



# Strathcarron Hospice Referral Information

## Referral Pathway

Referrals can be made by either:

- Completing and submitting a hospice sci referral form (this is the preferred route)
- Requesting the electronic Word form *StrathRefElectric.doc* from a hospice medical secretary (Tel 01324 826222). Complete, attach the form to an email and send to the secure clinical email address: [FV-UHB.strathcarron@nhs.net](mailto:FV-UHB.strathcarron@nhs.net)
- downloading a pdf hospice referral form *StrathReferral.doc* from [www.strathcarronhospice.org](http://www.strathcarronhospice.org), complete by hand, electronically scan the completed form to your computer, attach to an email and send to the secure clinical email address: [FV-UHB.strathcarron@nhs.net](mailto:FV-UHB.strathcarron@nhs.net) or return the form by post

**NB** *Faxing should not be used as a primary route for communicating patient identifiable information (Information Governance). If it is to be used, it should only be as a last resort. Any person identifiable information should be removed prior to sending and communicated to the hospice medical secretaries by telephone or post.*

Once the completed referral form has been received, it will be screened for appropriateness and urgency by a senior doctor. The outcome of the initial clinical assessment will be communicated to those key professionals identified on the referral form.

The referrer should select the main service requested. At this stage, the most appropriate services will be offered with the referrer's views being taken into account. The requirement for continued service provision will be regularly reviewed by the multi-disciplinary team as part of our standard care procedures.

Urgent referrals can be made via a telephone call to a hospice doctor who will decide appropriate action. A completed referral form should be sent later.

## Deciding which services to request:

### Community Clinical Nurse Specialist (CCNS) Service

As part of the Hospice Multidisciplinary Team, this nurse led service provides specialist advice and support to patients and families who are living in the community. Care is designed to complement and support the existing Primary Care Teams.

Additional criteria for referral:

- Patient willing to receive care at home
- Patient has ongoing need for specialist advice and management of pain and/or other symptom(s), spiritual, psychological or social support
- Patient aware that a process of regular review will determine duration of input
- Co-morbidity of family/carer

## **Day Care Service**

As part of the Hospice Multidisciplinary Team, this nurse led service provides day care Monday to Friday. Patients who are referred for day care are initially assessed by the CCNS. Patients who meet the referral criteria are allocated one day per week, supporting both them and their family/carers. Attendance may be for a defined period of time with individual need being regularly reviewed by the multidisciplinary team.

Additional criteria for referral:

- Patient willing to attend day care
- Patient is assessed as being able to travel in a car ie hospice volunteer transport. If unable to travel in a car, is willing to arrange own transport eg dial-a-journey, family member or wheelchair access taxi. – which would be at the patient's own expense
- Patient aware that a process of regular review will determine duration of attendance
- Patient has ongoing need for specialist advice or management of pain and/or other symptom(s), spiritual, psychological or social support
- Co-morbidity of family/carer
- Agreement and ability to tolerate a smoke free environment, using nicotine replacement or other available support if needed

*Please note – on rare occasions, it may be necessary to delay a starting date for day care attendance*

## **In-Patient Service**

Admission criteria for specialist in-patient care, all of which encompasses the provision of psychological, spiritual and social support:

- Specialist symptom control eg
  - Pain
  - Constipation / diarrhoea / intestinal obstruction
  - Respiratory symptoms
  - Nausea / vomiting
  - Anorexia, cachexia and nutrition
  - Emergencies in palliative care eg hypercalcaemia
  - Depression, anxiety and confusion
- Therapeutic Assessment
- End of Life Care

### **Additional criteria for admission**

- Maximise potential
- Co-morbidity of family/carer
- Improving quality of life
- Agreement and ability to tolerate a smoke free environment, using nicotine replacement or other available support if needed