



**GUIDELINES
ON
COMMUNITY NURSING SERVICES (CNS) PROVISION
IN KENYA
SEPTEMBER, 2013**

1.0 INTRODUCTION

The mandate of the Council is to make provision for training, registration, enrolment and licensing of nurses, to regulate their conduct and to ensure their maximum participation in the health care of the community and for connected purposes.

Following the promulgation of the Constitution of Kenya 2010 and amendment of the Nurses Act Cap 257 in 2011, efficient service delivery became of essence in meeting the clients' expectations. In order to keep up with requirements of the constitution and the Nurses' Act, the Council is decentralizing its services to ease accessibility and improve service delivery at the County levels. In addition, the Council has expanded the scope of private practice by introducing a Community Nursing Services (CNS) programme to allow nurses reach out to communities and provide nursing services at the comfort of their homes. To facilitate this endeavor, the Council has developed guidelines to provide direction for CNS provision.

2.0 PURPOSE OF THE CNS GUIDELINES

CNS Providers should utilize these guidelines as a resource to facilitate planning of nursing care for their clients and performing of roles and duties as provided for in Section 17 of the Nurses Act Cap 257, under the regulation of the NCK.

Effective communication of information to the client, relatives and professionalism on the side of the CNS Provider are essential for effective CNS services. This document acts as an outline for CNS and providers are expected to refer to all other relevant documents that regulate nursing education and practice. Such documents include: The Nurses Act, Scope of Practice for Nurses, Code of Ethics and Professional Conduct for Nurses, Standards of Nursing Education and Practice and the Procedure Manual for nurses.

3.0 AIMS OF THE CNS PROGRAMME

- To provide accessibility to quality nursing care and related services including clinical assessment and personalized care for persons enrolled/entitled to CNS services.
- To enhance the independence and health outcomes of entitled persons by avoiding early admission to hospital and/or residential care by providing access to CNS.
- To provide nursing, midwifery and advanced/specialized care through CNS delivered by a skills mix of registered and enrolled nurses.
- To facilitate provision of preventive, promotive and rehabilitative services to the community.

4.0 APPLICATION AND RENEWAL OF THE CNS PRACTICE LICENSE

To provide CNS services, a nurse must register as an individual or through an agency/bureau that is licensed for CNS Coordination within a given CNS community location. Renewal of the CNS Practice License is carried out annually with a fee stipulated by NCK upon fulfilling all requirements. The CNS Providers shall submit an appraisal report annually countersigned by the Continuing Profession Development (CPD) County Coordinator or the District Public Nurse (DPHN) before renewal of the CNS Practice License.

5.0 SCOPE OF PRACTICE FOR CNS PROVIDERS

CNS Providers must have undergone NCK prescribed training, been registered/enrolled and possess a valid practicing license. Their roles shall include:

- Provision of direct care to patients referred to them by Medical Practitioners and Community Health Nurses.
- Referral of patients/clients for further medical care including ART clinics and other support services as required.
- Keeping records pertaining to patients/clients under care in the community including drugs and supplies.
- HIV and AIDS related care (including; prescription and administration of ARVs, prevention of TB, stigma and discrimination).
- Monitoring patient's response to care including adherence to long term drugs such as Cotrimoxazole Prophylaxis, ARVs and TB treatment.
- Coordinating and networking with other CNS Providers working in the community.
- Advocating for use of Insecticide treated nets.
- Compiling and submitting monthly reports to the CPD County Coordinators/DPHNs.
- Identifying and recruiting patients requiring nursing care services within a given community as per recommended criteria
- Provision of basic nursing care.
- Ensuring a safe and healthy home environment for the patient; seeking assistance in terms of resources from community as required.
- Managing simple ailments such as cough, fever, diarrhea, vomiting, skin problems and other common problems.
- Providing psycho-social support and nutrition counseling to patients/clients and families.
- Referring patients/clients to health facilities and other support services as required.
- Keeping patient's records on care given and providing monthly reports to immediate supervisors.
- Monitoring side effects and adherence/compliance for patients on long term drugs including ARVs, Cotrimoxazole Prophylaxis, and TB drugs.
- Conducting follow up visits and retaining patients/clients in pre ART and ART care.
- Coaching and mentoring families of patients on the CNS programme.
- Providing appropriate information to patient and family members on prevention of HIV, TB and malaria and importance of HIV testing and counseling.
- Taking care of chronically ill clients/patients.
- Monitoring patients/clients response to treatment and Community Home Based Care.
- Facilitating mobilization of community transport for referral of patients from community to health facilities.
- Providing comprehensive reproductive health services.

