

Royal Marsden Manual of Clinical Nursing Procedures (9th Edition) Policy

Reference	POL/001/058
Version	2.0
Date Ratified	10 December 2018
Next Review Date	September 2019
Accountable Director	Executive Director of Quality and Nursing
Policy Author	Quality & Safety Lead

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Policy On A Page

SUMMARY & AIM

Policy for use of the Royal Marsden Manual of Clinical Nursing Procedures (9th Edition)

When undertaking clinical duties approved clinical protocols and procedures should be adhered to.

In addition to the Trusts own policies and procedures a defined number of procedures within the Royal Marsden Manual of Clinical Nursing Procedures (9th Edition, 2015) are approved for use by CPFT staff.

Staff should refer to the approved guidelines list within this policy prior to accessing the website.

The Royal Marsden Manual (9th Edition) is accessible electronically here: <https://www.rmmonline.co.uk/>

TARGET AUDIENCE:

All clinical Community Care Group staff (including temporary staff, contracted staff and students during their placements), working in the community and community hospitals in Cumbria Partnership NHS Foundation Trust

TRAINING:

Training required to fulfil this policy will be provided in accordance with the Trust's Training Needs Analysis. Management of training will be in accordance with the Trust's Learning and Development Policy.

KEY REQUIREMENTS

This Policy defines the Royal Marsden Clinical Nursing procedures approved for use by all clinical staff (including temporary staff, contracted staff and students during their placements) in Cumbria Partnership NHS Foundation Trust.

When undertaking clinical duties approved clinical protocols and procedures should be adhered to.

In addition to the Trusts own policies and procedures a defined number of procedures within the Royal Marsden Manual of Clinical Nursing Procedures (9th Edition, 2015) are approved for use by CPFT staff.

Staff should refer to the approved guidelines list within this policy prior to accessing the website.

The Royal Marsden Manual (9th Edition) is accessible electronically via the Trust's Intranet
<http://cptportal.cumbria.nhs.uk/Pages/Home.aspx> and click on Marsden

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1. INTRODUCTION

When undertaking clinical duties approved clinical protocols and procedures should be adhered to.

In addition to the Trusts own policies and procedures a defined number of procedures within the Royal Marsden Manual of Clinical Nursing Procedures (9th Edition, 2015) are approved for use by CPFT staff.

Staff should refer to the approved guidelines list within this policy prior to accessing the website.

The Royal Marsden Manual (9th Edition) is accessible electronically <http://commercial.cumbria.nhs.uk/ClinicalNursingProceduresCPFT/>

See Appendix 1 for a quick guide to access the Royal Marsden Website.

The Royal Marsden Manual is updated every three years to take account of the latest knowledge and research evidence as well as new developments such as NICE Guidelines and Nurse Prescribing.

2. PURPOSE

This Policy defines the Royal Marsden Clinical Nursing procedures approved for use by all clinical staff (including temporary staff, contracted staff and students during their placements) in Cumbria Partnership NHS Foundation Trust.

3. STATEMENT OF INTENT

All clinical staff must ensure they adhere to the appropriate policy or procedure when undertaking clinical tasks.

This policy details those clinical procedures within the Royal Marsden Manual (9th Edition) which have been approved for use within Cumbria Partnership NHS Foundation Trust. Staff cannot use any Royal Marsden Clinical Procedure not detailed in this policy.

Where a policy, procedure or protocol for a clinical procedure cannot be identified within this or any CPFT Trust policies the staff member should follow the flowchart in Appendix 2.

4. TRAINING AND SUPPORT

Training required to fulfil this policy will be provided in accordance with the Trust's Training Needs Analysis. Management of training will be in accordance with the Trust's Learning and Development Policy.

5. PROCESS FOR MONITORING COMPLIANCE

The process for monitoring compliance with the effectiveness of this policy is as follows:

Aspect being monitored	Monitoring Methodology	Reporting		
		Presented by	Committee	Frequency
What	How	Who	Where	How often
Training requirements for all staff, as identified in the training needs analysis	Induction and Mandatory Training Report	Education and Learning Manager	Senior Management Team	Annual

Wherever the above monitoring has identified deficiencies, the following must be in place:

- Action plan
- Progress of action plan monitored by the *name of relevant committee* minutes
- Risks will be considered for inclusion in the appropriate risk registers

6. REFERENCES:

Review of the Royal Marsden guidelines policy is current best practice in treatment and procedures for patients' care Edition 9.

