UHDB Derby Hospitals Sites
Rheumatology Therapy Flare up Escalation.
Standard Operating Procedure

The operating procedure set out below must comply with the Data Quality Standards set out within Trust Data Quality Policy

1. Overview

In Rheumatology therapy adults outpatients service patients are seen following referral from the Rheumatology consultants and nursing teams. Inflammatory arthritic patients often have variable symptom presentations over time. The aim is to stabilise and optimise condition management with guidance and treatment from the Rheumatology multidisciplinary (MDT) team. It is important that patients presenting in inflammatory flare are assessed promptly and an appropriate medical management plan (often including medication intervention) is co-ordinated to avoid potential uncontrolled inflammatory joint and tissue damage.

The **Derby Hospitals Rheumatology Therapy Flare up Escalation- Standard operating Procedure** outlines the process for managing these inflammatory arthritis flare patients in a timely, clearly communicated way with actions documented in a secure central MDT accessible location. This procedure also assists communication as the Rheumatology therapy and Rheumatology nursing/ consultant teams are not co-located at the Florence Nightingale Hospital.

2. SOP Governance

Department: Rheumatology Therapy/ Rheumatology	**No of pages**: 4	**Version & Date**: V1 October 2023
Author: Chloe Kirk Clinical Specialist Physiotherapist Rheumatology	**Authorised by**: Barbara Douglas Clinical Specialist Nurse lead Rheumatology	**Review date**: 31/10/24
Frequency and Time frame: *Annual*		

3. Key indicators, output, or purpose from this procedure

The purpose of this procedure is to ensure Rheumatology patients that attend therapy in flare are managed appropriately in a timely manner and communication regarding their care and plan/ handover between therapy and nursing teams is communicated accurately. This SOP is increasingly important due to the geographical separation between the Rheumatology clinic M and Rheumatology Therapy split between the Physiotherapy department and corridor between Ward 4 and 5.

Therapy time is lost when managing these 'flare up' patients impacting on therapy patient caseloads/ clinic lists.

Rheumatology patients should have access to medical support in flare in accordance with:

Rheumatoid arthritis in adults: management NICE guideline Published: 11 July 2018 www.nice.org.uk/guidance/ng100

1.9 Monitoring 1.9.1 Ensure that all adults with RA have: • rapid access to specialist care for flares

4. Data Source(s)

Internal Derby Rheumatology/ Rheumatology Therapy SOP

5. Process

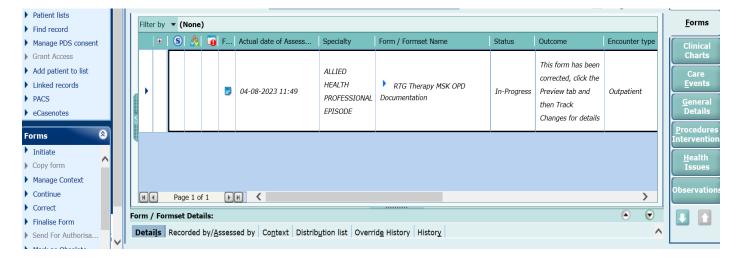|		
1.	Set out instructions of **what** to do, similar to current process. Where detailed guidance of *how to do it* is appropriate, use hyperlink to supporting instructions in section 10	☑

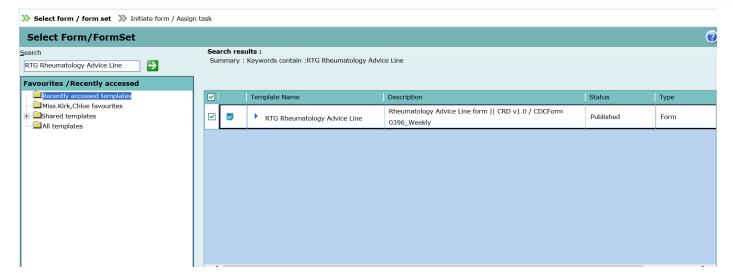| ①	2.	Where there are checks, decision points or potential sign-off/ stage boundaries, indicate so that these are distinct from other steps within the process	☑
	3.	*etc*	☑

How to escalate an Inflammatory Arthritic patient in flare to the Rheumatology Nurses

1. **Call and discuss** the case with the Rheumatology senior nurse (Barbara Douglas, Queila Araujo or Paige Morrissey) or the shift co-ordinator on **07384245457, Nurse office Ext 254919 Senior nurse office 254896/254843**
   - Patient name , hospital number, age, diagnosis
   - Reason for escalation, signs of flare, medication if relevant etc.
   - Agree plan
     - send patient down to Clinic M for review today, confirm timescale
     - Patient to be called by nurses, nurse name, day and time agreed
   - Write Rheumatology Advice Line form for nurses to pick up with patient/ action

2. **Discuss plan with patient**, if they need to attend Rheumatology clinic M then direct then there. The nurse in charge/ names nurse that the case has been discussed with will be made aware by clinic M reception and will access the information on the Lorenzo Advice line Form

3. **Complete the Lorenzo Rheumatology Advice line Form**
   - Select patient on Lorenzo (all patient demographics are automatically pulled through on the referral, no need to add)
   - Select Forms tab

