



Association of Stoma Care Nurses UK

In association with:



Stoma Care Nursing Standards and Audit Tool

For the Newborn to Elderly

Revised edition July 2021



Stoma Care Nursing Standards and Audit Tool
For the Newborn to Elderly

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It is with kind permission of NICE to be able to use their guideline framework to structure these quality statements.

Foreward from Dr Gabrielle Thorpe



I am delighted and honoured to write the foreword for the 2021 Association of Stoma Care Nurses UK (ASCN UK) Standards and Audit Tool for the Newborn to Elderly. As a Stoma Care Nurse Specialist since 1997, combined with an academic position since 2009, I have studied closely the advancement of stoma care nursing as a specialism and now play an integral role in promoting the advancement of individual Specialist Stoma Care Nurses (SCNs) through the Advanced Stoma Care course at UEA.

Stoma care nursing continues to see enormous changes and challenges. Over the past six years, since the publication of the ASCN UK Standards in 2015, procurement and prescribing have been placed under the spotlight as our whole specialism has risen to the challenge of formulating procurement solutions to safeguard the sustainability of the NHS while ensuring that patient experience and autonomy are not compromised. This process has demanded, and continues to demand, knowledge and understanding of the political, commercial and ethical context in which stoma care nurses practise and demonstrates the fundamental importance of strong clinical leadership in stoma care nursing.

The ASCN UK Standards are particularly relevant in a climate in which strategic decisions about service delivery are increasingly taken locally and regionally, rather than nationally, and in which there remains huge variation in the UK in the provision and funding of services. It is essential that standards for practice are available to ensure that Specialist Stoma Care Nurses receive the support and guidance they require to provide effective, patient-centred stoma care services that reflect professionally recognised benchmarks. The ASCN UK Standards not only provide flexible and pragmatic professional guidance for stoma care nurses working in a range of clinical contexts and with diverse patient populations, but also offer clarity and structure for service evaluation and audit of care and services. As a framework to facilitate the review and measurement of service performance throughout the patient pathway, the ASCN UK Standards can be used to demonstrate high quality service provision to managers and commissioners, and to identify areas for improvement.

Professional, service and practice transformation is unlikely to happen if we only examine practice through our own lens, that is, from our own professional perspective and that of the service in which we work. Scrutinising the evidence, gaining insight into others' services and practice and listening to our patients all facilitate evaluation of practice and provide insight into areas for improvement. This philosophy is at the heart of the ASCN UK Standards, which draw on these three essential components of evidence-based practice in the structure, process and outcome relating to each quality statement.

As you read through these standards, I encourage you to reflect on the strengths and limitations of your own practice, as well as those of the service you provide, to identify areas for improvement and to continue to advance stoma care nursing as a specialism.

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Introduction to the ASCN UK Stoma Care Standards

We are delighted to bring this 3rd edition of the ASCN UK Stoma Care Standards to you, following the initial successful launch at the ASCN UK conference in Wales October 2013. The Standards include standards for children from the 2nd edition 2015. The Stoma Care Nursing standards are for all individuals from the newborn to the elderly with bladder and bowel stomas. Within the Quality Statements we have added any additional specific Paediatric specifications to the bottom of the process section with the PSNG bullet point.

The role of the Specialist SCN has evolved over the last thirty years, but the fundamental principles have remained the same. Specialist SCNs are experts in ensuring psychosocial and educational aspects of care are explored alongside physiological assessments. SCNs assist people in preventing and alleviating stoma related issues, whilst promoting health and wellbeing to improve quality of life and the ability to manage their stoma independently.

Discussions regarding the impact of commissioning on stoma care show that the provision, funding and accessibility to a Specialist SCN varies greatly throughout the UK. The specific elements of a stoma care pathway encourage stakeholders to review and commission services that meet the needs of the person with a stoma, by using the NICE guidelines to describe the structure. Describing the **structure** of the care interaction, the **process of care** and the expected **outcomes** also provides a framework for audit. Consequently, these standards do not prescribe the frequency or environment of contact with the Specialist SCN but define the needs of the individual patient along their treatment pathway and beyond. The core service provision for stoma care should consider the requirements of those in vulnerable groups, including those who need to receive care at home, care home settings, those with mental health problems, prison populations and socially deprived populations.