<https://www.rmmonline.co.uk/>

The Royal Marsden guidelines are based upon National Institute for Health and Care Excellence (**NICE**) guidance and Royal Colleges best practice guidance.

7. ASSOCIATE DOCUMENTATION:

The restricted list of procedures within the Marsden Manual of this policy have been defined following consultation with the Deputy Director of Quality and Nursing, Professional Lead for Infection Prevention and Nursing, Chief Pharmacist,

Associate Directors of Nursing for Community and Specialist Care Group and Quality and Safety Leads within the Trust.

Approved List of procedures from the Royal Marsden Hospital Manual of Clinical Procedures (9th Edition) for use across CPFT services

- 8.6 Artificial eye care: Removal
- 8.5 Artificial eye care: insertion
- 8.1 Bed bathing a patient
- 11.8 Blood glucose monitoring
- 11.3 Blood pressure measurement (manual)
- 5.1 Care of a patient who are vomiting
- 10.3 Central venous access devices: taking a blood sample for syringe sampling
- 10.2 Central venous access devices: taking a blood sample for vacuum sampling
- 14.3 Central venous access devices: unblocking an occlusion
- 14.1 Central venous catheter insertion site dressing change
- 9.8 Chest drain changing the bottle
- 15.4 Clip removal
- 13.8 Closed drainage system changing a vacuum bottle
- 5.5 Commode use: assisting a patient
- 8.7 Contact lens removal: hard lenses
- 8.8 Contact lens removal: soft lenses
- 5.20 Digital rectal examination
- 5.21 Digital removal of faeces
- 13.7 Drainage systems changing the dressing around the drain site for both open and closed drains
- 15.1 Dressing a wound
- 11.2 Electrocardiogram (ECG)
- 5.18 Enema Administration
- 7.17 Enteral feeding tube: administration of feed
- 7.18 Enteral feeding tube: administration of medication
- 7.19 Enteral feeding tube: unblocking
- 8.16 Entonox administration
- 8.4 Eye irrigation
- 8.3 Eye swabbing
- 10.28 Faecal sampling
- 7.9 Feeding an adult patient
- 7.1 Fluid input measurement
- 7.4 Fluid output measuring output from drains
- 7.6 Fluid output measuring output from bowels
- 7.7 Fluid output monitoring output from a stoma site
- 7.2 Fluid output monitoring / measuring output if patient catheterised
- 7.3 Fluid output monitoring / measuring output if patient is not catheterised

