

Local Enhanced Service Specification:

Simple Wound Care

Service Specification No.	
Service	Simple Wound care
Commissioner Lead	Lancashire and South Cumbria ICB
Provider Lead	GP Practices in Lancashire and South Cumbria
Period	1st May 2025 – 31st March 2026
Date of Review	To be reviewed annually

1. Population Needs and Background

NHS Lancashire and South Cumbria ICB covers 196 GP Practices and has a total registered population of 1,853,016 (as of January 2024) patients.

The scope of this specification will cover all practices and registered patients along with temporary residents (where appropriate) that live within the geographical area of Lancashire and South Cumbria.

The ambition of the commissioner is to secure the highest quality and most responsive services for local people that are clinically effective and safe but also importantly are consistent and equitable to the population.

This specification sets out a model for simple wound care services by a GP Practice, across Lancashire and South Cumbria ICB.

The specification of this service is designed to cover the enhanced aspects of clinical care of the patient, all of which are beyond the scope of essential services. No part of this specification by commission, omission or implication defines or redefines essential or additional services.

Some practices have been increasingly carrying out a range of procedures within primary care that have previously been performed in secondary care or in community treatment rooms. The ICB is seeking to recognise this through this service.

2. Scope & Service Standards

2.1 Aim

The aim of the service is to deliver a universal offer to patients in Lancashire and South Cumbria, setting out the range of services that General Practice are expected to deliver to their registered and temporary registered patients.

Practices will deliver high quality and responsive services for local people that improve patient outcomes and the experience of service delivery for both patients and the General Practice team.

Furthermore, the aim of the offer is to ensure an equitable and consistent service to all

patients across Lancashire and South Cumbria and to deliver care closer to home.

Practices will provide agreed core simple wound care, as set out in section 2.2.

2.2 Service Description/Care Pathway

This specification sets out a model for an enhanced service for simple wound care by a GP Practice.

The core services to be provided are:

- Dressings and wound care management, including basic dressings, dressing assessments (without a doppler) and ongoing simple wound care support
- Suture removal/wound closure removal

2.3 Population covered

NHS Lancashire and South Cumbria ICB covers 196 GP Practices and has a total registered population of 1,853,016 (as of January 2024) patients.

The scope of this specification will cover all 196 practices and registered patients along with temporary residents (where appropriate) that live within the geographical area of Lancashire and South Cumbria.

2.4 Any acceptance and exclusion criteria and thresholds

Patients in the following categories are appropriate for treatment under this service:

- removal of sutures
- changing Dressings
- laceration capable of closure without suturing and provide follow up
- first degree burns
- superficial skin ulcers

Patients in the following categories are not appropriate for treatment under this service:

- emergency presentations requiring acute hospital admission
- any patient who cannot be discharged home after treatment
- chronic wounds (which should stay under the care of commissioned community services until healed)
- acute minor injuries
- second or third degree burns
- burns caused by electric shock or chemicals
- complex wounds including:
 - dressing changes are required more frequently than twice a week
 - those with a requirement for compression bandaging
 - where healing is delayed (ongoing for >4 weeks)
 - specialist intervention (such as tissue viability input) is required
 - wounds that are deteriorating rapidly (before 4 weeks)
 - wounds that the GP team feel is outside their safe clinical competence to manage

2.5 Interdependence with other services/providers

Staff involved with the provision of this service must work together with other professionals where appropriate. Where appropriate, the provider should refer patients to the other necessary services and to the relevant support agencies using the locally agreed guidelines.

- NHS Lancashire & South Cumbria ICB
- Primary Care
- Local Acute Trusts
- Community Services
- PALS
- Independent and Voluntary Sector as appropriate

2.6 Applicable national standards (e.g. NICE)

The delivery of the commissioned service is underpinned by the appropriate standards, including but not limited to:

- Care Quality Commission Standards
- Code of Practice for the NHS on the prevention and control of healthcare associated infections and related guidance
- Relevant safeguarding standards.

2.7 Applicable standards set out in Guidance and/or issued by a competent body (e.g. Royal Colleges)

As per the NHS Standard Contract.

2.8 Applicable local standards

The provider must ensure with that adequate arrangements are in place for continuity of the service in the event of staffing shortages, facilities, and system failures appropriate to the service.

2.8.1 Accreditation/Competencies/Continuing Professional Development

The service shall provide appropriate assessment, support, and instruction as appropriate to the service requirement.

All clinical staff will have regular training and professional development in line with performance appraisal and development practice to ensure staff are familiar with current best practice.

It is recommended that the provider maintains evidence of continuing professional development in relation to this service.

2.8.2 Infection Control

The provider will have access and adhere to national and local guidance in relation to infection prevention and control principles and protocols and will ensure that up to date infection prevention and control policies are written, reviewed, and adhered to by all staff.