Our objective is to focus on the substance and outcomes of care, alongside patient experiences, to provide an holistic approach thus ensuring **the provision of high quality stoma care throughout the UK**. Benchmarking practice and providing a selection of audit tools to measure these standards provides Specialist SCNs with the evidence to demonstrate the quality and value of their services.

In developing these standards, the working party has drawn on previous literature and standards of care, along with professional knowledge, expertise and patient experience. It was felt that a consistent approach to the use of evidence and expert judgement providing the public, health and social care professionals, commissioners and service providers with definitions of high quality care should be used. For this reason the NICE framework for guideline development was adapted.

These standards reflect current NHS reforms and advances in surgical techniques, providing a benchmark against which quality can be assessed, by describing either a minimum level required for safe and effective practice, or a level of excellence, thereby encouraging best practice. However, these standards are a general guideline that can be adapted to your service within your local Trust policy or area of practice.

Use of terms

'Patient' has been used for the individual with a new stoma (Ostomist/Ostomate), up to the three month post-operative period. After this acute phase, we have considered the **'person with a stoma'** to ensure a 'person-centred' approach.

'Carer' has been used to encompass parents, or patient's agreed carer which could be significant others, guardian, paid carer, relative or sibling.

Specialist Stoma Care Nurse (SCN) – is a Nurse Specialist in Stoma Care/Clinical Nurse Specialist in Stoma Care, who is a Registered Nurse and demonstrates expertise and undertaken a specialist educational qualification in the area of Adult and/or Paediatric Colorectal/Urological nursing care and practice.

To achieve this, the registered nurse needs to have undertaken supervised practice, which is directed at improving the health and quality of life for people with a stoma. With assessment and completion of practical competencies and ongoing knowledge gained from specific educational programs to the level of 6 (Degree) /7 (Masters), the nurse will be able to perform as an expert and fulfil the various sub-roles which warrant this title.

The role of each stakeholder in ensuring an appropriate service provided is linked to the standards by identifying that:

Service providers: Ensure systems are in place for the person with a stoma to access advice, support and stoma or product review, as indicated by the individual and/or family, carers and other healthcare professionals.

Healthcare professionals: Ensure a robust referral system is in place to enable timely access to a Specialist SCN. The Specialist SCN facilitates and enables communication regarding the individual with a stoma with wider members of a multi-disciplinary team (MDT), within both the Primary and Secondary care settings (e.g. Social Worker, Occupational Therapist, Physiotherapist, Clinical Psychologists etc). In relation to paediatrics; this is extended to and may include such professionals as Health Visitors, School Nurse/Teacher, Play Specialist, and Inclusion Officer.

Commissioners: Ensure commissioning incorporates an appropriate pathway to ensure long term/lifelong access to specialist stoma care advice and assessment or review, to support the individual with a stoma.

Equality and Diversity: Includes all information about treatment and care, taking into account age, social factors, language, accessibility, physical, sensory or learning difficulties and people in vulnerable groups. Consideration should be taken to ensure information is ethically and culturally appropriate. For those who do not speak or read English there should be access to a recognised interpreting service or advocate (NICE 2016).

Implementation of these standards will ensure that stoma care provision within the UK will meet key requirements of the strategies set by the Department of Health. Quality assurance is clearly relevant to healthcare and audit as a means of maintaining and achieving high quality care. Audit aims to improve patient outcome, develop healthcare provision and educate health care professionals. This can be achieved by encouraging change using a reflective review of practice ultimately leading to improved patient experience and outcomes.

Paediatric Stoma Nurse Group (PSNG) The Paediatric Stoma Nurse Group (PSNG), established in 2005 by paediatric (children) stoma nurses in the UK/Ireland working in this speciality, has developed in a valuable, proactive independent forum, working closely with industry in research and development and as a group they have devised a variety of paediatric specific documentation. They meet three times a year and usually have an annual study day. For further information please go to their website www.psng.co.uk or contact them at info@psng.co.uk.

