

STANDING OPERATING PROCEDURE

Subject	Care Coordination Team: First contact with patients/family members/carers further to a referral for Nottinghamshire Hospice 'Hospice in your Home' care (SOP019)
Applicable to	All Care Services Staff in the Hospice
Date issued	8 Nov 2022
Next review date	8 Nov 2023
Lead responsible for Policy	Director of Care
Policy Reviewed by	Lead Nurse H@H
Notified to	Quality & Safety 8 Nov 2022
Authorised by	Quality & Safety 8 Nov 2022
CQC Standard	Safe, Effective, Caring, Responsive, Well-led
Links to other Policies/Procedures	SOP020 Referral into Nottinghamshire Hospice
Summary	Effective liaison and communication with patients, or family members/carers, is essential in the provision of Nottinghamshire Hospice services. The first contact with patients/family members is an opportunity to provide information regarding Hospice services and establish a 'best match' for the patient/family. Furthermore, any information missing from the referral can be collected and recorded at this stage. Finally, the initial contact with families is an opportunity to gain consent for future fundraising activities. It is the responsibility of the coordinator taking the initial referral to make the introductory call to the patient/family.
Target Audience	All Care Services Staff in the Hospice

IMPORTANT NOTICE: Staff should always refer to the Hospice Website or Policies and Procedures folder on the 'N' drive for the most up to date information. If the review date of this policy or procedure has expired staff should seek advice from their clinical lead or manager regarding the appropriate action to be taken.

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1. Responsibility for contacting the patient/family for the first time

It is the responsibility of the coordinator taking the initial referral to make the introductory call to the patient/family.

Occasionally, the referrer may request that the introductory call is conducted later in the day, or on a future date. Equally, the family may not answer the introductory call. In these cases, a prompt for an introductory call should be added to the waiting list ledger either for that day, the next day, or the day agreed with the referrer; a verbal agreement to follow up the call needs to be made with a coordinator colleague, and this agreement documented on SystemOne and the ledger appointment.

2. Information covered in the introductory call

On the initial call to the patient/family the staff member will introduce themselves as being from Nottinghamshire Hospice, their name and role. They will ask who they are speaking to in order to ensure that confidentiality is maintained.

For Hospice at Home and Hospice Night Support, it is the responsibility of the coordinators to cover the information listed below during the initial call to the patient/family.

- a. Services available
- b. Timings of services
- c. Accessing services and how appointments are allocated for
 - i. Hospice at Home
 - ii. Hospice Night Support
- d. Pre visit calls
- e. Cancelling appointments
- f. Gathering omitted information from referral

- g. Clarifying details of smokers and pets
- h. Gaining consent for future fundraising contact.

Regarding GRACE referrals, once the referral has been submitted to the GRACE team via SystemOne, it is the responsibility of the GRACE team to contact the patient and/or family.

a. Services available

Hospice at Home offers one to one palliative and end of life care to a patient in their own home, with care provided either by a Registered Nurse or a Healthcare Assistant.

Hospice Night Support is a roaming, 'drop in' service working across Nottinghamshire which can offer support either by telephone or in the patient's home from five minutes to an hour or more (depending on demand for the service). Care is provided either by a Registered Nurse or a Healthcare Assistant

b. Timings

Hospice at Home or Hospice Night Support operate between the hours of 10pm to 7am. At times, patients and families will ask about Hospice at Home support available during the day. Although Hospice at Home is predominately a night service, there is limited availability for day shifts through Hospice at Home. A day shift timing is 10am to 3pm. This day availability is prioritised for patients in their last days and hours of life. However, the Hospice recognises that at times informal carers struggle to meet the demands of caring for a palliative patient: for example, the carer may have commitments (e.g., hospital appointments) or the patient is awaiting a package of care. In these cases, at the coordinator's discretion, the Hospice may forward book a day shift to alleviate the pressure on the patient's family/cares

c. Accessing services, and how appointments are allocated

i. Hospice at Home

Each night there are a variable number of Registered Nurses and Health Care Assistants available to be allocated to patients requiring Hospice at Home overnight care. Hospice at Home aims to provide need-based service where patients are reviewed, and appointments allocated, daily. However, for the peace of mind of patient, families and carers, appointments can be forward booked on request at the discretion of the coordinator. To enable fair access to support and a patient led service, Nottinghamshire Hospice cannot guarantee the amount of support to be provided to a patient, and appointments are never 'block booked.'