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- 7.16 Jejunostomy feeding tube care
 - 12.7 Medication: administration by inhalation using a metered dose inhaler
 - 12.8 Medication: administration by inhalation using a nebuliser
 - 12.24 Medication: continuous infusion of intravenous drugs
 - 12.2 Medication: controlled drug administration
 - 12.11 Medication: ear drop administration
 - 12.9 Medication: eye drop administration
 - 12.16 Medication: injection administration
 - 12.26 Medication: injection (bolus or push) of intravenous drugs
 - 12.25 Medication: intermittent infusion of intravenous drugs
 - 12.17 Medication: intradermal injection
 - 12.21 Medication: intramuscular injection
 - 12.14 Medication: multidose vial: powder preparation using a venting needle
 - 12.15 Medication: multidose vial: powder preparation using equilibrium method
 - 12.10 Medication: nasal drop administration
 - 12.3 Medication: oral drug administration
 - 12.1 Medication: self-administration
 - 12.13 Medication: single dose ampoule: powder preparation
 - 12.12 Medication: single dose ampoule: solution preparation
 - 12.20 Medication: subcutaneous administration using a McKinley T34
 - 12.19 Medication: subcutaneous infusion of fluids
 - 12.28 Medication: subcutaneous injection
 - 12.4 Medication: topical application
 - 12.5 Medication: transdermal application
 - 12.6 Medication: vaginal administration
 - 8.9 Mouth care
 - 8.10 Mouth care for patients with dentures
 - 15.5 Negative pressure wound therapy
 - 5.15 Nephrostomy tube weekly dressing and bag change
 - 11.9 Neurological observations and assessment
 - 9.1 Oxygen therapy
 - 11.11 Pain assessment
 - 11.5 Peak flow reading using a manual peak flow meter
 - 5.6 Penile sheath application
 - 7.12 Percutaneous endoscopically placed gastrostomy (PEG) tube care
 - 8.18 Personal care after death
 - 6.12 Positioning to maximise the drainage of secretions
 - 11.1 Pulse measurement
 - 5.3 Removal of a nasogastric tube
 - 11.4 Respiratory assessment and pulse oximetry
 - 10.14 Swab sampling: ear
 - 10.15 Swab sampling: eye
 - 10.16 Swab sampling: nose
 - 10.17 Swab sampling: penis
 - 10.18 Swab sampling: rectum
 - 10.19 Swab sampling: skin
 - 10.20 Swab sampling: throat
 - 10.21 Swab sampling: vagina
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- 10.22 Swab sampling: wound
- 13.1 Step by step guide to measuring and applying antiembolic stockings
- 5.23 Stoma bag change
- 5.19 Suppository administration
- 15.2 Suturing a simple wound
- 15.3 Suture removal
- 11.6 Temperature measurement
- 9.10 Tracheostomy dressing change
- 9.11 Tracheostomy suctioning a patient
- 9.13 Tracheostomy tube change
- 11.7 Urinalysis – reagent strip procedure
- 5.11 Urinary catheter bag: emptying
- 5.12 Urinary catheter removal
- 5.8 Urinary catheterisation: female
- 5.7 Urinary catheterisation: male
- 5.10 Urinary catheterisation: intermittent self-catheterisation: female
- 5.9 Urinary catheterisation: intermittent self-catheterisation: male
- 10.27 Urine sampling: 24 hour urine collection
- 10.24 Urine sampling: midstream specimen of urine: female
- 10.23 Urine sampling: midstream specimen of urine: male
- 10.26 Urine sampling: sampling from an ileal conduit
- 10.25 Urine sampling: catheter specimen of urine (CSU)
- 10.1 Venepuncture

Determining which procedure to use

A number of local Cumbria Partnership NHS Foundation Trust clinical procedures have been developed and approved for use in practice – These are to be used in first instance but where local procedures do not exist for a clinical activity, clinicians are to refer to the approved procedures from within the Royal Marsden Manual of Clinical Nursing Procedures (2015).

Appendix 1 contains a quick guide on how to access the Royal Marsden Website. Appendix 2 outlines the process staff should follow to determine which policy/procedure they should follow and action to take in the absence of any policy guidance.

CPFT POLICIES AND PROCEDURES

POL/001/013 Medicines Policy

POL/001/042 Infection Prevention and Support Policy

POL/002/030 Manual Handling Policy

POL/001/002 Resuscitation Policy

POL/ NCUH/CG11- 02 Nasogastric tube pathway and guidelines CPFT

POL/001/013/005 Injectable medicine policy and standard operating procedures (requires review)

8. DUTIES (ROLES & RESPONSIBILITIES):**8.1 Chief Executive / Trust Board Responsibilities:**

The Chief Executive and Trust Board jointly have overall responsibility for the strategic and operational management of the Trust, including ensuring that Trust policies comply with all legal, statutory and good practice requirements.

8.2 Executive Director Responsibilities:

Is responsible for purchase of License to use Marsden Manual 9th Edition (2015)

8.3 Managers Responsibilities:

Are responsible for making their staff aware of the Marsden manual access and use the procedures within it in line with this policy

8.4 Staff Responsibilities:

Are required to adhere to their respective Code(s) of Professional practice and thereby to:

- Respect the patient or client as an individual.
- Obtain consent before giving any treatment or care.
- Protect confidential information.
- Co-operate with others in the team.
- Maintain their professional knowledge. Be trustworthy.
- Act to identify and minimise risk to patients and clients'.
- Keep skills up-to-date.
- Practise competently

All clinical staff have a duty of care to their patients and clients and are expected to protect and support the health of individual patients and clients.

8.5 Approving Committee Responsibilities:

Responsible for ensuring the Trust has a current licence to use Marsden Manual and this is renewed in timely manner.