Key facts for ASCN Stoma Care Standards 2021

- 1 It is reported that there are approximately 188,358 people with a stoma in the UK. (BHTA survey estimate 2019).
- 2 There are about 28,080 new stomas formed every year with an equal split between temporary and permanent (ACGBI 2015).
- 3 It is estimated that stoma appliances and accessory products cost the NHS approx £322m (NHS 2018).
- 4 There are over 600 Specialist SCNs in the UK (Coloplast 2010)
There are currently 30 members of Paediatric Stoma Nurse Group (PSNG) (2014).
- 5 Stomas can be performed for a variety of bowel and bladder conditions.
- 6 It is recommended that a Specialist SCN workload should average around 100 new patients per year. This equates to 3 stoma care nurses per 500,000 population (ACPGBI 2015).
- 7 Patients with a stoma may develop complications that are debilitating and life changing.
- 8 Patients with a stoma will require Specialist SCN input in both acute and long term management
- 9 Specialist SCN case load/client groups can range from neonatal to the elderly.
- 10 Approximately 53% of rectal cancer patients undergoing major resection had a stoma at 18 months, and one third of patients for Anterior Resection had a stoma at 18 months (National Bowel Cancer Audit 2019).
- 11 Stoma formation will have a significant impact on physical, psychological and emotional wellbeing (Wallace 2016).
- 12 SCN need to be aware of guidance within Managing Conflicts of Interest in the NHS (NHS England 2017) as well as the NMC Code (NMC 2018).

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Quality Statement 1: Referral for potential/actual planned stoma formation

Patient (+/- carer) will be referred to a specialist stoma care nursing service in a timely manner to enable adequate time for pre-operative information to be delivered.

- Structure:**
- Evidence of referral to the Stoma Care Service.
 - Evidence of appropriate information (multimedia) provision regarding surgery and subsequent stoma management.

Process: The Specialist SCN will:

- Identify specific referral information to include; diagnosis, anticipated surgery, past medical history (PMH) and stoma type, demographics.
- Identify PMH/family/medication/allergies/psychiatric history as well as ethical, cultural considerations and cognitive skills.
- Assess this information and identify any concerns that may initiate further specialist assessment or involvement of other care agencies.
- Identify when surgery is indicated and contact patient to agree timely date for a consultation for the provision of information and stoma site marking.
- Provide a level of information appropriate to the individual patient's needs utilising written, verbal, social and multimedia options as appropriate.
- Facilitate opportunity for the patient to ask questions and seek clarification in relation to the information provided.
- Offer information regarding voluntary organisations and the opportunity to meet another ostomist if appropriate or requested.
- Provide the patient with relevant contact details for the Specialist SCN.
- Record the information provided in relevant medical records.

PSNG Assess the level of childhood development and the level of involvement in own stoma care. Identify the appropriate Clinical Nurse Specialist to provide support to both the family and Specialist SCN.

- Outcome:**
- The Specialist SCN has received adequate referral information in a timely manner.
 - Patient confirms they received the opportunity to meet the Specialist SCN pre-operatively for information and siting.
 - Relevant agencies report the Specialist SCN has liaised effectively with them.

Patient consented for potential/definitive stoma formation will be provided with relevant information and have the stoma correctly sited by a registered Specialist SCN with a defined level of competency.

- Structure:**
- Evidence of a qualified Specialist SCN to provide information.
 - Evidence of appropriate written information regarding surgery and subsequent stoma management.
 - Evidence of a defined level of competency to facilitate effective marking of appropriate stoma site.

Process: The Specialist SCN will:

- Provide a confidential and reassuring environment.
 - Assimilate referral information to ensure relevant information is tailored to the needs of the patient.
 - Have access to patient health care records to ensure information pertinent to diagnosis and proposed correct stoma site is marked in accordance with operation to be carried out.
 - Include family/carers with consent/agreement of patient.
 - Utilise specialist skills to assess the patient's ability to understand information regarding the importance of pre-operative information and optimum site for stoma formation.
 - Provide a level of information appropriate to the individual patient's needs utilising written, verbal, social media options as applicable and maximise opportunities to promote involvement in the process.
 - Discuss lifestyle issues and expectations and any necessary adaptations in order to resume activities following surgery.
 - Offer the opportunity to meet another/other individuals with a stoma as applicable.
 - Gain verbal or written consent (in line with local Trust policy) prior to physical assessment for marking of stoma site.
 - Assess factors that influence the choice/limitation of stoma site for each patient, by examination, observation and discussion. This should include contributory factors such as lifestyle, culture and disabilities. (e.g. manual dexterity, visual impairment, religious beliefs), which should be documented in nursing records.
 - Mark the optimum site(s) for the stoma.
 - Review the definitive marked site(s) with the patient.
 - Record the outcome of site marking(s) in relevant medical records.
 - Discuss the risk of surgery and hernia.
 - Give a pre-operative pack or practice pack, which will include a selection of relevant pouches and literature for the patient. Give patient the opportunity to practice with a stoma pouch prior to surgery.
- PSNG** Assess and plan needs for children within early years and educational level.
- Facilitate opportunity for the patient/carers to meet other patients who have a stoma: signpost them to age appropriate support groups to ask questions and seek clarification in relation to the information provided.

