06/1

DATE: AUGUST 2006

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Criteria for referral to Epilepsy Nursing Service for Children & Young People

Minimum referral criteria

We will accept a referral when:

- The child/young person is 17 years or under
- The child/young person lives in the London Borough of Newham
- The child/young person has a diagnosis of epilepsy, ***except when * applies***

We have an open referral policy provided the above criteria are met.

The role of the Epilepsy Nursing Service

The role of the nursing service is to help children, young people & their families to:

- Learn more about their epilepsy
- Aim for the best seizure control through following their treatment plan and adjusting their lifestyle where necessary
- Be included in age appropriate play & activities using problem solving approach
- Learn first aid for seizures & be safe with their epilepsy generally
- Have self-confidence and resources to cope and live well with their epilepsy
- Have opportunities for learning and development at nursery, school & moving onto college or finding work

Promoting access to our service

We encourage families, children and young people to refer themselves to the service, we therefore have an ***open referral policy***.

Our service information leaflet & poster are accessible on the intranet, Newham PCT Website (www.newhampct.nhs.uk), and throughout health centres, schools and other locations in the Borough.

Our service information leaflet is translated into different languages and can be obtained on the intranet & website or on request from the service.

Professionals can also make a referral and are encouraged to discuss the role of the service, gain consent from the child, young person and their family, and then make a referral using the referral form.

Our service information leaflet aims to assist professionals in describing the role of the service; enabling children, young people & their families to understand the way in which we might be able to help them.

If a professional feels the service would be of benefit to the child, young person or family but they do not want a referral at that particular time, please give them our service information leaflet and remind them of our open referral arrangement.

When to refer to the epilepsy nursing service

We encourage referral in the following situations:

- New diagnosis of epilepsy
- When a hospital medical practitioner has a strong suspicion of epilepsy, referral may be appropriate in order for us to collate a more in - depth history or description of attacks, & *a referral from that practitioner **only** will be considered **
- Concerns about a change in pattern of epilepsy, increase in frequency or continuing seizures where we can perhaps assist the medical team with solutions to best manage this
- When further information & support regarding epilepsy is required, perhaps due to reaching adolescence
- Child/family are having difficulty coming to terms with epilepsy and perhaps over restricting the child's play or activities or have emotional support needs
- When the child/young person is undergoing tertiary review as a possible surgical candidate
- When it is thought that epilepsy is having an ongoing impact on behaviour, learning and general functioning.

This list is ***only a guide***, and we are always willing to consider referrals in ***other situations***. Please contact us to discuss the appropriateness of your referral either by e-mail or telephone.

Making a referral

1. Discuss the role of the service with the family using our service leaflet & translations – encourage the family to contact us independently

2. Print out our referral form from the intranet

Go to “TRUST DOCS”

select category CHILDREN’S SERVICES → search

click on EPILEPSY REFERRAL FORM

Print

3. Complete all fields asterisked – attach any other information that you think would be helpful
4. Send your referral to us by post

Our contact details

Post: Epilepsy Nursing Service for Children & Young People
West Ham Lane Health Centre
84 West Ham Lane
Stratford London E15 4PT

Telephone: 020 8250 7355

Fax: 020 8250 7347

e-mail: epilepsy@newhampct.nhs.uk

Procedure for taking or receiving referrals

Referrals are received by the service in a variety of ways. This procedure outlines the steps both administrative and clinical staff should take when taking or receiving a referral. Referrals are either new (i.e. a client not previously known to the service) or re-referrals (i.e. a client previously known to service who has been discharged and therefore will have a case file).

By post or fax

Referrals usually come by post or fax addressed to one of the nurses.

The nurse reads the clinical information contained within the referral and makes an assessment of whether there are any issues that need immediate attention.

If not, the date the referral was received is entered and the referral is handed to administrative staff to process for next new referral meeting.

If referrals come addressed generally to the service and are opened by administrative staff they must be handed to a nurse that day or, if both nurses are out of office, the very next working day.

By telephone

Administrative staff should not usually take referrals over the telephone. If a professional wants to make a telephone referral, it is usually possible to direct them to the referral form available within their team, on the intranet or by faxing or sending a referral form to them.