- Select **Initiate**
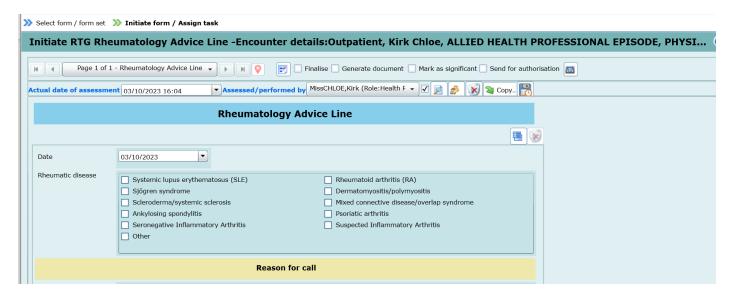- In the search box – start typing **RTG Rheumatology Advice Line** (once you have used this form once it will automatically come up in your options without needing to search) Select the green box and press next (at the bottom right hand side)
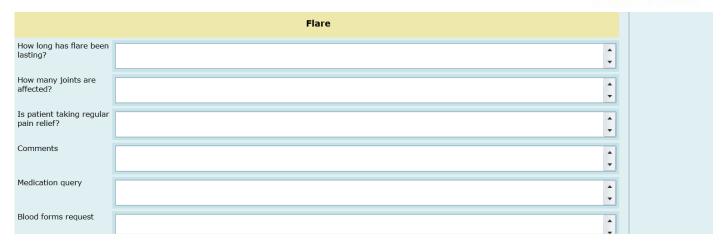

On the Advice line form
- Tick relevant diagnosis
  You do not need to fill in any other sections other than FLARE
- Scroll down to the **flare** section

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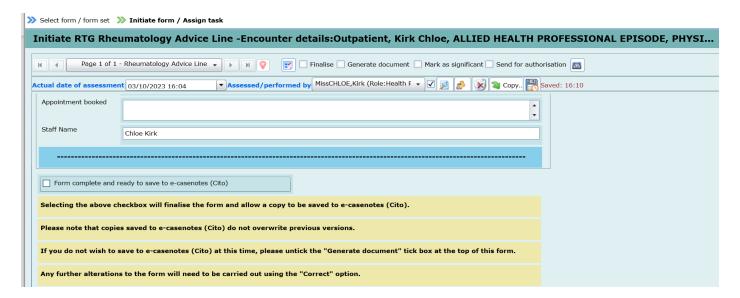| Flare	
How long has flare been lasting?	
How many joints are affected?	
Is patient taking regular pain relief?	
Comments	
Medication query	
Blood forms request	

In the **Flare Section**- complete the following:

- How long as the flare been?
- How many (which) joints are affected?
- Is the patient taking regular pain relief?
- Comments
  - Add additional factors fatigue/ hot / red / swollen joints
  - Add additional concerns
  - Which nurse you spoke to, when and the agreed plan (re. pt to attend Rheumatology clinic, same day, to be contacted by telephone, to be made a review appointment)
  - Information/ communication with the patient
  - Type your name and designation date and time

At the end of the form **Do not click the box** 'the form is ready to save and send to e-casenotes'. This allows the nurse completes the patient consultation/ actions to add to this record before it is uploaded to cito, where clinicians can view.

Select form / form set　Initiate form / Assign task

Initiate RTG Rheumatology Advice Line -Encounter details:Outpatient, Kirk Chloe, ALLIED HEALTH PROFESSIONAL EPISODE, PHYSI...

Page 1 of 1 - Rheumatology Advice Line ▾　▶ ▶I 📍　　☐ Finalise ☐ Generate document ☐ Mark as significant ☐ Send for authorisation

Actual date of assessment 03/10/2023 16:04 ▾ **Assessed/performed by** MissCHLOE,Kirk (Role:Health F ▾ ☑ 　　　　Copy.. 🕐 Saved: 16:10

Appointment booked	
Staff Name	Chloe Kirk

☐ Form complete and ready to save to e-casenotes (Cito)

Selecting the above checkbox will finalise the form and allow a copy to be saved to e-casenotes (Cito).

Please note that copies saved to e-casenotes (Cito) do not overwrite previous versions.

If you do not wish to save to e-casenotes (Cito) at this time, please untick the "Generate document" tick box at the top of this form.

Any further alterations to the form will need to be carried out using the "Correct" option.

- **Remember to press finish** so this can be viewed and updated by the nurses
- The information will be kept on Lorenzo and avoids a need for a papercopy

For Nurses

- The patients record on the Advice Line form can be opened, viewed and update related to the nursing actions taken. When the entry has been completed, the box 'Form completed and ready to save to e-casenotes (cito)' can be ticked and it will be uploaded to cito.

6. Validation Checks

These might be included within the process in (5) above, but validation of data is absolutely critical, so suggest that there should be a description of validation checks required that recaps checks within the process above, and might also add further checks to be completed on the final data set

Validation that personal details are correct and cross checked before creating a referral on Lorenzo

7. Sign off (separation, supervision, authorisation)

Stage/ purpose	Name and role	Date (how/ where evidenced)
Peer review:	Specialist Rehab and Therapies Clinical Governance committee	14/11/23
Supervisor/ Lead review:	Therapies Lead	14/11/23
Information Asset Owner/ Trust Lead:	Clinical Specialist Physiotherapist Rheumatology	14/11/23
	Clinical Specialist Nurse lead Rheumatology	

Presented at UHDB Consultants Rheumatology meeting 7/11/23

8. Information Governance

Record details of any IG considerations and approvals – for example, are data flows identified and documented, are information sharing agreements in place where applicable, is there a need for DPO advice, is the purpose and legal basis for processing and sharing clear?

The information transfer form (Rheumatology Advice line form) is created in Lorenzo which is IG protected and demographic data pulled centrally

9. Export/ use of data

Detail where/ how the information is to be used/ shared/ uploaded or exported. Include any specific considerations such as the format and whether there is a need for password protection

The information will be kept on Lorenzo in the patients electronic record and avoids a need for a paper copy