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The Introduction of Inter-collaborative Patient Pathway For Substance Misuse Patients

Introduction

Individuals with a history of intra-venous drug abuse can develop a degree of venous insufficiency, either through the damage of veins from the actual injection or the formation of deep vein thrombosis, a common complication of IV drug use. Long term venous insufficiency can result in painful lower limb ulceration that can negatively effect quality of life. This patient group can be challenging to management due to problems with engagement and concordance; patients often have chaotic lifestyles with a range of health needs. A care pathway was developed to promote healing through implementation of the well being model and utilisation of the multi disciplinary team.

Methods

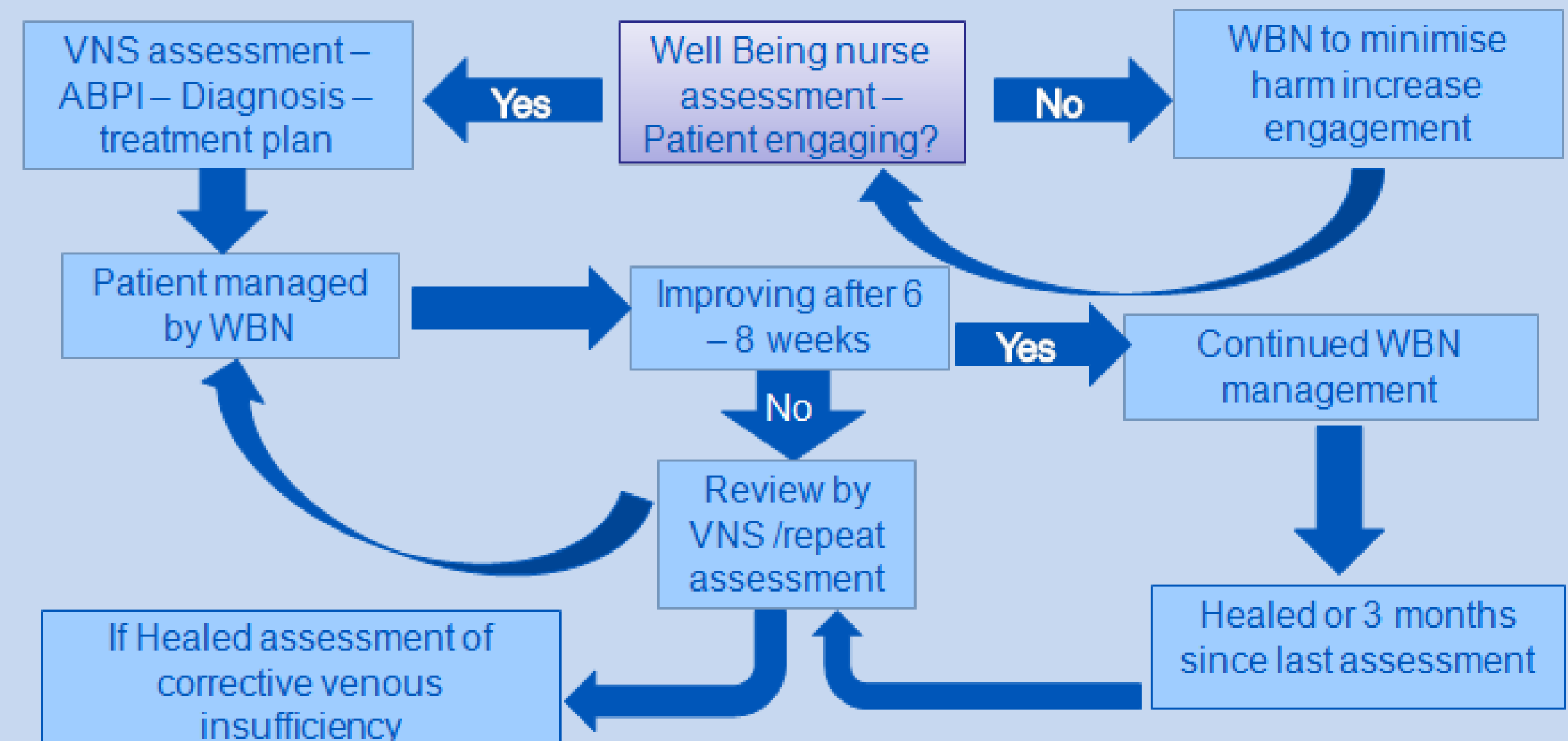
The care pathway was designed jointly by the Well Being Nurse team (based within the PCT substance misuse service) and the Vascular Nurse Specialist team (based within the acute trust). The nursing teams were able to bring together their expertise of dealing with this specific clients group and the knowledge regarding effective management of lower limb ulceration; to form a pathway that promotes optimal healing by ensuring appropriate evidence based care, whilst promoting general well being and holistic recovery from their addiction.

Results

Over 50 patients have used this model over the last year (2009-2010). Healing rates have increased, there has been a reduction in GP visits and none of the patients on the pathway have attended local Accident and Emergency departments or been admitted to acute services due to leg ulceration or cellulitis. The Well being model incorporates initiatives that improve mental well being, as well as physical healing thereby promoting re-integration into society.

Discussions

Pathways for patients with leg ulceration have been in place for a number of years but when treating this challenging patient group, pathways need to be modified and delivered by the most appropriate practitioner to ensure effective treatment. Nursing teams are often experts in leg ulcer management, but lack skills and knowledge relating to substance misuse.



Care Pathway

Conclusion

Healing of the leg ulcer is only one part of this patient group's journey, with the final destination being overcoming drug dependency. This is often extremely difficult, as it not only involves tackling the addiction, but also embarking on and maintaining major lifestyle changes, this is where the unique skills and knowledge of the well-being nurses play an essential part. The design and implementation of an inter-collaborative care pathway for this specific patient group ensures primary and secondary care creates a seamless service, providing best quality care that addresses the true holistic needs of the patients.