Referrals can be taken over the telephone by nursing staff, again encouraging the professional concerned to use the referral forms available.

Information should be collected during telephone referrals using the referral form.

If a family is making a telephone self referral, the details of their child (name, date of birth, gender, address, contact number) can be taken by administrative staff using the same principle as taking a telephone message for an existing client. This is then passed to the relevant nurse to contact the family and complete the referral form, collecting relevant clinical information review the clinical issues.

Once reviewed by the nurse, referral should be passed to administrative staff to process for next new referral meeting.

Referrals by letter or e-mail (no referral form attached).

Epilepsy Nursing Service for Children & Young People
West Ham Lane Health Centre 84 West Ham Lane Stratford London E15 4PT
Tel: 020 8250 7355 fax: 020 8250 7347 e-mail: epilepsy@newhampct.nhs.uk

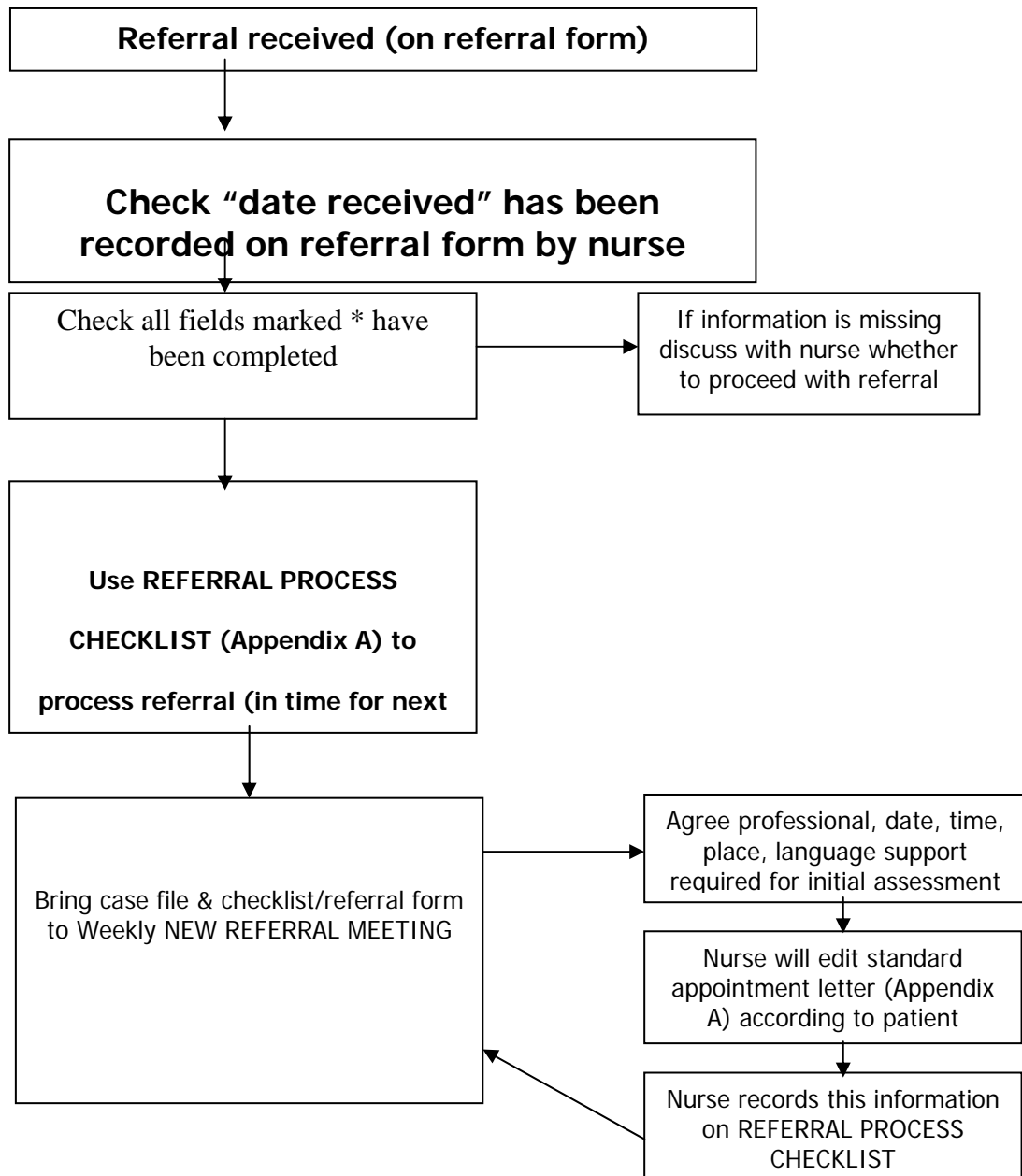
With wide circulation of the service referral packs and availability of referral form on intranet, the number of professionals referring by letter alone should diminish.

