Developing a community-based model of care for skin and soft tissue infections and deep vein thromboses in people who inject drugs in Glasgow City Centre

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## Background:

The Complex Needs Senior Advanced Nurse Practitioner(CNANP) service commenced May 2021. The model provides physical health outreach care to vulnerable homeless patients in Glasgow City.

Deep vein thrombosis and skin and soft tissue infection (DVT/SSTI) are prevalent due to injecting drug use. 50% of PWIDs report SSTI per year on a recent survey. The annual incidence of DVT is 100 times greater win PWIDs than in the general population. 15% develop chronic leg ulcers double the rate of the general population post DVT, 6%. A needs assessment has been undertaken with the aim of developing a pathway to improve the management of these conditions in this population.

## Description of model of care/intervention:

Currently a patient with a suspected DVT or complex SSTI is referred to hospital for further assessment +/- Doppler USS. Patients often refuse to attend or take irregular discharge, compromising their care. The proposed care model enables patients to have a full assessment including Doppler USS, therapy including monitored anticoagulation therapy and long-acting intravenous antibiotic therapy using an individualised risk assessment.

### Effectiveness:

In a 9 month period 26 out of 320 (8.1%) patients registered within our service were referred to secondary care with suspected DVT/ SSTI resulting in 61 secondary care attendances. 21% of attendances took an irregular discharge. The CNANP has undergone specific training in doppler US and a DVT/SSTI pathway has been developed in conjunction with Infectious Diseases secondary care expertise. Funding has been secured for a portable US. This pathway with planned data collection both for individual outcomes as well as impact on unscheduled secondary care will be described.

### **Conclusion:**

This service development aims to provide patient centred care in the community for this vulnerable patient group, reducing secondary care cost. We will describe the development, challenges and planned evaluation of the service which will be undertaken in 2022/2023.

Disclosure on interest: None