9. ABBREVIATIONS / DEFINITION OF TERMS USED

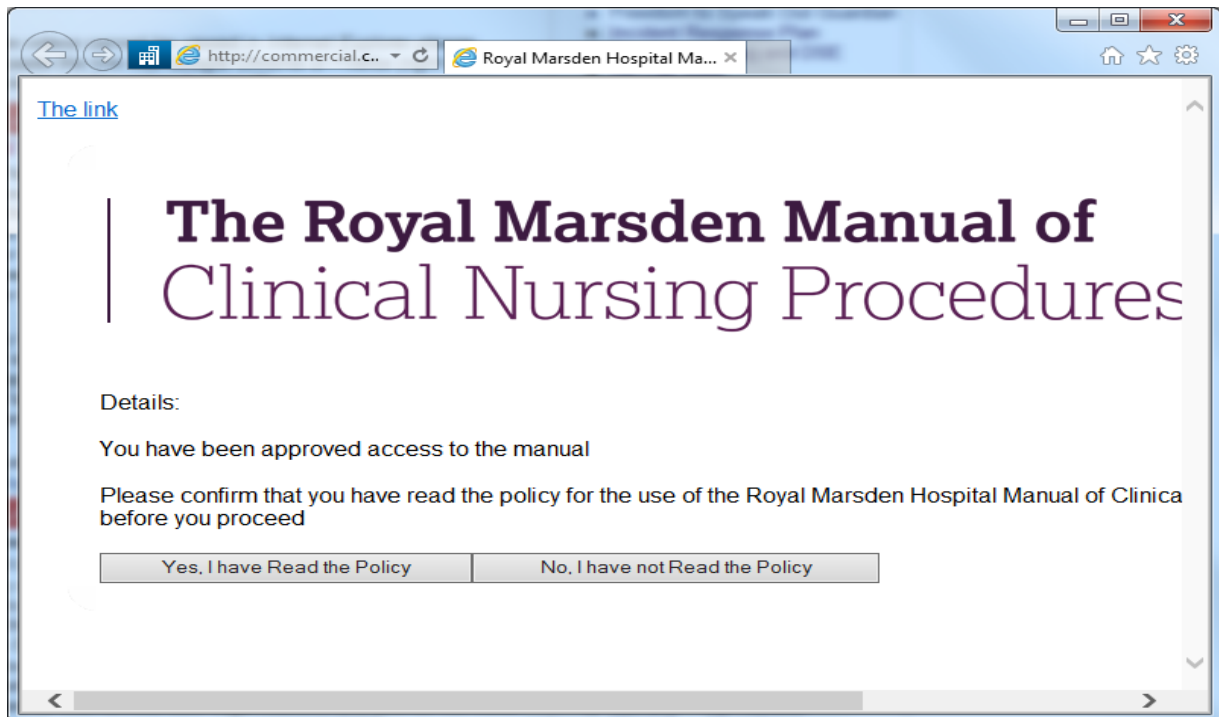
ABBREVIATION	DEFINITION
	Non used

TERM USED	DEFINITION
Policy	A policy is a principle or rule to guide decisions and achieve rational outcomes
Procedure	A procedure is a step-by-step instruction to achieve a desired result

