

Planned Respite Care at East Cheshire Hospice – Referral Criteria and Procedure

East Cheshire Hospice provides planned short-term, temporary care to people with progressive, life-limiting illnesses who wish to give their unpaid carers or families a rest from caring. This is known as 'respite care'. The hospice provides an opportunity for a planned respite stay of 1 week, with a maximum of 2 weeks respite per year.

In-patient Respite criteria:

The following conditions should apply to fulfil the respite criteria:

- The person must have a diagnosis of a progressive life-limiting illness, aged 18 or over, with palliative care needs
- They must be registered with a GP in East Cheshire or the High Peak area of Derbyshire
- They must be being cared for by family or friends at home (this can be in addition to a funded care package)
- Those living alone may be considered, depending on their situation
- The person referred must be in a stable condition prior to admission so that their planned discharge date is upheld (N.B. If the person's condition is unstable, requiring an in-patient stay for symptom control or end of life care, the person must be referred to the IPU via a healthcare professional)
- The person must be able to make own travel arrangements to and from the hospice, either through their GP, specialist nurse, district nurse or arrangements made themselves
- Both the person and the carer must agree the need for respite
- The patient must be willing to undertake a Covid-19 test prior to (or in some limited circumstances on arrival at) East Cheshire Hospice.

Referrals can be made by the person requiring respite, carers or healthcare professionals. Respite stays are booked through the hospice Advanced Nurse Practitioners.

Patients not usually eligible for respite care at the hospice:

- Patients who already have a placement in long term care, or who are awaiting a long-term placement.
- Those requiring specialist dementia care.
- Patients requiring 1 to 1 care at all times.
- Patients who have had a positive Covid-19 swab or new onset symptoms following a positive test, in the fourteen days prior to their respite admission. (Cases will be assessed individually as symptoms may be present for longer than the recommended isolation period.)
- Patients that are medically unstable.

Referral procedure:

- Referrals may be made by GP's, specialist nurses, district nurses or initiated by the person requiring respite and family members. **The person's GP will always be informed that the patient has been referred for a respite stay.**
- If there is any doubt as to the suitability for planned hospice respite, the person's specialist nurse (or other appropriate healthcare professional) will be asked to review the person before the referral is accepted.
- Referral is by completion of an East Cheshire Hospice referral form – the referral information and the person's EMIS medical records will be reviewed by the hospice clinical team prior to a respite stay being offered. If the person's GP does not use EMIS then additional up to date written information on the person's medical condition may be requested.
- The hospice Advanced Nurse Practitioner will liaise with the referrer and book the respite week up to 3 months in advance of the admission date.
- The person will receive confirmation of their admission and discharge dates following acceptance of referral and will be contacted again via telephone approximately 1 week prior to admission date to check that their circumstances have not changed. If there is any change in circumstance that might affect the respite dates, this should be discussed with the hospice clinical team **prior** to admission.
- A person can receive up to 2 booked respite weeks in any one year, but **each respite stay will require a new referral form with up to date information** – East Cheshire Hospice does not offer 'rolling respite' admissions.
- If a respite week is cancelled/unfilled, a respite stay may be offered to the next person on the waiting list.
- Referrals **must** be made via the NHS email account eccg.echospicerespite@nhs.net

Admission process:

- Respite admissions will take place Thursday to Thursday.
- Admission take place between 1-3pm. Discharge will be planned for 11am on the pre-arranged discharge date.
- The person should be accompanied by relevant copies of community, medical and/or nursing documentation unless this information is accessible on EMIS.
- All current medication & wound dressings, if required, must be brought in with the person, unless instructed otherwise by the hospice clinical team. A hospice prescription chart will be completed on admission.
- The person will be issued with an identification wristband.
- A bed will be allocated depending on bed availability and clinical need – ***a side room cannot be guaranteed.***

- Respite admissions are nurse-led - the hospice Advanced Nurse Practitioner will undertake an assessment of the person on the day of admission and will review the person periodically during their respite stay as and when required
- If the person becomes medically unstable during their respite stay a discussion will occur between them and the hospice medical team to determine the best course of action – that may be to transfer to one of the hospice’s in-patient beds (depending on availability) or to transfer to acute hospital, whichever is more appropriate.

During the respite stay:

- On admission, each person, where appropriate, will have a comprehensive assessment to establish their goals and priorities and to create a personalised programme of support to reflect these. This may include:
 - Working with the physiotherapist to maximise function & adopt self-management techniques
 - Promoting and maintaining independence, enabling/supporting the person where possible, to maintain their normal routines
 - Advance care planning
 - Review of medical, nursing and medication needs
 - Review of practical needs to make sure all relevant benefits, care and assistance are being accessed at home
- The aim is to empower the person through setting and achieving their own goals – preparing them to proactively manage their health on returning home
- For other people who are less independent, a respite stay will give them the opportunity to have a break from the routine at home and allow their carer some time out to maintain their own health and continue in their caring role once the respite stay is finished

Discharge process:

- Discharge will take place by 11am on the planned discharge date
- If there are no changes to the medication during admission, the person should have enough supply of their usual medication to be able to continue this on discharge. The hospice will not routinely order medications to take home.
- If the person being admitted for respite is known to be requiring additional care, or an alternative place of care on discharge, this must be arranged by the person’s community team in advance of respite admission to the hospice so that discharge can take place as planned.
- On discharge a letter will be sent to the person’s GP to inform them of their respite stay and to update them of any changes during admission

A respite stay at East Cheshire Hospice is provided free of charge. East Cheshire Hospice is a registered charity, receiving a small grant from the NHS but predominantly paying for services through fundraising activities. Any donations towards the cost of the respite stay are welcomed.