Referrals by letter and e-mail will be accepted. The referrer will be contacted by telephone to collect the information required by the referral form if it is not contained in the referral letter.

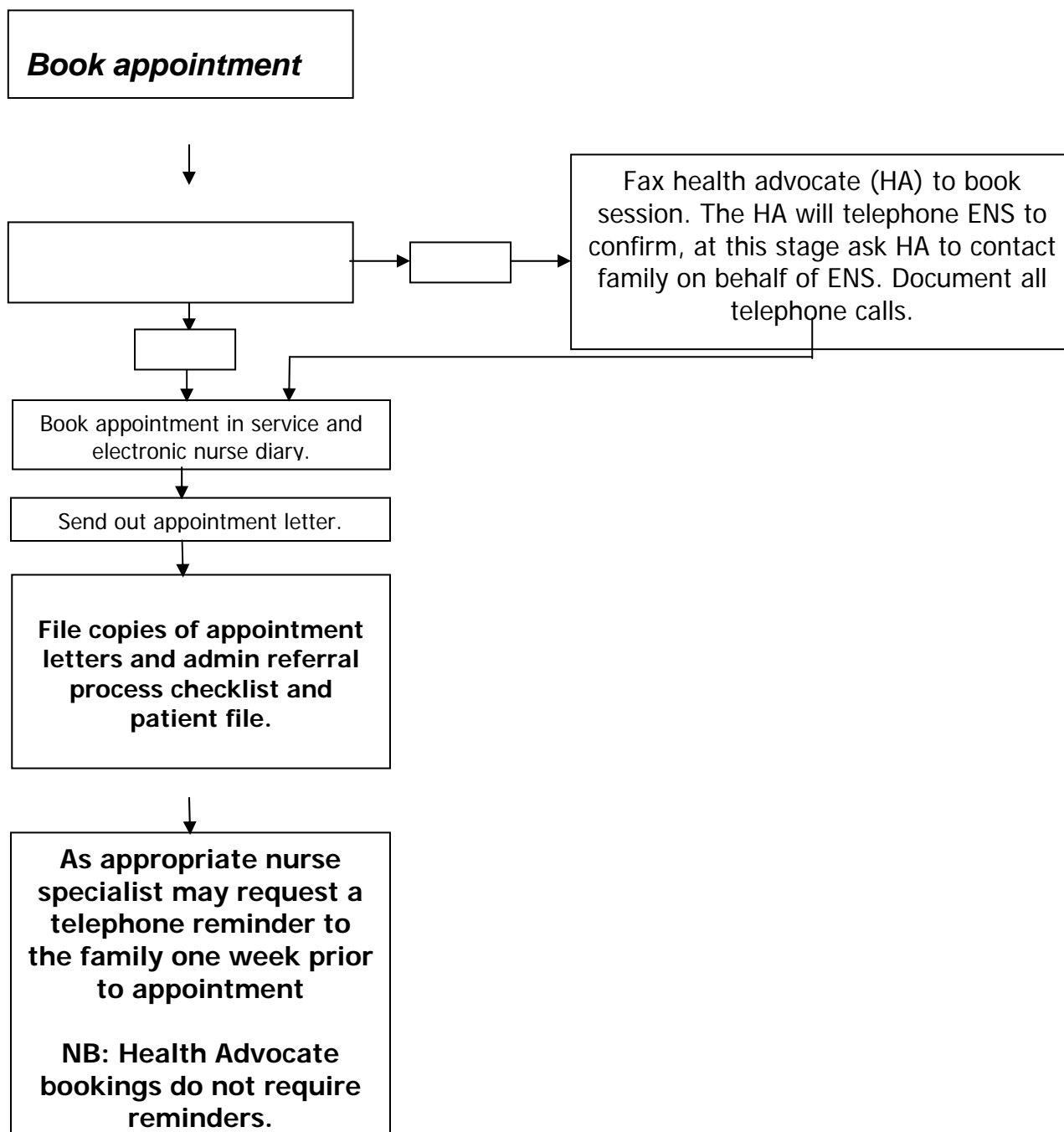
Such opportunities should be taken to remind referrer about the availability of referral forms and other resources to facilitate referral.