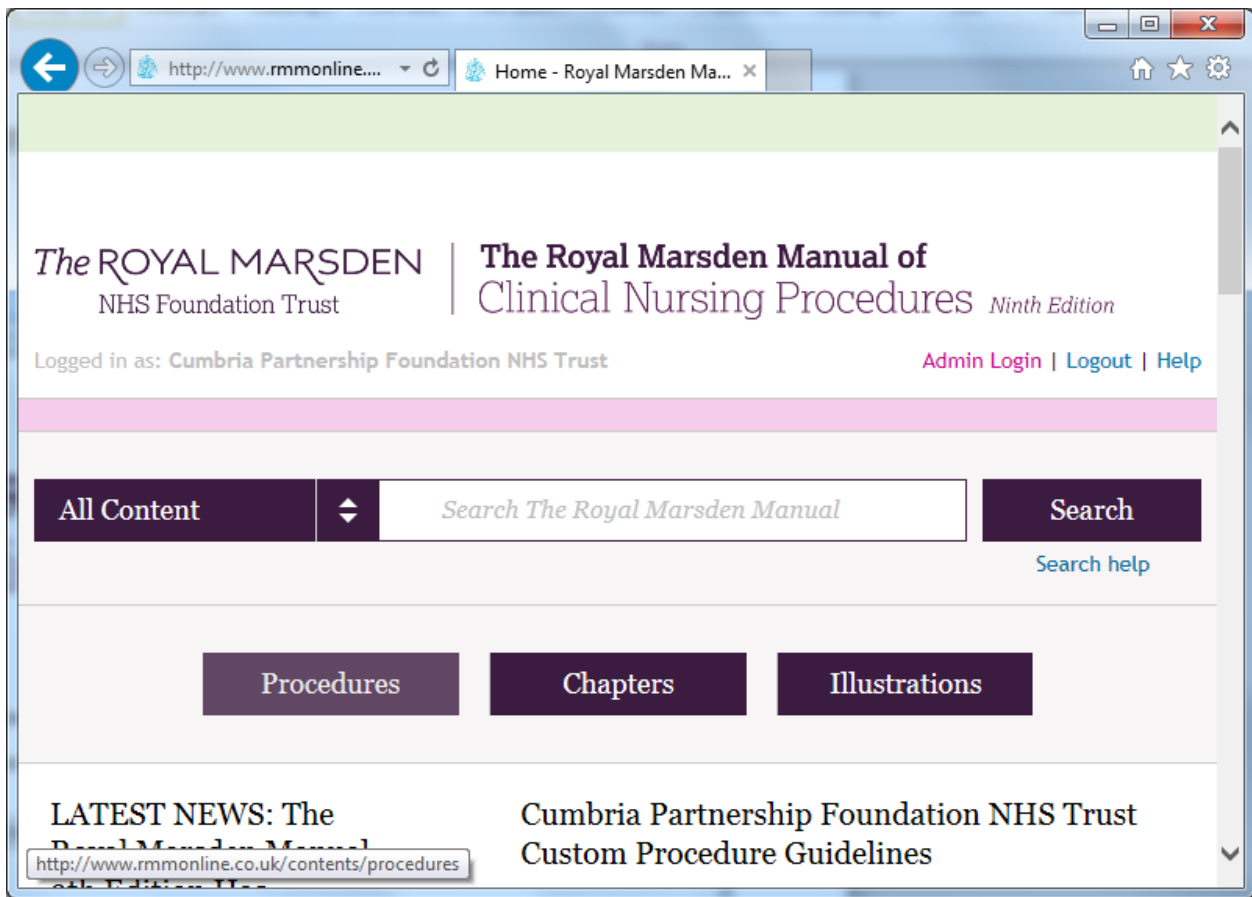
APPENDIX 1 - QUICK GUIDE TO ACCESS ROYAL MARSDEN

Website

1. Go to <http://commercial.cumbria.nhs.uk/ClinicalNursingProceduresCPFT/>
2. **Click to confirm you have read the policy**

