

# WORKING IN PARTNERSHIP TO ENHANCE THE UROLOGY PATIENT PATHWAY

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## BACKGROUND

In May 2013 our local hospital began working in partnership with company nurses from the private sector. The aim was to collaborate with experts in order to offer best practice. As dedicated urology wards disappear, so do the specialist ward urology nurses. Working in partnership meant personalised care involving the patient and family, through primary and secondary care.

## INTRODUCTION

To demonstrate the successful collaboration between NHS and company nurses, thus dispelling preconceived ideas. This results in a positive patient experience and an improved revolutionary service for the urostomy patient.

*"Growing demand and reduced budgets mean hospitals need to start providing services in different ways in order to provide high quality, holistic services for their local populations." (Addicott 2013)*

Our aim was to develop and deliver a gold standard service

## PATIENT PATHWAY

Throughout this pathway the excellent channels of communication between the NHS Urology Team and Company Stoma Nurses were paramount.

## PATIENT HISTORY

John is a 75 year old gentleman with muscle invasive bladder cancer. He was previously fit and well. This is the pathway highlighting the first 3 months following Robotic Cystoprostatectomy and formation of Ileal Conduit.

NHS UROLOGY TEAM	COMPANY STOMA NURSE
Receive referral from GP	
Consultation and investigations	
MDT (Multidisciplinary Team) decision made for surgery	Referral from NHS
Consultation with urologist and Clinical Nurse Specialist	Home visit, pre-operative advice and site abdomen.
Pre-operative assessment	
Patient admitted for operation	
Daily Urology team review	Day 1-7 daily teaching by Stoma Nurse
Discharged from ward by Consultant with ongoing Clinical Nurse Specialist support	Day 7 Stents removed. Intramuscular Gentamicin cover given. Prepared for discharge
6 week Urology outpatient follow up post MDT	Routine Home Visit within one week of discharge, then at one month and three months.



## CONCLUSION/SUMMARY

Working in Partnership is effective. As a team we are proud of our service and feel reassured that our patients are receiving expert care both in the hospital and community.

Excellent communication has meant a seamless pathway and a trusted mutual respect between the patient and the wider multi-disciplinary team with on-going Clinical Nurse Specialist support.

## LEARNING OBJECTIVES

Working in partnership; a seamless service between primary and secondary care is revolutionary practice that embraces communication, education and evolving positive patient experience

## REFERENCES

Addicott 2013 King's Fund Working together to deliver the Mandate: available at <http://kingsfund.org.uk> [accessed 09 June 2015]