- Outcome:**
- Patient confirms they are satisfied with the marked site for stoma formation.
 - Patient states they were involved in selecting the stoma site.
 - Patient states they were able to ask questions.
 - Patient recalls relevant information on questioning.
 - Relevant agencies report the Specialist SCN has liaised effectively with them.
 - Patient/carer states they had the opportunity to meet other patients and were signposted to age appropriate support groups.
 - Patient confirms that they had the opportunity to try pouches and practice applying prior to surgery.

Patient with newly formed stoma(s) is assessed by a Specialist SCN and an individualised stoma care plan is formulated.

- Structure:**
- Evidence of a Specialist SCN qualified to undertake a specialist assessment and develop plan of care.
 - Evidence that the patient is able to demonstrate safe stoma care practice (+/- carers).

Process: The Specialist SCN will:

- Assess the patient with a stoma and create a personalised care plan.
- Liaise with the MDT to ensure continuity of care plan as per local stoma pathway.
- Observe and document the site of the stoma (if an emergency or raised in a different place than sited for unexpected reasons) colour, warmth, peristomal skin condition, muco-cutaneous junction and output.
- Explain and create an appropriate template according to shape and size of the stoma.
- Co-ordinate the education of the new stoma patient (+/- carer) in the daily care of the stoma, within a conducive environment for teaching and provide written information as needed.
- Assist the patient in choosing an appropriate stoma appliance, offering them a choice of products suitable to their needs.
- Provide relevant dietary and hydration advice to the new stoma patient.
- Explain any drug treatments specific to the stoma with patient to ensure concordance.
- Discuss lifestyle issues and expectations and any necessary adaptations in order to resume activities following surgery.
- Provide relevant advice and training in pelvic floor and core muscle exercise.
- Educate and re-assess the patient (+/- carer) in the care of their stoma including problem prevention and problem solving.

- Outcome:**
- Patient identifies they are satisfied with their personalised plan of care in relation to their stoma.
 - Completion of appropriate documentation as per local policy.

Quality Statement 4: Post-operative stoma care management (psychological)

Patient with a newly formed stoma (+/- carer) is assessed by a Specialist SCN and an individualised stoma care plan is formulated.

Structure:

- Evidence of a Specialist SCN who has the skills to explore psychological aspects of living with a stoma in conjunction with practical elements of care.

Process: The Specialist SCN will:

- Assess/re-assess the patient (+/- carer) and create an individualised care plan.
- Discuss lifestyle issues and necessary adaptations in order to resume activities following surgery.
- Discuss and explore any concerns in relation to relationship and sexual health issues as appropriate.
- Explore body image concerns and issues.
- Observe and evaluate the patient's adaptation and adjustment to living with a stoma and amend the care plan accordingly. Consider onward referral as appropriate for counselling or psychological services according to local protocol.
- Provide appropriate health promotion information/written literature. Signpost to relevant online resources/services.
- Offer information regarding patient support groups and opportunity to meet another/other individuals with a stoma as applicable.

Outcome:

- Patient/carers has identified they are satisfied with their individualised plan of care.
- Psychological support/referral identified to assist with adaptation to occur; has been documented within the care plan.

Quality Statement 5: Preparation for discharge from hospital

Patient with a newly formed stoma (+/- carer) is provided with the appropriate information to facilitate discharge from hospital.

- Structure:**
- Evidence of a Specialist SCN qualified to undertake assessment and develop plan of care
 - Evidence that the patient with a stoma is prepared for discharge.