For new referrals, Nottinghamshire Hospice endeavours to provide overnight care with a Registered Nurse within five to ten days of the initial referral unless not convenient for the patient/family/carers. This initial appointment is to provide support to the patient and provide an opportunity for the Hospice Registered Nurse to undertake a full assessment of the patient.

All patients on the Hospice at Home caseload are triaged daily and those with the greatest need prioritised for appointments that night. The daily triage considers the following:

- Whether death is imminent based on the patient's presentation, and Electronic Palliative Care Coordination System Gold Standard Framework Stage indicator (EPaCC GSF stage indicator). (Appendix 1)

- What symptoms the patient has and whether symptoms are well managed. For example, if multiple medications are required to manage symptoms, Hospice at Home will aim to provide a Registered Nurse for the night
- Whether the patient lives alone or family members are a distance from the patient's home
- The emotional and physical wellbeing of any family members involved in the patient's care
- What support the patient has already received. For example, if a patient has recently received support, or had multiple overnight care provisions compared to patient who has received less support, the patient who has received less support will be prioritised.

Once triage is completed, and appointments allocated, patients/families/carers will be contacted to offer support. Support can be accepted or declined at this stage dependant on the patients/families/carers needs.

Nottinghamshire Hospice uses a daily waiting list. Where patient demand exceeds availability for support, the patient will be added to the waiting list overnight or day support. When the patient is added to the waiting list, the coordinator details patient needs, the patient's EPaCC status, and the last appointments completed by Hospice at Home, so that should overnight care become available patients can be allocated appropriately based on their needs.

Patients and carers can also call Hospice at Home to request support. Third party community partners can also request support by calling Hospice at Home. Calls can be made to request Hospice at Home support 7am to 10pm on 0115 9621 222.

On receiving a call for support the coordinators:

- Discuss the patient/carers need for support. For example, the patient may have symptoms which are difficult to manage, or a carer may be emotionally overwhelmed
- Assess the amount of support provided to the patient, and the date of the last overnight appointment
- Balance patient/carers need and the amount of care provided against the availability of support remaining to existing caseload. For example, a request for patient care where the patient has complex overnight needs will be prioritised over a patient that is settled overnight. Equally, a patient who has less support over a week's period will be prioritised over a patient who has received more support in that time.
- Where patients/carers have a request for a specific night and this request cannot be accommodated due to demand on the service, the request will be added to the waiting list for the day or night required with details of the request.

ii. **Hospice Night Support**

The Hospice Night Support service is introduced on the initial telephone call with patient/carers. Coordinators highlight the service can be accessed during the night between the hours 10pm to 7am on 0115 9621222. Additionally, coordinators explain that patients are triaged and prioritised on individual needs, and that on this basis Hospice Night Support cannot offer a rapid response service.

An appointment for Hospice Night Support to visit a patient can be made during the hours 7am to 10pm via a coordinator. However, due to the nature of the service, appointments can only be made with approximate timings. Requested appointments are added to the SystmOne ledger for Hospice Night Support (PORT Black) with rationale for the booking. Where detailed handover is required, coordinators can task the Hospice Night Support Team.

d. Pre-visit calls

Once an overnight support is confirmed, the Hospice member of staff who will be providing care to the patient will contact the patient/carer to introduce themselves and gain an insight in to how that patient is presenting at that time. This pre visit call is made between 6pm and 8pm.

To maintain General Data Protection Regulation and staff confidentiality, these numbers will be made on a withheld number.

