Hospiscare Specialist Palliative Care Service

Referral criteria and guidance for health professionals

Because every day matters

www.hospiscare.co.uk

Registered charity no. 297798

Hospiscare

Caring in the heart of Devon

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Hospiscare is a charity

Hospiscare is the adult hospice charity for Exeter, Mid or East Devon, supporting people living with terminal illness.

Tell us about your experience of Hospiscare

To tell us about your experience of Hospiscare, please contact: Clinical Services Director, Searle House, Dryden Rd, Exeter, EX2 5JJ Phone: 01392 688000. If you wish to see a copy of our Complaints Policy, please ask. If you are dissatisfied with our response contact: **Parliamentary and Health Service Ombudsman** at Millbank Tower, Millbank, London SW1P 4QP. Helpline tel: 0345 015 4033

Let us know if you would like the information in this leaflet in a different format, e.g. large print or spoken word

Hospiscare is registered by: Care Quality Commission www.cqc.org.uk

SECTION ONE

Specialist Palliative Care Service

These guidelines cover referrals for patients with progressive terminal illness in Exeter, East and Mid Devon, whether due to cancer or any other life limiting condition.

Referrals are on basis of need rather than disease.

For many patients in the late stages of their illness, palliative care needs can be met by the Primary Care Team (District Nurse and GP) and care home teams. However, some people in advanced stages of illness, will need expertise in palliation of symptoms and/or specialist care in the dying phase.

If there are complex symptom control or psychosocial issues present or unpredictable, then advice from or involvement with the Specialist Palliative Care service should be considered.

Some patients may have complex specialist needs earlier in their illness and/or require support with timely discussions around planning for the future.

Hospiscare referral criteria

Palliative care is shared with the primary care team and/or the other specialist teams involved with the patient's pathway. The primary healthcare team hold overall responsibility for patients in the community and will request Hospiscare involvement which may be for the duration of a particular problem or ongoing until death, including pre and post bereavement care for family members.

Reasons for referral are as follows:

- Complex, distressing or refractory symptoms relating to their advanced illness
- Specialist care in the dying phase of illness, including bereavement needs of the family
- Complex or profound psychological, emotional, social, spiritual or existential distress relating primarily to their advanced illness and requiring a holistic and expert palliative care approach
- Advance care planning discussions and advice
- Bereavement support arising from a recent death, when additional support is required to adjust to the loss.

The patient must agree to referral to the Palliative Care Service if they have mental capacity to do so, or a best interest decision has been made to refer.

Referrals that would not be considered:

- Patients with chronic stable disease or disability with life expectancy of several years
- Patients with chronic pain problems not associated with progressive terminal illness
- Patient with mental capacity who decline referral or who are unaware of referral
- Patients whose needs are principally psychological, and need specialist psychiatric referral, whether or not they have declined such help.

SECTION TWO

How can you refer?

The service operates 24 hours a day, seven days a week throughout the year.

Routine referrals are accepted five days per week between 8.30am – 4.00pm, Monday to Friday.

Urgent referrals may be possible outside these hours via our clinical team. Please see below.

Referral to the service is via electronic patient systems, SystmOne and EMIS. For those not able to use these systems, a referral form is available on our website: https://www.hospiscare.co.uk/healthcare-professionals/how-to-refer-a-patient/

Need help with referring? Contact Clinical Admin on 01392 688024 or Hospiscare.clinicaladmin@nhs.net

Urgency of Referrals

If an emergency response is required, this is the responsibility of the primary or secondary healthcare teams involved. Hospiscare Specialist Palliative Care Team is sometimes able to respond rapidly to urgent referral and need.

Urgent referrals will be responded to within 24 hours. Urgent referrals are usually patients with rapidly deteriorating/changing conditions who, without specialist palliative care intervention, are likely to require urgent hospital admission.

Routine referrals will be contacted within 5 working days.

Who can refer?

New referrals are accepted from General Practitioners, Consultants, Clinical Nurse Specialists, Community Nurses and other clinical staff. New referrals are not routinely accepted from patients or families directly – they will be advised to contact their GP or other health care professional involved. There is an exception for open access defined later in this guide.

Uncertain if a referral is appropriate? Call 01392 688040 or 01392 688041 to discuss 8.00am – 8.00pm

Out of hours, weekends and Bank Holidays: Clinical Nurse Specialists and Palliative Care Consultants are available to support patients and healthcare professionals out of hours. As would be expected, out of hours is a reduced service but can respond to urgent referrals and need.

Our Advice Line telephone numbers are:

- 8am-8pm every day: 01392 688040/688041
- 8pm-8am (overnight): 01392 688044

Outcome of Referrals

All referrals into Hospiscare will be assessed by a multi-professional team and triaged for the most appropriate care. Intervention by the team will be through holistic person-centred assessment, which will result in the patient, carer or bereaved person accessing care in one, or a combination, of these 5 Ways:

- Telephone contact taking the form of advice
- Information and support to professional colleagues directly by the team. There may be calls to the patient, carer or bereaved person. This may include sign-posting to other services
- An AccuRx virtual (video) consultation
- A Clinic appointment for assessment and review by the Specialist Palliative Care nursing and/or medical team
- A home advisory visit and assessment. This may be a one-off or a series of visits
- An admission to the specialist ward.

Open Access for Known Patients

Sometimes a patient's situation changes and they do not need such intensive palliative care support. In those circumstances, patients are discharged from regular follow up and may be designated as 'open access'.

A letter confirming the conversation and all contact information they require will be sent to the patient.

Patients will become Open Access when:

- There has been resolution of multiple, complex or refractory physical symptoms
- There is no longer a need for Specialist Palliative Care follow up and /or the patient's on-going needs are more appropriately met by other health and social care agencies
- The patient's difficult social, psychological or spiritual issues relating to their life limiting illness have been addressed
- The family and carer needs requiring specialist support have been addressed
- The patient chooses not to accept Specialist Palliative Care input
- Bereavement care episode is complete
- Patient has temporarily moved to another geographical area

With thanks to:

Mersey Care NHS Foundation Trust
St Luke's Hospisce, Plymouth
Hospiscare Clinical Team

Hospiscare, Searle House, Dryden Road, Exeter, EX2 5JJ
Phone: 01392 688000 Email: info@hospiscare.co.uk
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