Process: The Specialist SCN will:

- Re-assess the patient and create an individualised discharge plan.
 - Re-assess patient's ability to be safe, confident and competent in the management of their stoma (+/- carer).
 - Educate the patient (+/- carer) in the prevention, recognition and treatment/ actions of stoma related problems.
 - Re-assess and discuss lifestyle issues (including dietary advice) and necessary adaptations in order to resume activities following surgery.
 - Provide relevant verbal, written and multimedia health promotional information as appropriate.
 - Discuss appropriate disposal of stoma appliances as per local policy.
 - Reiterate the range of stoma appliances and accessory products available pertinent to their specific stoma type.
 - Provide stoma supplies as per local policy.
 - Discuss obtaining further stoma appliances including prescription information as per local policy.
 - Discuss appropriate storage of appliances and accessory products.
 - Provide contact details for relevant Local and National support group agencies.
 - Refer patient to others involved in the care of people with stomas including GP, district nurses, care home staff, carers and family members as appropriate.
- PSNG** Assess and instigate care planning and initial arrangements for ongoing education support and contributing to Education Health Care Plan (EHCP).
- PSNG** Ensure referral to School Nurse/Health Visitor and the child/Community Nurse as required, are completed.

- Outcome:**
- Patient is independent, safe and confident in stoma care management (+/- aided by carer).
 - Patient/carer can recognise potential stoma related problems and know who to contact for assistance.
 - Patient/carer has an expressed understanding of their dietary requirements.
 - Patient is supplied with appropriate stoma supplies on discharge.
 - Patient/carer expresses they know how to obtain further stoma supplies.
 - Patient/carer expresses an understanding of physical and psychological limitations following abdominal surgery.
 - Patient is safe for discharge according to local policy.

Quality Statement 6: Short term Specialist SCN support up to 3 months

Patient with a newly formed stoma (+/- their carer) will receive appropriate continuity of care by a Specialist SCN after discharge from hospital.

Structure:

- Evidence that the patient with a stoma has had access to and received appropriate stoma care support and advice as per local defined pathway.

Process: The Specialist SCN will:

- Provide home visits and/or clinics according to local policy.
- Provide a telephone support service/virtual clinic as per local policy.
- Liaise and agree plan of care with MDT and allied health carers in the community as appropriate.
- Re-assess the stoma colour; size, function and peristomal skin condition on each Specialist SCN review as per local policy.
- Continue with the education of the patient and their carer in stoma related problems, prevention and condition management.
- Re-assess individual risk of development of parastomal hernia, re-iterating advice on core muscle exercise and support underwear as per local policy.
- Review suitability of stoma products, offering alternatives/choice as appropriate (such as colostomy irrigation/mucus fistula irrigation).
- Re-assess the patient's ability to be safe, confident and competent in the management of their stoma (+/- carer).
- Re-assess and discuss lifestyle issues (including dietary advice, exercise, sexual relationships, body image) and necessary adaptations in order to resume activities following surgery, with consideration of any cultural/religious beliefs.
- Re-assess the patient's psychological adaptation and adjustment to living with a stoma and amend their care plan accordingly.
- Monitor for signs of anxiety or depression and consider onward referral or signposting for counselling/psychological support as appropriate within local protocol.
- Provide information and contact details of national and local patient support groups/open days as appropriate including social media.

PSNG Assess and instigate information/referral for additional support e.g. play therapists, friendship groups, school trips, outside activities, training facilities.

Outcome:

- Patient (+/- carer) can convey their understanding of their local access to a Specialist SCN and follow up arrangements.
- Patient (+/- carer) identifies any stoma related abnormalities and knows how and when to contact the Specialist SCN.
- Patient/carer identifies how future supplies are obtained.
- Patient (+/- carer) identifies they are satisfied with their stoma product.
- Patient (+/- carer) identifies they are satisfied with the information given for additional support e.g. play therapists, friendship groups, school trips, outside activities and training facilities.
- Patient is able to express they are satisfied they are getting on with their life.
- Evidence demonstrated stoma-related problems are assessed, identified or planned.
- Changes to care identified and evaluated; with solution or appropriate onward referral made.
- Stoma care reviews undertaken as appropriate for the patient with a stoma as per local policy.

Quality Statement 7: Long term/lifetime Specialist SCN support

People living with a stoma have continued care and access to a Specialist SCN.

Structure:

- Evidence of qualified Specialist SCN undertaking assessment and long term support for people living with a stoma.

