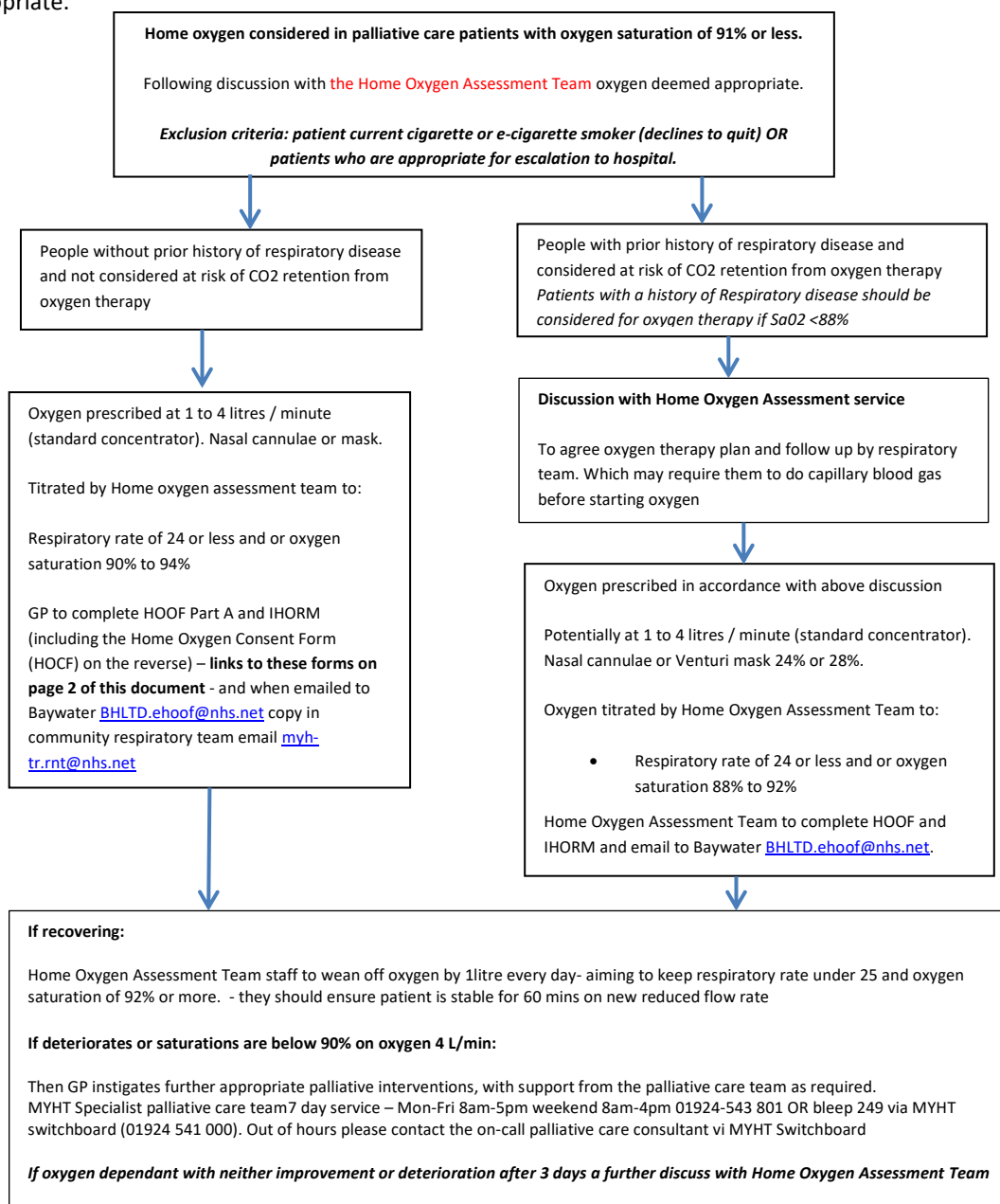


## (1) Wakefield Older People with Frailty and COVID19 Care at Home – Oxygen Flow Chart

Primary or Community Care Clinicians should not routinely complete Home Oxygen Order Forms (HOOFA and IHORM). The Home Oxygen Assessment Team should be contacted in the first instance to establish if a patient may require home oxygen therapy.