Procedure for administrative processing of referrals

The flow chart explains the process that administrative staff should follow to process a referral once it has been reviewed by nursing staff.



Continued...



In the event of appointments being cancelled by client or health advocate

Record dates of cancelled on referral form (using continuation sheet if required).

Repeat booking steps as required to make a new appointment.

EPILEPSY NURSING SERVICE FOR CHILDREN AND YOUNG PEOPLE

New Referral Process Checklist

Name:	Date of birth:
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REGISTRATION AND PAPERWORK

Check RICHS for additional details on client	<input type="checkbox"/>
Register client to service on RICHS	<input type="checkbox"/>
Check epilepsy excel database – is child previously known to service?	
Yes - move entry in database to active document	<input type="checkbox"/>
- pull file from location	<input type="checkbox"/>
No - make entry on active document	<input type="checkbox"/>
- make up new client file	<input type="checkbox"/>
Enter client details in NEW REFERRAL BOOK	<input type="checkbox"/>

NEW REFERRAL MEETING *date discussed:*

Appointment details:			
<u>Date</u>		<u>Time</u>	
<u>Place</u>		<u>Nurse</u>	Specialist Associate
<u>Health Advocate</u>	yes no	details: _____	
<u>Standard letter amended:</u>	yes no		
<u>Additional letters/ information required:</u>	yes no		
Details:			

Date	Notes	Signed

Date:

Epilepsy Nursing Service for Children & Young People
West Ham Lane Health Centre 84 West Ham Lane Stratford London E15 4PT
Tel: 020 8250 7355 fax: 020 8250 7347 e-mail: epilepsy@newhampct.nhs.uk

To the parents of:

Dear

Your -----(insert professional title)-----, -----(insert name)-----has referred ---(first name of child)----- to the Epilepsy Nursing Service.

We would like to offer you an initial assessment appointment to talk in some detail about your concerns. Your assessment will be with **Kate Rudd** (Specialist Nurse) **Debbi Lynn** (Specialist Nurse).

As most of our appointments are during the day whilst you child will be at school or nursery, it is your decision whether to include your child and the first appointment. It is important for us to meet with children and young people as well but this can often be done at a later appointment at a more flexible time.

The appointment details are:

Date:

Time:

Length of appointment:

Place:

We have arranged for -----(name of advocate)---, -----(job title)----- to provide language support at this appointment.

If this appointment is not suitable, please telephone me as soon as possible to arrange an alternative appointment.

Yours sincerely

Felicity Edwards
Administrative Assistant
Epilepsy Nursing Service

Enc: service information leaflet

Procedure for new referral meeting

General points

The new referral meeting is a 30 minute, weekly meeting.

Purpose

The purpose of the new referral meeting is to:

1. assess the clinical nature of referrals, prioritise and allocate the appropriate nurse to make the initial assessment
2. identify additional support or information required for the assessment (i.e. joint visit with other professional or health advocate)
3. identify most appropriate location of initial assessment, taking account of any known risks to making a home visit
4. make weekly progress checks on new referrals through the system at a time when all professionals are present so that problems are highlighted and action taken
5. to monitor waiting times for initial assessments

Matters arising that are not related to the new referral process should be deferred to be discussed at monthly team meeting or an "ad hoc" discussion with nurse specialist.

Matters of a clinical nature about other patients should be referred to the relevant supervision session or discussed in an "ad-hoc" way after the meeting with nurse specialist.