Process: The Specialist SCN will:

- Offer lifetime access to specialist advice/support to the person with a stoma or referral to an appropriate service to provide this.
- Re-assess the person's ability to be safe, confident and competent in the management of their stoma (+/- carer) as necessary.
- Educate the person with a stoma (+/- carer) in stoma related problems and prevention, providing the level of information appropriate to the individual needs.
- Re-assess individual risk of development of parastomal hernia, re-iterating advice on core muscle exercise and support underwear as per local policy.
- Re-assess and discuss lifestyle issues (including psychological/sociological/physiological and possible future condition management) as necessary and appropriate onward referral made if required.
- Offer appliance use review on an annual basis to support appropriate use and good prescribing practice.
- Provide telephone support service/virtual clinic.
- Promote local and national groups to encourage integration and enhance adaptation to life with a stoma.
- Ensure specialist advice and consultation is available to others concerned in the care of people with a stoma including GPs, district nurses, care home staff, carers, family members, health visitor, school nurse and childrens community nursing team as the needs of the individual may alter over time.
- Communicate changes in product usage and/or care (in writing if indicated) to the ostomist, family, carers, prescriber and hospital team as necessary.

Outcome:

- People with a stoma can identify their local access to Specialist SCN support.
- People with a stoma and their carers can access specialist advice through childhood, puberty and adulthood as they develop.
- People with a stoma report that they are satisfied with their stoma product.
- People experiencing stoma related problems are assessed and treated appropriately so that any changes in care results in resolution of this problem or an appropriate onward referral is made.
- People with a stoma lost to follow up are reminded of their local service available and how to access support.

Supporting literature

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Undertaking your audit

The aim of the following pages is to identify an audit template that enables consistency and reliability and can be used by all Specialist SCNs. Using this tool will demonstrate qualitative and quantitative data from your service delivery. It will promote standardisation of practice and benchmarking to ensure all patients undergoing stoma formation are receiving care that meets minimum standards. These templates can be amended to reflect your local service and local Trust policy to enable audit of the patient experience as well as data collection from your service delivery.

It is important to liaise with your local audit department to gain approval to undertake an audit and receive local advice. Please note the templates of the following audit tools can be downloaded from the ASCN UK website on: www.ascnuk.com

1 Patient Audit Tool

2 Stoma Care Department Audit Tool

Objective of the audit

This Audit Tool is to assist individual Specialist SCNs and NHS Trusts to determine whether their current stoma care service meets the practical and psychological needs of the stoma patient and follows the ASCN UK stoma care guidelines.

Patient group to be included in the audit

All patients who have undergone stoma formation surgery.

Sample of the audit

Inclusion Criteria - all patients who have undergone stoma formation surgery.

Exclusion Criteria - specify clearly who is excluded e.g. palliative care, those patients involved in other research/audit studies and then state the reason for their exclusion.

How many - a representative sample of 30% of the total annual stoma formations should be audited, specifying the time period over which the data is to be gathered and collated.

Timing - as the standards cover the patient pathway from admission to ongoing support in the community, it would be suggested the audit is undertaken three months post surgery.

Dataset required for the audit

The audit criteria require data to be collected from patients/carer's views and experiences and service provision. Therefore for the purpose of collating data – **the data source** can include patient interviews, nursing documentation and/or medical notes. However please note all data collection forms are required to be kept for external auditor inspections.

Compliance

The audit needs to specify how many sources were collated.

Frequency of review

The audit should be repeated periodically depending on the Trust audit strategy. A review of these patients is suggested on an annual basis.

Collation of audit results

It is a mandatory requirement for all audit projects to be registered with the Trust's Clinical Audit Department, which will advise and support the audit accordingly, including collation of results.

Patient/Family/Carer Satisfaction Audit



Please indicate **Yes**, **No** or **Don't Know** to the statements by placing a cross (X) in the appropriate box. Comment boxes are provided at the end of each section.

Prior to planned stoma surgery	Yes	No	Don't Know	Please make additional comments for the 'No' answers
My stoma was created as an emergency procedure				
My stoma was created as a planned operation				
I was introduced to a Specialist SCN				
I was involved in the marking of the stoma site and I agreed with its position before the operation				
I was given adequate verbal and written information in order to make a decision about stoma surgery				
My family/carers were included in any decision-making to a level acceptable to me				
I feel I understood the nature of stoma surgery and any complications associated with the surgery				
I was offered the opportunity to meet with another stoma patient				
Was your stoma marked by a Specialist SCN, if not by whom?				