Calls from Nottinghamshire Hospice made between the hours 8.30am to 4.30pm will be made on 0115 9621 222. Calls from Nottinghamshire Hospice outside of these hours will be made on a withheld number. It is important that coordinators highlight to patient/carers that some calls from Nottinghamshire Hospice will be made of withheld numbers to ensure effective methods of communication.

e. Cancelling appointments

Where an appointment is no longer required, patients/carers can call 0115 9621 222 between 7am to 10pm to cancel a planned appointment. This cancellation enables the coordinators to reallocate that Registered Nurse or Healthcare assistant. Reallocation can take place up to 10pm at night.

f. Gathering omitted information from referral

The initial call to the patient/carer is an opportunity for the coordinators to gather information omitted in the referral call. It is essential to gain consent from the patient/carer before asking for the details of the omitted information.

g. Clarifying details of smokers and pets

If the referrer has stated that there are smokers and pets in the property, it is essential that the coordinator conducting the initial call clarifies:

- Who is a smoker in the property
- Where they smoke
- What they smoke (e.g., Vape, cigarettes)
- Type of pet
- Where the pet is kept.

This information is required for effective staff allocation to patients.

h. Gaining Consent for fundraising

To maintain General Data Protection Regulation, on the initial call to patients/carers, consent needs to be gained for Nottinghamshire Hospice to contact families of patients for fundraising and marketing purposes. Gaining and recording consent is the responsibility of the coordinators and is recorded in Groups and Relationships (Appendix 2). As part of this process, the patient's family members full name and address needs recording.

The patient's family members full name and address is also required to send a bereavement card on the patient's death. Consent is not required for this bereavement card.

Electronic Palliative Care Coordination System Gold Standard Framework Stage indicator



The Gold Standards Framework (2017) How to use the GSF PIG in your practice.

Available at <https://goldstandardsframework.org.uk/How-to-use-the-GSF-PIG-in-your-practice>

Recording Consent on SystmOne

Open patient on SystmOne

Click 'Groups and Relationship' on the 'Clinical' tab on the left-hand side menu (Fig. A)