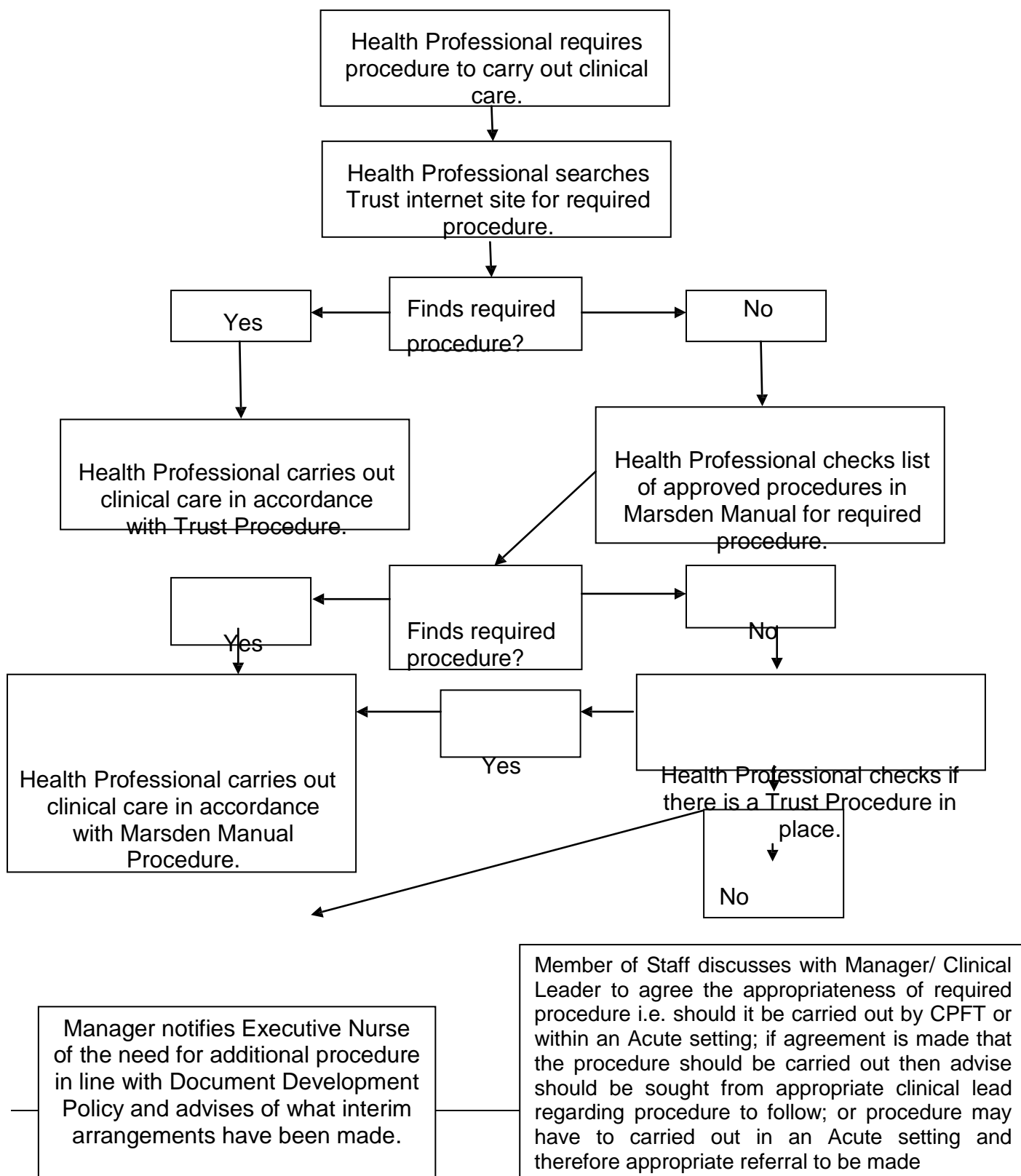


3. **Click on procedures to find the relevent procedure (they are in alphabetical order)**



APPENDIX 2 - FLOWCHART TO LOCATE THE CORRECT PROCEDURE/POLICY TO BE FOLLOWED

Prior to using any procedure the health professional is required to check if there is a locally agreed procedure which takes precedent over that in The Royal Marsden Hospital Manual of Clinical Nursing Procedures (2015)



DOCUMENT CONTROL

Equality Impact Assessment Date	November 2017 with V1 Policy. There is no change since original policy
Sub-Committee & Approval Date	Community Health Quality & Safety Team – Aug 2018

History of previous published versions of this document:

Version	Ratified Date	Review Date	Date Published	Disposal Date
No version number V1	Nov 2017	Nov 2018	Nov 2017	n/a
V1.1		Updated related to national Marsden Guidance August 2018		

Statement of changes made from version

Version	Date	Section & Description
Previous to v1.1	Aug 2018	<ul style="list-style-type: none"> Check and update the existing policy of all Royal Marsden Guidance listed relating to treatments and procedures used in CPFT
	Dec 2018	<ul style="list-style-type: none"> As agreed in Policy Management Group during ratification - clarified target audience in Policy on a Page - All clinical Community Care Group staff working in the community and community hospitals.

List of Stakeholders who have reviewed the document

Name	Job Title	Date
Mental Health care group	Communication made by Amanda Place and Clare Williamson with respective Quality and Safety leads	August 2018
Specialist service care group		
Amanda Place	Quality and Safety Lead Community care Group	August 2018
Clare Williamson	Quality and Safety Lead Community care Group	August 2018