Please see: www.ascnuk.com for Audit template

Immediately following stoma surgery and prior to discharge home	Yes	No	Don't Know	Please make additional comments for the 'No' answers
The Specialist SCN visited me the day after my stoma surgery				
The Specialist SCN oversaw how I was taught to look after my stoma				
I was aware I had an individualised stoma care plan				
I was supported and encouraged by the ward staff to become independent in my stoma care				
I discussed lifestyle issues with my Specialist SCN; diet, hobbies, culture, disabilities, travel, relationships				
I was advised of appropriate exercises I could undertake after my surgery.				
I was aware of potential stoma complications prior to going home				
I was provided with the contact number for the Specialist SCN prior to discharge home				
I felt able to manage my stoma care on discharge from hospital or care had been arranged as appropriate				
I was aware of how to obtain my stoma supplies				
I was involved in choosing the right stoma product for my needs				
My family/carer were included in all aspects of my stoma care to a level agreeable to me				
I was provided with sufficient supplies on discharge from hospital				

At home	Yes	No	Don't Know	Please make additional comments for the 'No' answers
I was visited at home by the Specialist SCN (if available in your area)				
I have been offered additional appointments in the future, either by telephone, virtual or face to face stoma clinic				
I was given time to speak with the Specialist SCN about how I felt emotionally about having a stoma				
I felt comfortable to discuss issues relating to my changed body image, intimacy, sexuality and relationships				
Any complications I have had have been explained and dealt with efficiently				
The Specialist SCN provided me with information about support groups relevant to me				
Any changes to my prescription for stoma products was communicated to my GP/prescriber				
I received support from a community/district nurse as required				
I feel my Specialist SCN is approachable				
I feel I can contact her/him easily				

Stoma Care Department Audit Tool for Demonstration of Compliance to Approved Stoma Care Standards



Please find below a template for you to collate relevant information to audit your service to compare with the standard statements. The following table is an explanation of the categories that are identified for you to complete and enable you to demonstrate the Audit cycle of:

How you obtained the information?

What were your findings?

What actions have you taken?

	Criterion	Data source:	Compliance:	Findings:	Comments
Explanation of category.	This reflects the statement to be measured.	Identify sources of data to be utilised. e.g. Patient interviews/feedback, nursing documentation, medical notes.	How many were included in the audit?	Any added details/variation to the basic compliance data. e.g. age, ethnic group.	Free text. Reference other documents. Action plan for improvement.



Audit Tool for Statement 1

Pre-operative referral/actual planned stoma formation.

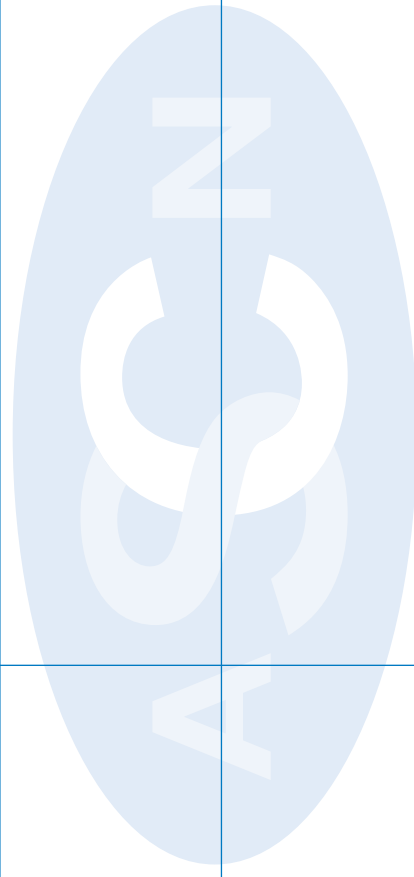
Patients (family/carers) have been informed of an intended stoma surgery and continued care by a Specialist SCN.

Number of audit:

Date audit completed:

Audit lead/manager:

Criterion	Data source:	Compliance:	Findings:	Comments:
1 Patient/carer confirms they are satisfied with the information provided				
2 Patient states they were able to ask questions				
3 Patient can recall information on questioning				
4 Patient is aware they are expected to be self-caring on discharge if able				
5 Paed PSNG specific; child/carer confirms they were satisfied with the involvement of the play therapist				



Audit Tool for Statement 2



Pre-operative preparation for potential/actual planned stoma formation.
 Patients who have been consented for potential/definitive stoma formation will have the stoma correctly sited by a registered nurse with a defined level of competency.