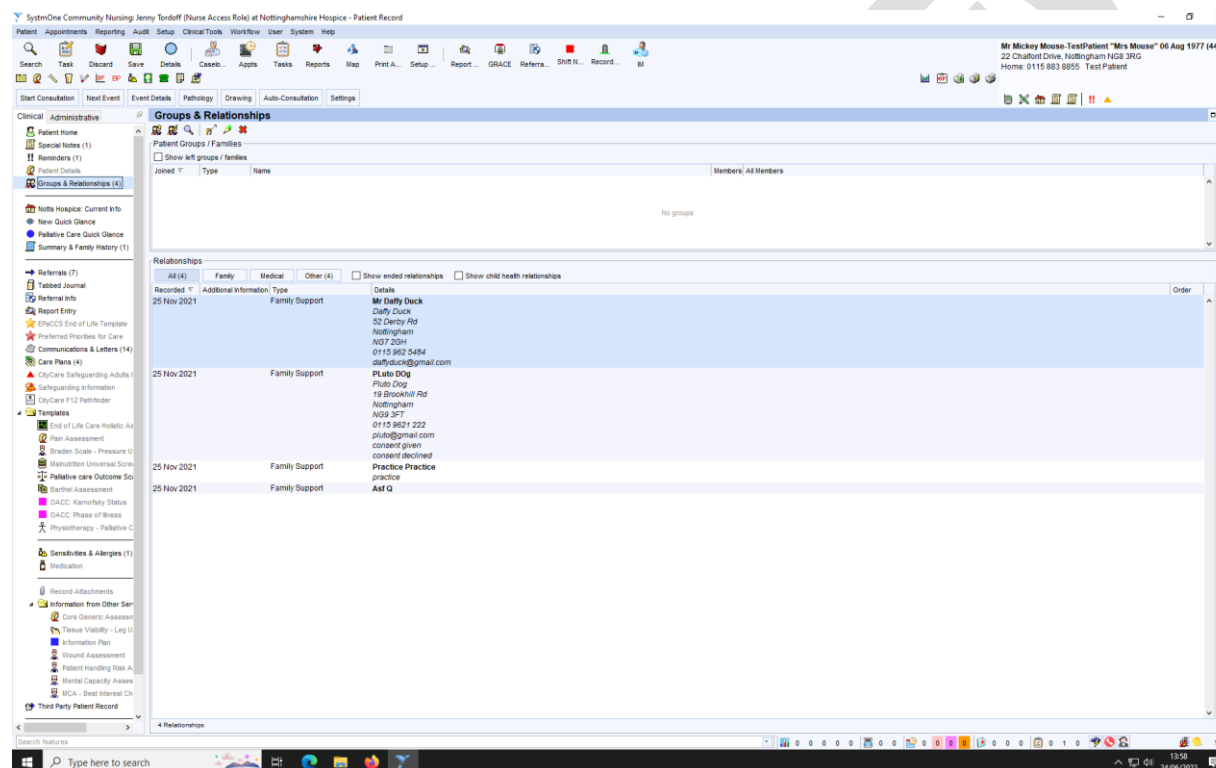


Fig. A - groups and relationships on left hand side menu

Click the arrow symbol under 'Groups and Relationships' heading – a new pane pops up titled 'Select Relationship Type' (Fig. B)

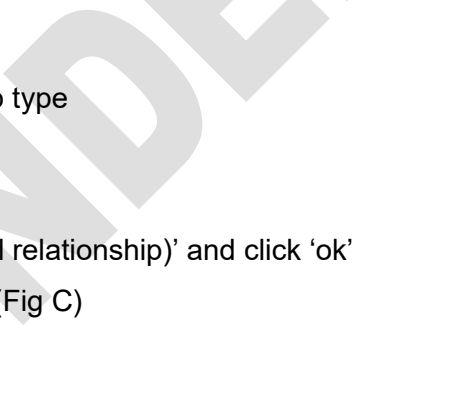


Fig. B - Select relationship type pane

Select 'unclassified' in primary filter

Select 'social' in secondary filter

Select 'family support' in relationship type

Click 'OK' button

A 'New Relationship' pane pops up

Select 'someone else (record textual relationship)' and click 'ok'

A 'New Relationship' pane pops up (Fig C)

The screenshot shows the SystmOne Community Nursing software interface. The main window displays patient information for 'Mr Mickey Mouse' (Test Patient 'Mrs Mouse', 06 Aug 1977 (44 y)). The 'Groups & Relationships' pane is active, showing a list of existing relationships. A 'New Relationship' dialog box is open, allowing the user to add a new family member. The dialog includes fields for relationship type (Family Support), comments (677 Minnie Mouse Lane, Nottingham, NG7 9TU - daughter - consents to fundraising), and a detailed person section with name, sex, date of birth, and contact information.

Fig. C New Relationship pane

Add first name and surname of family member consenting to future fundraising in person details section of pane in 'first name' and 'surname' box in the free text 'comments' box, add the family member's relationship to the patient and add a contact address for them. Free text in this box whether the patient's family consent to fundraising contact. 'Consent for fundraising' must be recorded explicitly in the free text box to avoid confusion by other healthcare providers. Click 'OK', Click Save on top banner. An 'Event Details' pane opens (Fig. G)

The screenshot displays the 'Event details' pane in the SystmOne Community Nursing software. The pane is titled 'Event Details' and contains several sections:

- Date & Time:** Includes 'Exact date & time' set to 'Thu 15 Jun 2022' at '14:54'.
- Template:** A dropdown menu set to 'Admin event', with 'Apply Template' and 'New Template' buttons.
- Staff:** A dropdown menu set to 'Jenny Tordoff'.
- Location:** Includes 'Organisation' set to 'Nottinghamshire Hospice' and 'Other location' set to 'Office Base'.
- Contact:** Includes 'Contact method' set to 'Administration' and 'Event is incomplete (can be amended later)' checked.
- Link to referral:** A dropdown menu set to '15 Jun 2022 19:23 - Hospice at Home for NH - Palliative Nursing Care (Prim...)'. It also includes 'Update Referral Status' and 'End Referral' buttons.
- Link to team:** A dropdown menu set to 'No team selected'.
- Visibility:** Includes radio buttons for 'Normal (Part of the shared record)' (selected), 'Private (Not part of the shared record)', and 'Safeguarding Relevant'.

The 'Relationships' pane on the left shows a list of relationships, including 'Family (1)' and 'Medical (1)'. The 'Activities' pane on the right is empty, showing 'No activities recorded'.

Fig. G 'Event details' pane

On 'Template' drop down menu, select 'Admin Event,' then click button 'Apply template'

Click 'OK' button

The patient's details then save, and the referral pane will close.