



Beaumont House Community Hospice

Referral Criteria

Who can make a referral?

Beaumont House seeks to serve the needs of the local community and welcomes an open referral system, therefore we will consider a referral from any person, either public or professional.

Who is eligible?

The person being referred to Beaumont House:

- Must be over 18 years old.
- Must be registered with a Newark and Sherwood GP (either a permanent or temporary registration)
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- Should be identified with a palliative diagnosis and be identified by the Gold Standard Framework and either already have an EPaCCS record on SystemOne (or be appropriate to do so once a referral has been made) . Most patients will have advanced progressive disease and the focus of care will have changed from curative to palliative.
- Registered with a Newark and Sherwood GP **Do you accept anyone?**

Beaumont House is a community Hospice, providing care in a homely environment and has some restrictions; we are currently not able to admit to our services:

- Patients who require acute medical care or interventions that are not provided in Beaumont House or dependent on their complex care needs are beyond the scope of our care provision. For example, intravenous medication, fluids or blood products, intensive monitoring, or a current clinical problem not related to their life-limiting condition.
- Patients weighing more than 180 kgs.(28 stones) who would not be able to be supported by existing equipment e.g. beds, hoists and our emergency evacuation plan.

- Extra consideration will be given to patients living with conditions affecting cognition (e.g., dementia), requiring close or constant supervision. These patients will need further assessment to ensure risks can be managed and safe care can be provided.

There should be direct discussion with the Hospice nursing team if any of the following apply:

- an oxygen therapy requirement
- more complex nursing interventions, such as PEG feed, chest drain, tracheostomy
- patient known to have a healthcare acquired infection or infections such as Clostridium Difficile or Coronavirus

How can I refer?

Initial referrals can be made

- in person
- by telephone
- Single point of access (Call for Care/ Patient Call)
- by secure e-mail (NHS account)
- e referral via SystemOne

Consent and capacity

We would expect a referrer to have gained consent from the person before making the referral.

If a patient lacks the capacity to make a decision about admission to the Hospice and there is no relevant Lasting Power of Attorney (LPoA) or Court Appointed Deputy, the decision to admit must be made in their best interests in accordance with the Mental Capacity Act 2005 and the accompanying Code of Practice. This may necessitate a Best Interests meeting and may require the involvement of an Independent Mental Capacity Advocate (IMCA).

Beaumont House would require copies of any assessment of capacity and best interest's documentation including any IMCA and LPoA to inform the admission decision.

How are referrals prioritised?

Referrals are prioritised according to the complexity of problems presented. The referral must indicate if an urgent response is required. Referrals for patients that are marked for an urgent response will be contacted within 24 hours and action taken to fulfil the need where capacity allows.

Referrals for patient's that are non-urgent will be discussed at the weekly planning meeting (Tuesdays) and considered by the nursing team and appropriate action is then assigned to a member of the team.

Patients for whom admission is required as soon as possible will be placed on the "active waiting list" and will be admitted dependant on the referral criteria above and bed availability. This decision will be communicated to the patient and referrer.

Referrals for in-patient care

Beaumont House provides short-term in-patient care and patients and families will be informed of this when Hospice admission is being discussed.

. Currently the average length of stay is 10 days. Planned admission to the hospice are usually offered for up to 14 days, but this may be flexible dependent on hospice need.

Patients will be admitted for a period of assessment, care, or carer relief and length of stay will be dependent on need.

Criteria for in-patient care:

- a palliative care need, e.g. symptom assessment/control/management/psychological/social support/advanced Care planning
- a step up from home when unwell but not requiring hospital admission
- rehabilitation following palliative care treatments
- a crisis or breakdown of care and support at home
- a requirement for supportive palliative care in the last days of life
- carers require respite to reduce carer fatigue.
- End of life care

We help patients and their families by starting plans for discharge soon after admission. The exception to this is patients who are admitted for care in the last days of life.

If the patient's condition determines that they will require medium to long-term care, we will support and help patients and their families find care in another setting.

Occasionally bed capacity means that patients will need to wait for a bed. The Hospice will endeavour to signpost the referrer to other services in the community able to support the patient and their families and carers until admission can be arranged, and where appropriate we will involve the Hospice at Home team. The number of admissions accepted on a given day depends on a combination of staffing numbers and available beds.

Beaumont House acknowledges the importance of advance care planning and recognises that patients may have preferences with regard to their preferred place of care and death. The Hospice will prioritise access to all our services and try and fulfil end of life care preferences.

Beaumont House provides a 24hr Advice Line should further advice be required. If specialist advice is required the contact details for John Eastwood Hospice would be provided.

Referrals for Day Therapy

Beaumont house provides day therapy 5 days a week, 11 places are available each day.

, Patients will have an assessment by and RN and be offered a designated day to attend for a 3 month period. This will reflect individual patient need and service capacity.

All patients will be reviewed every 3 months and their needs and attendance at day care re-assessed. Patients will be discharged if their needs have resolved, changed or would be better met through another service.

Criteria for day care:

- a palliative care need
- psychosocial support
- spiritual support
- respite to reduce carer fatigue
- therapeutic activity
- advance care planning requirement

Referrals for Hospice at Home

Our aim is to support patients with a progressive life limiting condition (and patients of any diagnosis in the last weeks of life), and their families. Our team of Registered Nurses (RNs) and Health Care Assistants (HCAs) provide assessment, personal care, extended visits as a sitting service/respite care, complementary therapy, emotional support and advice in the patient's own home.

We aim to:

- help the patient achieve their preferred place of care and death
- prevent unwanted hospital/hospice admission
- enable family carers to continue in their role by providing help and support
- facilitate discharge from hospital/hospice to achieve preferred place of care
- provide co-ordinated care in partnership with other community services

Criteria for Hospice at Home:

- to support patients with progressive life limiting conditions and their carers
- a palliative care need, e.g. symptom assessment/control/management/psychological/social support
- rehabilitation following palliative care treatments.
- a crisis or breakdown of care and support at home.
- carers require support to reduce carer fatigue.

Following a referral to the Hospice at Home service the RN or Care Admin team will contact the patient/family to arrange a home visit for assessment of care needs and development of a personalised care plan.

For urgent referrals the assessment may be taken from a health care professional who has assessed the patient within last days of life.

The length and frequency of visits will be discussed at assessment and are individually planned dependent on patient need.

Further information

If the referral is not appropriate or falls outside Beaumont House referral criteria the team will assist in signposting the referrer to other support services.

Should you wish to seek further clarification as to whether the person will meet our criteria or wish to discuss a patient's needs, please phone and ask to speak to the nurse in charge.

Nursing cover is delivered by our Beaumont House Registered Nurses. In-patients, Day Therapy and Hospice at Home are all nurse led services.

- Nursing cover for the Inpatient Unit is 24 hours.
- Day Therapy is co-ordinated by a Wellbeing Lead (RN), HCAs and volunteers .
- Hospice at Home has a dedicated RN's whom assesses, supports, and advises patients, supported with a team of experienced HCAs.

Referrals for Complimentary Therapy

- Beaumont House offers a range of Complimentary and Wellbeing Therapies for patients, relatives, carers or those identified as the 'loved ones' of patients receiving care at BHHC, or those who have been bereaved.
- Holistic therapies aim to relax, ease symptoms and to lessen anxiety.