Number of audit:

Date audit completed:

Audit lead/manager:

Criterion	Data source:	Compliance:	Findings:	Comments:
1 Patient/carer confirms they are satisfied with the marked site for the stoma formation				
2 Patient/carer states they were involved in selecting the stoma site				
3 Patient/carer states they were given the opportunity to ask questions				
4 Patient/carer can recall relevant information on questioning				

Audit Tool for Statement 3 and Statement 4



Post-operative stoma care management (Practical and Psychological).
Patients with a stoma are assessed by a Specialist SCN and a personalised stoma care plan is created.

Number of audit: _____ Date audit completed: _____

Audit lead/manager: _____

Criterion	Data source:	Compliance:	Findings:	Comments:
1 Patient/carer can identify and is satisfied with their individualised plan of care in relation to learning their stoma care management				
2 Patient's progress in psychological adaptation has been documented				
3 Patient/carer can recall verbal or written information being provided to assist with psychological adjustment				
4 Patient/carer can recall verbal or written information being provided to assist with physical adjustment				
5 Documentation of any reported stoma complications				
6 Completion of appropriate documentation, as per local policy				
7 Is there evidence to support any onward referrals? Please specify				

Please see: www.ascnuk.com for Audit template

Audit Tool for Statement 5



Preparation for discharge from hospital.
Patients with a stoma are provided with the appropriate information to facilitate discharge from hospital.

Number of audit:

Date audit completed:

Audit lead/manager:

Criterion	Data source:	Compliance:	Findings:	Comments:
1 Documentation of patient being independent in stoma care management (+/- aided by carer)				
2 Patient/carer can recognise potential stoma related problems				
3 Patient/carer can confirm who to contact for assistance after discharge and when they will next be reviewed				
4 Patient/carer can identify their dietary and hydration requirements				
5 Patient/carer provided with written and verbal information related to abdominal/core muscle exercise. As well as any other physical limitations specific to their surgery.				
6 Patient/carer is supplied with appropriate level of stoma supplies, according to local policy				
7 Patient/carer is safe for discharge according to local policy				
8 What was the length of stay?				

Audit Tool for Statement 6



Short term (up to 3 months) follow up care by a Specialist SCN.
Patients with a newly formed stoma will receive appropriate continuity of care by a Specialist SCN after discharge from hospital.

Number of audit:

Date audit completed:

Audit lead/manager:

Criterion	Data source:	Compliance:	Findings:	Comments:
1 Patient knows how to access the Specialist SCN				
2 Patient/carer can recall follow up arrangements with the specialist Specialist SCN				
3 Patient/carer can identify any stoma-related abnormalities which require contacting the Specialist SCN				
4 Was the patient re-admitted to hospital due to stoma related problem?				
5 Is there evidence of stoma-related problems being identified and an effective solution achieved?				
6 Did the Specialist SCN make any onward referrals?				
7 Is there evidence the patient/carer was provided with information regarding patient support groups and/or meeting another person with a stoma?				
8 Patient/carer can recall how future supplies are obtained				
9 Patient/carer is satisfied with their stoma product and is aware of alternatives				
10 Has a product appliance review been undertaken as appropriate for the patient with a stoma in line with local policy?				

Please see: www.ascnuk.com for Audit template

Audit Tool for Statement 7



Long term/lifetime Specialist SCN support.
People living with a stoma have continued care and lifetime access to a Specialist SCN.

Number of audit:

Date audit completed:

Audit lead/manager:

Criterion	Data source:	Compliance:	Findings:	Comments:
1 People with a stoma (+/- their carer) can identify they have access to Specialist SCN support				
2 People with a stoma (+/- their carer) can identify they are satisfied with their stoma product(s)				
3 There is evidence of people with a stoma-related problem being assessed, treated or planned changes of care identified and an effective solution achieved				
4 Were any onward referrals made by the Specialist SCN				
5 Were people with a stoma offered a regular appliance review in line with local policy				

Disclaimer

This publication contains information, advice and guidance to help members of ASCN UK. It is intended for use within the UK but readers are advised that practices may vary in each country in the UK.

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Stoma Care Nursing Standards and Audit Tool
For the Newborn to Elderly



Association of Stoma Care Nurses UK