Equipment

Service diary

Nurse individual electronic diary

New referral book

Note pad and pen

New referrals received – referral having already been processed by admin staff (see new referral procedure)

Personnel Required

Administrative Assistant

At least ***one member*** of ***clinical nursing staff*** must be present at the new referral meeting.

Process

- Nurse Specialist goes back over referral book (usually to the previous two weeks) and the progress of each consecutive referral is discussed.
Examples of the depth of discussion that is needed are:
 - “that patient has been seen and discharged”
 - “that patient has appointment booked for XX date with XX nurse”.

- New referrals received that week are discussed in more detail. The administrative assistant presents the referral stating the client’s name, age and where they have been referred from. The nurse reads and verbally summarises the clinical information and reason for referral.

- When all new referrals have been summarised as above, the nurses discuss the following issues for each referral:
 - a) The nature of the first contact needed – telephone assessment/home visit
 - b) The appropriate nurse to make the initial assessment
 - c) The next available appointment – considering clinical urgency/need
 - d) Whether advocate or other professional is required
 - e) Whether there are any child protection issues/considerations to make re visiting and whether more information/liaison is required.
 - f) Amendments to the appointment letter according to the age of the client

- It is the responsibility of the nurse to record on the New Referral Admin Checklist regarding the appointment details and if required make a formal plan of care on the evaluation sheet.

- It is the responsibility of the administrative assistant to know when appointment slots are available and be able to advise on current availability of advocates.

- The nurse agreeing to make the initial contact (be it telephone or home visit) takes the client onto their active caseload & updates their caseload list.

- Patient files are returned to the administrative assistant to complete the final steps of the administrative process.

Procedure for use of “Request (by fax) for review of condition and medication form”

This procedure explains how to use the form “REQUEST (by fax) FOR REVIEW OF CONDITION AND MEDICATION FORM”

It is relevant for:

- **nurses of any grade working within the epilepsy nursing service for children & young people**
- **medical staff, i.e. Consultant Paediatricians, Consultant Paediatric Neurologist, Paediatric Registrars at Newham General Hospital and the Royal London Hospital**

The procedure and form should be used when the nursing assessment indicates that a review of the child or young person’s condition or medication is required promptly (i.e. before their next planned hospital review).

The form is a tool for the nurse to communicate a written summary of their nursing assessment and request the opinion of the medical team.

The medical team use the form as a tool to provide clear written instructions for changes to the child or young person’s treatment plan for the nurse to implement.

A clear written document of the communication is available to:

- **share with the family and their general practitioner who may need to amend the repeat prescription**
- **meet the requirements of the Trusts policy on “Administration of Medicines for nursing staff in the community”**

Responsibilities of nurses working in the epilepsy nursing service

- Use original print out of form to ensure legibility as it will be faxed twice
- Write clearly in black ink or use type set, spelling medications in full
- Complete clinical details of assessment following their assessment of child/young person
- Fax form with a fax cover sheet indicating urgency and whether an acknowledgement is required
- Phone consultant secretary concerned to advise the fax will be sent
- Document in the epilepsy case file notes date and time fax was sent
- File fax in the epilepsy case file notes
- Act on recommended advice and liaise with family and primary care professionals and provide written confirmation of medication changes.

Responsibilities of medical staff

- Complete the “recommended advice/actions to be taken” section on the received fax
- Write clearly in black ink, spelling all medications in full.
- Sign and date the form clearly to validate its use
- Return the form by fax to the epilepsy nursing service
- Telephone the epilepsy nursing service if more information is required

Responsibilities of administrative/secretarial staff

- Ensure faxes are passed onto the addressee as promptly as possible
- Indicate when nursing or medical professionals are unavailable.
- For updates provided by nurse on telephone send client letter confirming medication changes.