The environment must be clean, clutter free and sterile items stored appropriately i.e., not on the floor. A cleaning schedule will be in place and monitored by the provider.

All clinical staff will adhere to standard precautions. Personal protective equipment must be available and clinical staff to don appropriate personal protective equipment in accordance with national guidance.

Staff must attend infection prevention and control training annually. Training manual to be available.

An infection prevention and control audit or a self assessment will be undertaken by the provider annually.

Sharps will be stored, handled, and disposed of at the point of source in accordance with national guidance. This process will be monitored by the provider.

All needlestick injuries will be treated as a significant event and will be investigated by the provider.

A consultation room can be used providing the following Infection Prevention Control (IPC) standards are met:

- A HTM compliant clinical wash-hand basin should be provided (please see Health Building Note 00-03), for hand washing only, with paper towels and liquid soap dispenser.
- Carpets should not be used as this area has a high probability of body fluid contamination.
- Space should be available to allow for the storage of equipment and sterile supplies.
- Ensure appropriate IPC precautions are in place, including the training and the use of Aseptic Non-Touch Technique (ANTT).
- Adequate ventilation, with the ability to open a window regularly.

2.8.3 Premises and Equipment

The provider will ensure that the premises used for the provision of the service are:

- suitable for the delivery of those services (please see above under Infection Prevention Control); and
- sufficient to meet the reasonable needs of the patients.

The provider shall provide all of the required clinical equipment. This equipment shall be maintained in accordance with manufacturers' guidance and best practice and, where appropriate, recalibrated annually.

2.8.4 Business Continuity

The provider must ensure that adequate arrangements are in place for continuity of the service in the event of staffing shortages, facilities, and system failures appropriate to the service.

2.8.5 Record Keeping and Information Requirements

All providers of NHS commissioned care should use the latest NHS Data Security and Protection Toolkit to assist in implementation and assessment of compliance with policy and legal requirements.

Full records of all procedures, screening and tests should be maintained in such a way that aggregated data and details of individual patients are readily accessible. Practices should regularly audit and peer review outcomes.

Practices must ensure that details of the patient's monitoring are included in his or her lifelong record. If the patient is not registered with the practice, then the practice must send this information to the patient's registered practice for inclusion in the patient notes.

2.8.6 Significant Events

The Department of Health emphasizes the importance of collected incidents nationally to ensure that lessons are learned across the NHS. A proactive approach to the prevention of recurrence is fundamental to making improvements in patient safety.

The provider must have systems in place for documenting and learning from significant events, including reporting as appropriate.

The provider should be aware of the various reporting systems, such as:

- the National Patient Safety Agency National Reporting and Learning System
- the Medicines and Healthcare Products Regulatory Agency reporting systems for adverse reactions to medication (yellow card system) and accidents involving medical devices
- the legal obligation to report certain incidents to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).

In addition to their statutory obligations, the provider should give notification, within 72 hours of the information becoming known to him/her, of all emergency admissions or deaths of any patient treated by the provider under this service, where such admission or death is, or may be due, to the providers treatment of the relevant underlying medical condition covered by this specification.

2.8.7 IT and Data standards

Practices are required to comply with the standards within the Data Protection Act and other relevant data standards.

3. Applicable quality requirements and CQUIN goals

3.1 Applicable Quality Requirements

Practices will ensure continuing clinical experience, training, and competence as necessary to enable to contract for the enhanced service and be deemed professionally qualified to do so.

3.2 Applicable CQUIN goals

Not applicable.

4. Location of Provider Premises

Service delivery must be from the premises identified within the providers NHS Contract or where the service has been sub-contracted, the premises must be in suitable premises for delivery of the services set out in the specification.

5. Finance

Finance

£0.93 per weighted head of population.

Fraud Policy

In the event of suspected fraud or other illegality being uncovered at any stage the ICB will implement the ICB Fraud Policy and will investigate.

Information supporting reported activity and monitoring information must be made available to the ICB or its representatives upon request. Failure to provide this information, or the provision of incomplete or inaccurate information, may result in suspension of payments or clawback, as well as further investigation by the ICB and its representatives.

6. Contract and Monitoring Arrangements

Monitoring and Reporting

The provider must supply the ICB with such information as it may reasonably request for the purposes of monitoring the provider's performance of its obligations under this specification.

The provider will need to submit quarterly returns stating the activity undertaken under this specification.

All activity should be recorded using the appropriate READ/SNOMED codes and an appropriate Data Quality Template will be supplied by the commissioner to support automated extraction, where possible.

All details regarding data quality and submission of data can be found in the supporting Technical Guidance Document.