6.0 EXPECTATIONS OF A CNS PROVIDER

A licensed CNS Provider must:

- Deliver CNS in line with professional, recognized evidence based best practice and scope of nursing practice standards;
- Provide continuous contact for an entitled person for emergency purposes 24 hours a day, seven (7) days a week;
- Deliver CNS in an environment that promotes dignity, integrity and respect for cultural and linguistic diversity and social differences; and
- Assist an entitled person to develop, increase or maintain their independence and well being.

A nurse who wishes to undertake a community nursing services must have a complete CNS kit having at least the following equipment:

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| 1. Bp machine and stethoscope | 18. Ergomentrine /syntomentrine injection (for Midwives) |
| 2. Thermometer | 19. Analgesics |
| 3. Wooden spatulas (disposal) | 20. Local anesthesia |
| 4. Strapping | 21. Portable weighing machine (Baby & Adult) |
| 5. Cotton wool | 22. Feotal Scope |
| 6. Gauze | 23. Tape measure |
| 7. Disinfectant | 24. Infusion sets |
| 8. Anti bacterial skin cream/lotion | 25. Intravenous fluids |
| 9. Dusting powder | 26. Branulas (Adult & Paediatric) |
| 10. Vaseline | 27. Syringes (2cc,5cc, 10cc and 20cc) |
| 11. Spirit | 28. Disposal needle (Adult & Paediatrics) |
| 12. Cord ligatures | 29. Dressing pack (2) |
| 13. A pair of scissors | 30. Autoclave Machine |
| 14. Artery forceps | 31. Diagnostic kit for diabetes |
| 15. A wrapper | |
| 16. Autoclave Machine | |
| 17. Sharps container | |

NOTE: Each specialty to include their essential equipments /requirements

7.0 ASSESSMENT CONSIDERATIONS

Upon receiving a referral case from an authorized referral source or transfer from another CNS Provider, a CNS Provider must assess the clinical and/or personal care needs (comprehensive assessment) of a client prior to commencing the provision of CNS. A comprehensive assessment must be undertaken for each new referral received and must also be undertaken when the entitled person's care needs change.

Upon completion of the comprehensive assessment, the CNS Provider must communicate with the client's medical practitioner or physician regarding the outcomes of the assessment process and the proposed treatment/care plan in writing.

The comprehensive assessment must be undertaken by a registered/enrolled nurse with validated assessment tools and validated dependency tools which are used in the community nursing care that measure the activities of daily living. In undertaking the comprehensive assessment, the nurse should identify and document:

- The entitled person's clinical and/or personal care needs;
- The goal of care;
- The expected outcomes of care;
- The community nursing services required; and
- Referral details to a Medical Practitioner, Physician, Occupational Therapist or Nutritionist in case such services may be required.

Assessment of client

The general assessment of the patient /client will include:

- Checking general condition (physical, psychosocial and spiritual)
- Checking on the treatment/drugs taken, side effects and adherence
- Asking patient for problems and complaints
- Asking about feeding pattern and its problems
- Asking about elimination pattern and its problems
- Assessing the client/patient's vital signs

Assessment of environment

The general assessment of the environment will include:

- General cleanliness of the home
- Waste and refuse disposal management
- Availability of safe water and its utilization
- Availability and utilization of food in the home

8.0 CNS INTERVENTIONS/PACKAGES

A comprehensive CNS shall consist of the following interventions:

- Basic Nursing Care
- Prevention, identification and management of common health ailments in the home
- Referral of patients that may need hospitalization
- Palliative care
- Transfer of basic skills to the primary care giver
- Infection prevention and control in the home
- Nutrition and health education

- Provision of integrated outreach services (management of chronic illnesses including HIV related diseases and ARV)
- Monitoring of the patient on pre-ART, ARV, Cotrimoxazole Prophylaxis and TB treatment
- Discharge planning and referral to appropriate services including CD4 count
- Counseling patients and family members on prevention of HIV, TB and Malaria
- Advocacy on use of Insecticide Treated Nets
- Care of orphans and vulnerable children

Basic nursing care will be provided depending on need with special attention given to the following areas:

- Skin care
- Mouth care
- Pressure area care
- Wound care
- Elimination
- Ambulation and range of motion exercises
- Health education depending on need
- Feeding, nutritional counseling and support
- Psychological and spiritual care
- Give basic life support

9.0 REFERRAL SYSTEM AND PROCEDURES

A CNS Provider cannot deliver community nursing services to an entitled person without a current valid referral from an authorized referral source. A referral for an entitled person must be received from one of the following four (4) authorized referral sources:

1. A Medical Officer
2. A personal physician in a hospital; or
3. A hospital discharge planner
4. A CNS Provider

An authorized referral source should refer an entitled person to the nearest suitable approved CNS Provider. In special circumstances the nearest suitable provider may not be the closest geographic provider. For example, the entitled person may require specialist care, such as palliative care. In this case the nearest suitable CNS Provider is the nearest provider that offers the required specialized nursing care.