**This flow chart should ONLY be used when the patient / carer and GP have agreed that the patient is approaching end of life and that admission to hospital for a suspected / confirmed case of COVID is NOT in the patient's best interests.** The GP agrees to support the patient in the home or Care Home. This guidance should NOT be used for patients where active treatment escalation (including hospital admission) is appropriate.



### **How to contact the Respiratory Service for advice**

If any advice is needed with regard to the prescription or on-going management of oxygen therapy eg around equipment and completing HOOFs and IHORMs, please contact:

The Home Oxygen Assessment Team 01977 747437 (Monday –Friday 08:30-17:00)

Additional Contact Numbers out of hours

- Respiratory Specialist Nurse on duty via PERT 01924 541827 (Saturdays and Sundays 08:30-16:30)

The Community Respiratory Service – Home Oxygen Assessment Team will complete HOOF forms for any patients with pre-existing respiratory disease that may be at risk of Type 2 respiratory failure.

### **Keeping the Respiratory Service informed**

The Respiratory Service needs to be aware of any patient on oxygen at home. This may be patients who have been discharged from hospital, or commenced on oxygen in the community or at home this includes patients who have been given oxygen as a palliative measure. Email us on [myh-tr.rnt@nhs.net](mailto:myh-tr.rnt@nhs.net) to inform of all such patients.

### **Admission avoidance**

The main reason patients will be prescribed oxygen for admission avoidance will be for symptom control in palliative care. The GP is able to prescribe this by completing a HOOF Part A form (registration is required).

GPs must also complete an Initial Home Oxygen Risk Mitigation form (IHORM) **It is important that both the IHORM AND the Home Oxygen Consent Form (HOCF) on the reverse of the IHORM is completed and sent with the HOOF Part A, otherwise Baywater will reject the referral.** Completed forms should be emailed to Baywater. Both forms can be found here:

<http://skyline.wakefieldccg.nhs.uk/Interact/Pages/Content/Document.aspx?id=3992>

Upon installation the patient/carer will be provided with a demonstration on the equipment by Baywater

### **Discharge from hospital**

It is anticipated that if a patient requires high levels of oxygen then they will remain in hospital until they are weaned down to 1-2 litres. The Community Respiratory Service – Home Oxygen Assessment Team will complete HOOF forms for patients prior to discharge and follow up in the community as required.

### **Ongoing management and monitoring**

Visits may not be necessary from the Respiratory team for every patient, for example if they are palliative and all of their needs are being managed by the GP and Palliative Care Team. It is not always necessary to be checking oxygen saturations in palliative patients - we usually go on the respiratory rate settling <25 with oxygen and other pharmacological and non-pharmacological management of breathlessness

The Respiratory Service have telephone access to a Respiratory Consultant within MYHT each day. If any patients within Wakefield Care Homes or managed in the community would benefit from being discussed in with the Respiratory Consultant then please refer to the Community Respiratory Service- Monday to Sunday 08.30-17:00 (01924 541827) or Home Oxygen Assessment Team 08.30-17:00 Mon-Friday (01977 747437) .

If the Community Nursing Team requires an urgent joint visits with the Respiratory Service then this can be accommodated. Please contact the numbers above to arrange this.

### **Home Oxygen Assessment Team**

The Home Oxygen Assessment Team continues to run a service and will accept new referrals if a patient requires oxygen. The equipment can be delivered if clinically necessary within 4 hours by Baywater, this should only be used in exceptional circumstances. The Home Oxygen Assessment Team will ensure monitoring and follow up where appropriate.

Content and document agreed by NHS Wakefield CCG Community Palliative Care Group on the 10<sup>th</sup> June 2020 Review date 1<sup>st</sup> June 2021 unless clinical evidence changes

Produced with the support of Dr Owen Johnson and MYHT Community Respiratory Service and with thanks to Charlotte Coles NHS Leeds CCG.

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