Epilepsy Nursing Service for Children and Young People
West Ham Lane Health Centre 84 West Ham Lane Stratford London E15 4PT

Telephone 020 8250 7355 Fax 020 8250 7347

REQUEST (BY FAX) FOR REVIEW OF CONDITION AND MEDICATION

Name: _____ DOB: _____ Hosp No: _____
Address: _____
_____ Postcode: _____ Tel: _____
Diagnosis _____
Weight: _____ weighed at home / clinic / estimate. Date: _____
Allergies: _____

Current medication

Name of medication	Route	Dose and times taken

Description of current problems and concerns

Telephone / face to face assessment from _____
Reported by: _____ Designation: _____
Date: _____ Signature: _____

Recommended advice / actions to be taken

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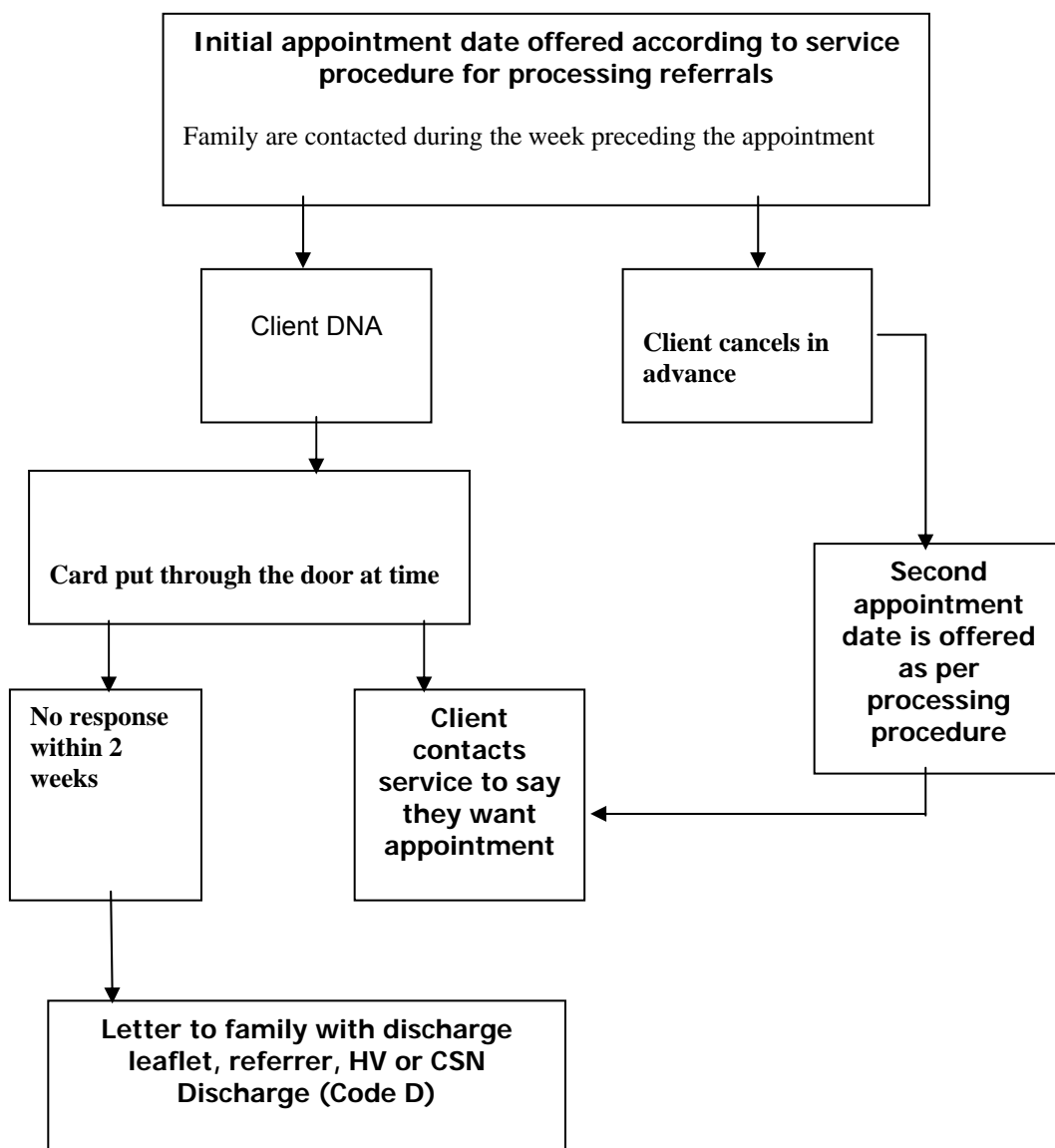
Doctors name: _____ Designation: _____
Signature: _____ Date: _____

Please take a copy for your files and then return ASAP on the above fax number. Thank you.