The authorized referral source should provide a written referral for the entitled person. The written referral should be on one of the following:

- Discharge summary;
- Letter headed communication; or
- CNS Provider's official referral form

The written referral should include the referral source's provider number. For a written referral from a discharge planner or treating doctor in a hospital, the hospital's provider number should be used. An informal referral may be received from a number of sources; such as a verbal referral from an entitled person, a family member or a concerned neighbor. If an informal referral is received the CNS Provider must contact the referral medical practitioner, physician or CNS Provider to obtain a valid written referral within seven (7) days of the informal or verbal referral. The written referral should be received prior to commencing service delivery.

10.0 TRANSFER OF PERSONS

A CNS Provider cannot transfer a person under their care to another CNS Provider once services have commenced unless one or more of the following criteria apply:

1. The CNS Provider has chosen to terminate practice with the NCK and has provided appropriate notice of this termination in writing indicating a transfer plan for clients.
2. The CNS Provider makes a business decision to close a site and is unable to deliver services to entitled persons through another site and has clearance and approval by NCK on the transfer plan for clients.
3. The entitled person relocates to an area outside of the service delivery areas in which the CNS Provider delivers services.
4. The entitled person requests for another CNS Provider to deliver services to them.
5. The licensed CNS Coordinator in a given region no longer has personnel with the specialized skills required to meet the complex care needs of entitled persons.
6. The safety of the individual or agency/bureau CNS Provider is at risk when delivering services to an entitled person.
7. An entitled person is going on holiday for a period of less than 28 days. In this case, the entitled person is transferred temporarily and will be transferred back to the original CNS Provider upon their return from holiday.

11.0 SELECTION CRITERIA FOR CNS PROVIDERS

A nurse who wishes to undertake community nursing practice must fulfill the following:

1. Must be registered/enrolled in the appropriate register/roll with the Nursing Council of Kenya.
2. Original Professional Certificates must be presented.
3. Must be a Kenyan citizen.
4. Must have worked for a minimum of three (3) years in a recognized institution.
5. Must show documentary evidence of undergoing Continuing Professional Development (CPD) every year i.e. 40 hours
6. Must have a valid practicing license.
7. Must be an active member of a nursing professional body.
8. Must be a reliable, committed and willing to undergo training.
9. Have the ability to maintain confidentiality.

10. Must submit detailed curriculum vitae.
11. Must be staying in the same community where clients and patients reside.
12. State services one intends to render.
13. Must indicate the nearest health institution that he will refer his clients/patients to.
14. Appear in person for initial and renewal of license at the NCK.
15. Pay a prescribed fee for licensure and renew it each year a month before expiry date:
 - Individual application fee for a CNS license is Ksh. 5,000 and renewal Ksh. 3,000 every year. In case of any discontinuity, the individual applies afresh and is charged as a new applicant.
 - A licensed bureau application fee for CNS is Ksh. 50,000 and renewal fee of Ksh. 20,000 annually. In case of any discontinuity, the bureau will be charged as a new applicant.
16. A nurse undertaking CNS must refer the patients to the nearest health facility for all cases he/she is unable to manage.
17. If the patient dies, the nurse undertaking CNS who was in attendance at the time of death or who was called immediately afterwards must, whether or not a registered medical practitioner was present at the time notify the Local Health Supervisory Authority and the Kenya Police Service within 48 hours.
18. A nurse undertaking CNS is required to maintain and use appliances and equipment to the satisfaction of the Local Health Supervising Authority and NCK.
19. A practicing nurse who wishes to run a bureau and coordinate nurses for CNS will be required to forward names of the nurses, their registration/enrolment numbers and qualifications to the NCK and Local Health Supervising Authority.
20. A nurse undertaking CNS will bear any legal liability relating to his/her professional practice.
21. A nurse undertaking CNS is advised to acquire professional indemnity insurance.
22. A nurse undertaking CNS must observe the rules and regulations set from time to time by the NCK and the Local Health Supervising Authority.
23. A nurse undertaking CNS must have been cleared by the NCK upon fulfilling all the requirements.