

MEGA NURSING & CARE PREVENTION & FALLS RESPONSE UNIT

Case Study 2 - Patient Requiring IV Antibiotics for a Respiratory Infection

1 - Referral and Assessment:

- Our nurse responds to a referral to assess a patient requiring IV antibiotics for a severe respiratory infection.

2 - Full Assessment and Investigation:

- The nurse conducts a comprehensive assessment, investigating symptoms and performing necessary tests, such as checking oxygen levels and lung function.

On-Scene Treatment:

- If appropriate, the nurse initiates IV antibiotic treatment on the scene.

Continuous Communication:

- The nurse remains in continuous communication with a GP to discuss the treatment plan.

In-House Prescriber:

- The in-house prescriber supports the GP and will prescribe medications if the GP is unavailable, ensuring guidance is first sought from the patient's GP.

3 - Creation of Care Plan:

- A care plan is created for the Health Care Assistants (HCAs) to follow once treatment or medication has been prescribed.

4 - Health Care Assistant Deployment:

- HCAs are deployed to monitor the patient and collaborate with any existing long-term providers.

(Continued)

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Case Study 2 – Continued

Vital Signs Monitoring:

- HCAs monitor vital signs using both traditional and technological methods to ensure the patient is responding to treatment.

Visit Schedule:

- Visits range from 15–30 minutes, 2–4 times a day, depending on the patient's needs and treatment requirements.

Duration of Visits:

- Visits can vary from 1 day to 7 days, based on the patient's condition.

Intensive Care Provision

- If the patient lacks a long-term care package or provider, HCAs provide intensive care for an agreed period until a long-term provider is sourced.

5 – Nurse Oversight:

- All vital signs and symptom information are relayed to the nurse overseeing the patient.

6 – Transition to Long-Term Care:

- Once the patient stabilises, they are handed over to their long-term care provider or to a newly sourced provider if one is not already in place.

7 – Ongoing Support:

- Our single point of contact remains open for future contact, with on-call support available for urgent requests.

8 – Communication with GP:

- All symptoms, treatments, and support details are fed back to the patient's GP, with robust care notes drafted regularly.