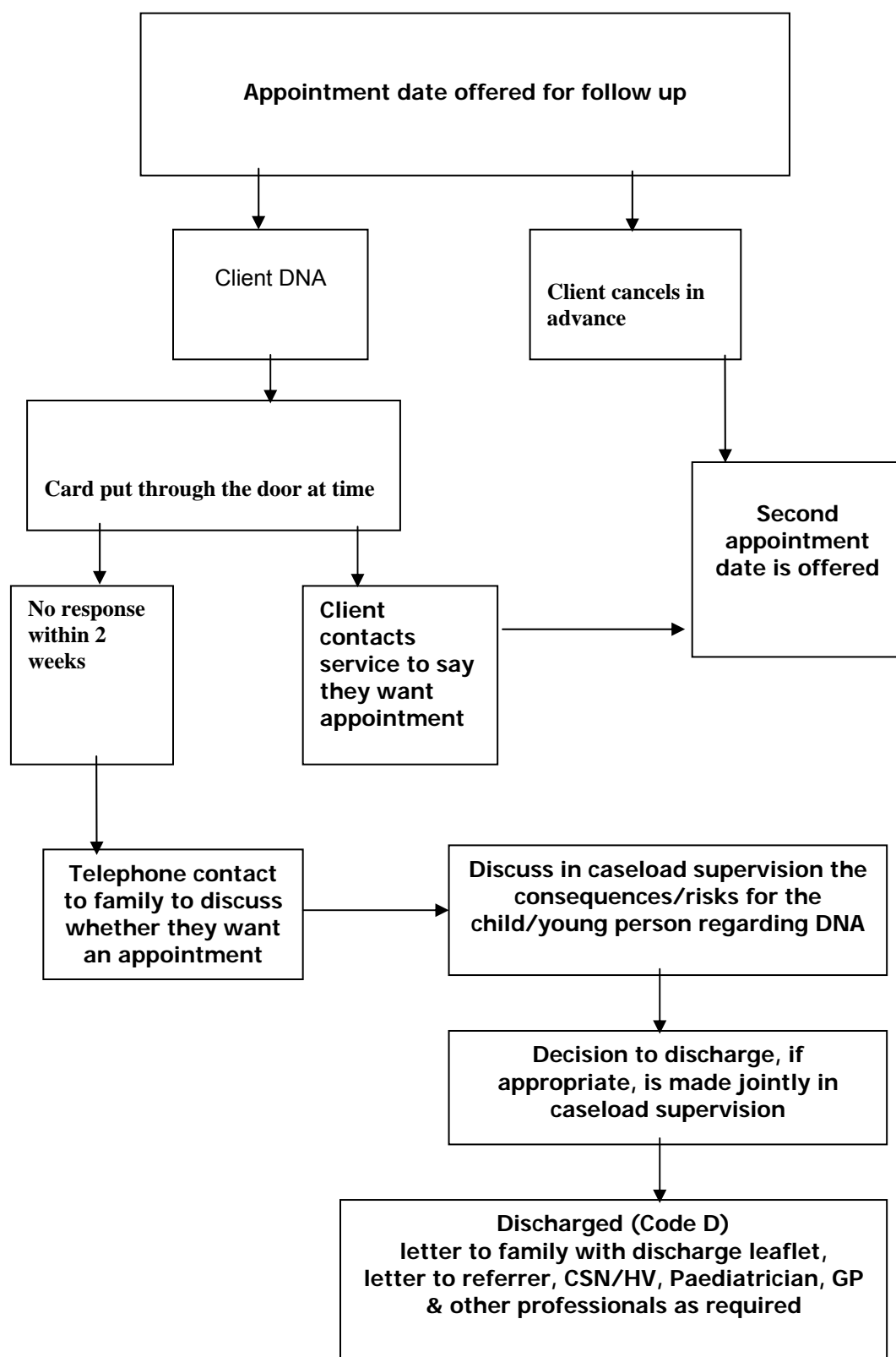
Procedure for clients who “do not attend” (DNA) appointments

This service procedure should be considered in the context of the Waiting List Policy for children’s services that is currently in draft.

