

Aims and Objectives

- To enable adults to remain at home in the last weeks of life, regardless of diagnosis, if this is their choice.
- To work closely with their key worker - usually a District Nurse and plan the care required and review on a daily basis.
- To offer support to colleagues in the community.
- To meet the physical, emotional and spiritual needs of patients during the last weeks of life.
- To audit and develop the service in line with service users requirements, and local and government guidelines.
- To facilitate reduction in the numbers of unnecessary admissions to hospital/hospice/nursing home in the last few days of life.
- To allow discharge from hospital/hospice/nursing home in the last few days of life, enabling preferred choice of care/death.

How we are funded

Severn Hospice is part of health services offered to people living in Shropshire, Telford and Wrekin and North Powys but we are not part of the NHS. We are a completely independent charity and have to raise over two-thirds of our running costs.

Our care and emotional support is totally free for both patients and their families; but not without cost.

Our services are funded through a combination of kind donations from local people, fundraising activities, our lottery and retail departments, gifts in people's wills and grants from the NHS. For every £1 invested through NHS grants, we provide £3 worth of service to local people.

If you would like to find out more about the various ways you can help our cause, please contact our Appeals team:

- by calling 01743 354450 or 01952 221351
- by visiting our website www.severnospice.org.uk

When cure is no longer possible;
care is...

Information about

Hospice at Home - Information for Professionals, North Powys





Introduction to Hospice at Home

The Hospice at Home scheme is based at Severn Hospice and the team consists of bank and contracted staff.

The team consists of a mixture of trained staff and HCA's. Care is normally provided in the last 6 weeks of life and regardless of diagnosis.

If you require more information on the Hospice at Home team please visit:
www.severnhospice.org.uk

Contact details for the team

Phone: 01743 261506

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Email:
hospiceathome@severnhospice.org.uk

Photo on front cover courtesy of Stonehouse Photographic



Referral Criteria

- Patients must be registered with one of the following GP practices regardless of where they live:
Knighton Llanfyllin
Llanfair Caereinion Llanidloes
Montgomery Newtown
Presteigne Welshpool
Machynlleth Cemmaes Road
- Patients can be referred regardless of diagnosis, but must have palliative care needs.
- Patients should be in the last 6 weeks of life (we are aware that this is difficult to assess) and have palliative care needs.
- Patients must have expressed a wish to die at home and the family/carers can cope with help.
- An up to date care plan must be in-situ, and for the terminal phase an end of life plan is required.
- The patient needs to be flagged to the out of hours medical service i.e. Shropdoc or equivalent OOH service.
- The minimum request for care input should be 2 hours.



Procedure for Referral

- The District Nurse will maintain overall management of the patient.
- Referrals may be made to the Service by phoning the office on 01743 261506 between 9am and 10pm including weekends and bank holidays.
- If a referral has been made for a patient who doesn't have District Nurse involvement, an assessment may be carried out by service staff and then may be referred to the District nursing service or referred directly to the District Nurses for assessment.
- This is not an emergency service although every effort will be made to respond to an appropriate request at short notice.
- Patients referred should be on GSF, have a Just In Case box and End of Life Plan in operation where appropriate. Anticipated problems will have been discussed, with the GP and anticipated drugs should be prescribed and available prior to the H@H team visiting. Preferred Priorities of Care Document should be available.
- Sufficient information about potential patients is crucial. The flow of information between teams, referring agencies etc should be ensured and detailed. Any potential hazards including patients behaviour, presence of dogs or other animals or any hazard relating to a visit should be addressed at referral or when noted.