

Oxygen Briefing for Bassetlaw Hospital





General Notes

1. Current Supply Difficulties

From 1st February 2006, AIR products have experienced difficulties in supplying oxygen on time. Prior to discharging patients, it is recommended that AIR products are first contacted to confirm that a supply can be made. Note there are currently long delays in help line response. Once confirmed the HOOF can be faxed through. Community pharmacies no longer have a contract to provide a full Oxygen supply service but may be able to supply an occasional cylinder up to the end of March 2006. If AIR products are unable to deliver, it is recommended that a member of the discharge team contact a local pharmacy prior to discharge, to confirm a supply can be made. And an FP10 provided to enable that supply.

2. When to use the HOME OXYGEN ORDER FORM (HOOF)

The HOOF replaces the FP10 prescription for oxygen and is required for all patients who use home oxygen cylinders of any type from 1st February 2006.

After this date, oxygen will no longer be able to be ordered using an FP10.

[NB: Concentrator patients who do not use cylinders do not need a HOOF].

Once the assessment services are fully set up, Ambulatory or long-term oxygen should not normally be ordered without prior assessment by the specialist respiratory team.

When to use the HOME OXYGEN CONSENT FORM (HOCF)

Complete a Home Oxygen Consent Form (HOCF) at the same time as the HOOF to obtain patient consent for sending the order to the supplier, Air Products, as they are 'outside' the NHS.

3. Emergency oxygen and out-of-hours supply

Call Air Products on 0800 373580 to initiate a supply within 4 hours. Complete the HOOF and HOCF as above and fax the HOOF to Air Products as confirmation of the order as soon as possible. **If ongoing oxygen is needed (beyond 3 days), complete a second HOOF** so that Air Products know when the emergency supply ceases and the ongoing supply begins.

Dealing with Emergencies

Air products will deliver oxygen in an emergency within 4 hour hours. If oxygen is required in less than four hours, the following options should be considered:

- > Call Air Products. They may be able to accommodate a faster delivery time
- > Make necessary arrangements for emergency treatment e.g. call ambulance.

4. COMPLETING THE HOOF ORDER

- The form should be completed in full as omissions will result in calls from AIR products for clarification and a possible delay in supply
- Short burst, Long term and ambulatory oxygen will be delivered within 3 days of HOOF and will remain active until superseded by another HOOF, or cancelled.
- When completing a HOOF on discharge next day supply can be specified
- A HOOF for emergency oxygen is valid for 3 days only and the oxygen will be delivered within 4 hours. If oxygen is required beyond the 3 days, an additional HOOF for long term use should be completed at the same time
- Sections 1 5:
 - o Mostly self explanatory
 - Until a full assessment service is available, the clinical contact (section 3) will be the GP or respiratory lead practice nurse



- Ensure that paediatric, consent and permanent home address Y or N boxes are ticked.
- Patient consent is required prior to sending the order. If not already provided, complete the Home Oxygen Consent Form
- The PCT name refers to the locality where the patient is registered
- The Hospital name should be completed if the patient is under the care of the hospital trust specialist team.
- If address for supply is e.g. work or school, provide additional information in section 13
- Sections 6 15:
 - If a holiday order, provide additional details in section 13, including the full holiday address, duration of supply
 - If oxygen is required in the home and also for use outside the home, complete both sections 7 and 8
 - Oxygen requirement (boxes 7,8,9) is most commonly 2 litres/minute via nasal cannula, but please confirm with records and/or patient. If using mask, 24-28% oxygen is generally used unless the patient has been assessed by a respiratory physician and an alternative regime suggested. If more than 2 hrs of oxygen are required per day, the patient may need to be transferred to a concentrator.
 - Emergency supply (section 10) should **NOT** be completed if there is a problem with current supply or if the patient has a back up cylinder/concentrator
 - Hospital Discharge Order if for use by the hospital trust
 - A planned assessment/order review date should be entered (section 12) if the patient receives ambulatory oxygen or requires reassessment for home oxygen therapy
 - Enter the clinical code and complete the Y/N boxes (section14)
 - NIV = Non-Invasive Ventilation; CPAP = Continuous Positive Airway Pressure.
 - The tick box relating to an oxygen-conserving device (box 14) should be ticked only if a device is NOT wanted.

Fax the HOOF to Air Products on 0800 214709. They will inform the patient about installation.

<u>THREE COPIES</u> of the form are required. The form is not available in a carbon-copy pad, so it will need to be photocopied. Send by safe haven fax or courier marked 'private & confidential'.

HOOFs should be copied to:

- Patients GP
- Oxygen Lead at PCT
- Clinical Lead at Trust [this does not constitute a referral]
- Original in patient notes



HOCF should be copied to:

- o Patient
- Original in patient notes

5. Holiday provision

Patients should ask their GP to complete a HOOF for oxygen required while they are on holiday (within the UK). Include the duration of supply and oxygen delivery address in box 13.

6. Where to obtain the forms

HOOF and HOCF forms are downloadable from: <u>http://www.primarycarecontracting.nhs.uk/uploads/HOS/December%20Uploads/DH%20APPROVE</u> D%20HOOF.pdf

http://www.primarycarecontracting.nhs.uk/uploads/HOS/December%20Uploads/DH%20APPROVE D%20HOCF.pdf

Forms are also available for order from your local NHS supplier, Rushcliffe Shared Services (Integral.)