1. This flow chart sets out the procedure for responding to DNA’s for **initial appointments**:



2. This flow chart sets out the procedure for responding to DNA's for **routine follow up appointments**:

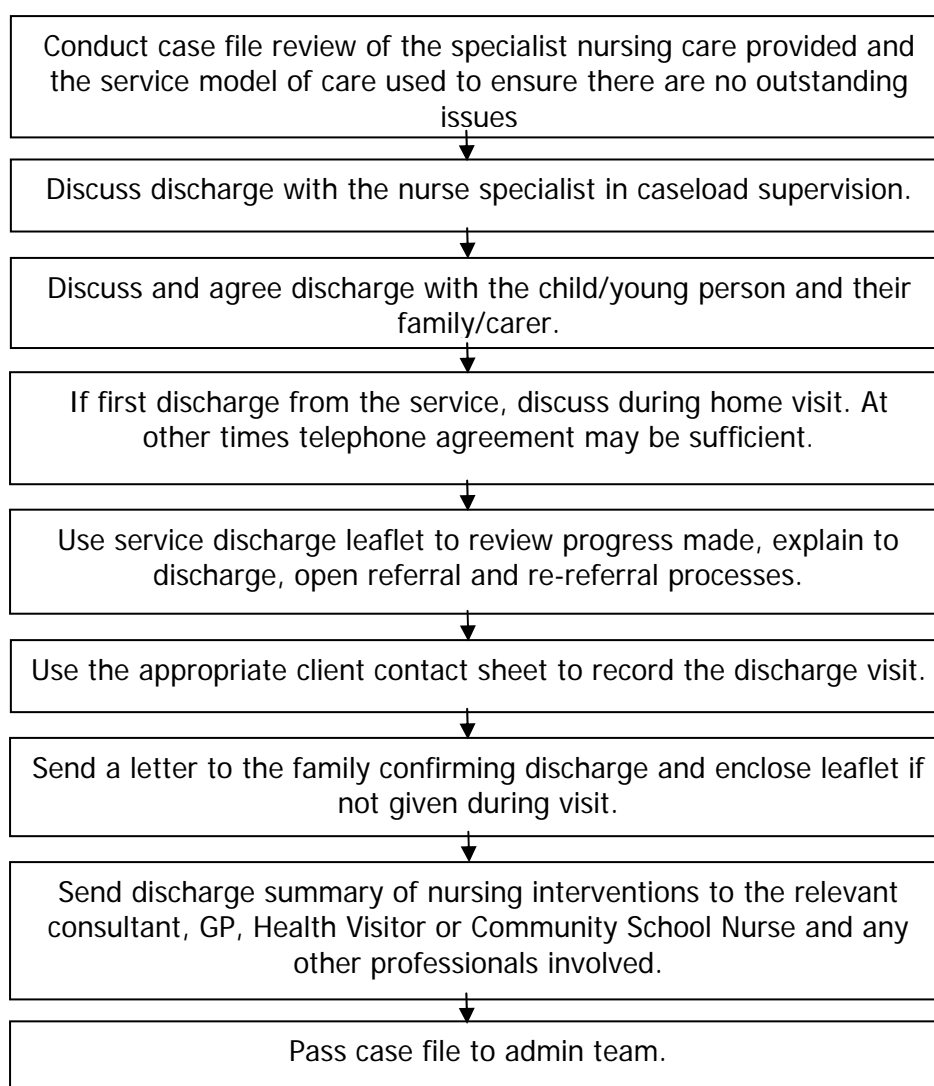


Procedure for discharge

The epilepsy nursing service aims to empower children, young people and their families to manage independently with their epilepsy. As such, all nursing interventions are working towards a safe discharge as soon as the family are referred. The open referral policy enables families to contact the service directly after discharge to indicate that they require further input

The following procedure used when discharging a client. If the client is deceased at discharge the Trust and local service checklist regarding Notification of a Child Death should be followed.

Clinical process



Administrative process

