

Who can refer

Any health professional within the Hospital can make a referral. If to see patient, family or carer, we would prefer that this be with the approval of the patient's Consultant. No such approval is necessary if referral is for staff support.

If the referral is to see family or carer, this MUST be with the patients knowledge and permission unless the patient lacks capacity, for example if unconscious or confused.

How to refer

Routine referrals

Routine referrals can be made to the St Luke's Hospital Specialist Palliative Care Team by telephoning Ext 52875 and leaving a voicemail message. (Aim: seen within 48 hours or next working day if referred on a Friday) or Fax red top referrals to Ext 52056

You will be asked to leave details of :

- Name of patient plus Hospital number, date of birth, diagnosis, including location of metastases if malignant disease.
- Consultant whose care they are under
- Ward and contact extension
- Name of person making referral and job title
- Whether the patients consultant is aware of and approves the referral
- Who you would like to be seen (if not the patient)
- What specific input you would like from the team – see categories above.

Urgent referrals

(to be seen the same day) should be made by contacting a Clinical Nurse Specialist.

Admissions of patients known to the Community St Luke's Service

When we are informed of such admissions, the team will make sure it is recorded in the medical notes that the patient is known in the community, but will not be assessed by the St Luke's Hospital Service unless referred specifically during this admission.

St Luke's Community

Specialist Palliative Care: 01752 436730

Cornwall Community

Specialist Palliative Care Team: 01872 354383
or 354384

Discharge Planning

This is normally organised by the Onward Care Teams if any problems have been identified. There are 3 teams covering Plymouth, Devon and Cornwall.

- Plymouth – **01752 432004**
- Devon – **01752 431179**
- Cornwall – **01752 432011**

We would advise you to contact the appropriate team to discuss any discharge queries.



St Luke's Hospital Palliative Care Team

Information for Staff



Definition of Specialist Palliative Care as provided within the Acute Hospital setting:

The St Luke's Hospital Palliative Care Team contributes to the physical, psychological and emotional care of patients and their families who suffer progressive disease and limited prognosis with moderate to severe complexity of needs. Care is provided by a multidisciplinary team with recognised training in Palliative Care or specifically related areas. Provision of such care is not determined by diagnosis, but by the impact of the illness on the patients overall quality of life. St Luke's Hospital Service is also committed to the education of fellow health professionals in General Palliative Care and related areas, and to active staff support in difficult or distressing clinical situations.

Who we are

Consultant: Dr Mary Nugent - ext -39698

Consultant: Dr Doug Hooper - ext - 53985

Associate Specialist: Dr Jo Dickens

Clinical Nurse Specialists: Bleep

Barbara Carroll **0286**

Pippa Knight **0278**

Ann Munton **0287**

LCP Facilitator ; Annie Charles **0620**

Secretary / Administrator:

Sarah Ward or Chris Astley

Internal 53987

External (01752) 763987

Fax: internal **52056** / 792056

At present we work Monday to Friday (8.30am – 4.30pm).

For advice outside of hours please contact St Luke's 24 hour help line on 01752 401172

Referral Criteria

If you wish to make a referral to the St Luke's Hospital Palliative Care Team the person you wish to refer should fall into the category of "WHO WE SEE", and should require Specialist Palliative Care input in one of the categories of "WHAT WE DO". These are fully defined below.

Who we see

- Patients with malignant disease at any stage with Specialist Palliative Care needs
- Patients with incurable and advanced non-malignant disease with Specialist Palliative Care needs
- In exceptional circumstances, patients with curable malignant or non-malignant disease, following discussions with Team / Consultant in Palliative Care
- Family / Carers of any of the above
- Health professionals / colleagues

What we do

- Pain management
- Other Symptom Control, eg. Breathlessness, depression, bowel or urinary symptoms etc
- Psychological and Emotional Support for patients and families/carers
- Communication difficulties / Promoting understanding of situations
- Spiritual Support (this may be by accessing Trust Pastoral Care Services)

- Assessment for Admission to Hospice
- Complex Terminal Care / Care of the dying when problems arise.

Exclusions:

Post – operative Pain Control, refer to The Pain Team in the first instance

New acute pain in patients undergoing active treatment – oncology or appropriate medical /surgical etc review in first instance

Chronic non-malignant pain – Pain Clinic referral in first instance

- Education / Provision of Information: Health professionals, patients, carers, May be direct or indirect (pointing to another source of information or another provider).
- Staff Support
- Ethical Dilemmas – Advice, objective view point

N.B. it is not part of the Teams remit to organise packages of care. Care packages may be accessed via the Onward care teams. The only community support our team can directly access is the symptom management and psychological support provided by St Luke's Community Service and Cornwall Macmillan Service, who do not provide any hands on care.