

Referral Form

Ford Park Crescent, Ulverston, Cumbria LA12 7JP.

Tel: 01229 580305 Email: Referrals@stmaryshospice.org.uk



Please indicate ONE main service being requested below:
For more information on services see Page 4 'Guide to Services'

In-Patient Unit	Hospice at Home	Complementary Therapy	Group / Individual Living Well Therapies	Admiral Dementia Nurse Service	Family & Bereavement Support (pre & post bereavement)

Referrer's Details (We may need to contact you if information is missing, before accepting the referral)

Date referring:	Time:
Your name:	Your designation:
Your contact number:	Email:

Patient's Details (Include these details if referring a carer for Family & Bereavement Support Service)

Name:	DOB:
Address:	Postcode:
Current location:	Telephone no:
NHS no (if known):	Is patient aware of referral?

Family Carer Details (if known)

Name of main carer/Next of Kin:	Relationship to patient:
Address if known:	Tel. no:

Primary Care Team Details

Name of GP:	Surgery address:
Tel. no:	

Other Health Care Professionals involved (e.g. District Nurse, Community Specialist Palliative Care Nurse)

Health Care Professional	Contact Number

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To be completed for a referral to IPU, H@H, Complementary Therapy or Living Well Therapies:

	YES	NO		YES	NO
Is the patient aware that they are at End of Life i.e. potentially in the last year of life?			Is this patient receiving chemotherapy? (Include details overleaf)		
Does any written documentation of ACP exist? (If so, it should come with the patient)			Has this patient had radiotherapy recently? (Include details overleaf)		
Any Advance Care Planning conversations? (Include details overleaf)			Any pressure ulcers? Category (if known)		
Are Just in Case drugs in the home?			Any known infections?		
Any risk of falls?			Hospital acquired infections?		
Is oxygen required? (If yes, please organise HOOF and supply for admission date)			Any problems gaining access to the place of residence?		

Summary of current condition and treatments, current medication list:		
Main reason for referral:		
Main Patient Diagnosis:		
Other relevant Diagnosis / Areas (e.g. Mental Capacity Assessment)		
Has a Carer Assessment been completed (if appropriate)	YES	NO

To be completed for a referral to Family & Bereavement Support Service

Please include any relevant information about social support / social situation:
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To be completed for **ANY** referral

	YES	NO		YES	NO
Any lone worker risks? (Patient and carers)			Any issues with mental capacity?		
Safeguarding concerns?					

Please add any further information of relevance here e.g. what interventions are in place/have been tried

Please note: a bed or service is not booked until confirmed as such by hospice staff.

N.B. Attach copies of relevant specialists' letters and GP patient summaries.

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GUIDE TO SERVICES AT ST MARY'S HOSPICE

In Patient Unit	<p>Our 8 bedded in-patient unit is for adults over the age of 18 who are diagnosed with an advanced, progressive incurable condition.</p> <p>We accept referrals for;</p> <ul style="list-style-type: none">• Pain/symptom control• Emotional/psycho-social and spiritual needs• Complex symptom management in the last days of life• End of life care <p>The in-patient unit waiting list is reviewed daily. New admissions are decided by clinical priority on a daily basis.</p> <p>If you wish to discuss a referral, please phone IPU and ask to speak with the member of the medical team responsible for admissions that day.</p> <p>Please advise when referring if any specialist equipment is needed (for example, feeding pumps, bariatric equipment)</p>
Hospice @ Home	<p>Cares for patients who wish to remain at home at end of life. The service covers the Furness and South Lakes area seven days a week. We also have a night service, where a Health Care Assistant can stay at a patient/family home overnight to help prevent carer fatigue and hospital admission.</p>
Family & Bereavement Support	<p>Emotional/spiritual support for patients and/or their family members regarding loss and grief issues pre and post bereavement covering Furness and South Lakes. Clients can be seen at hospice or in own homes. We also offer signposting service should we not be the appropriate service. Referrals taken during normal office hours Mon-Friday. Please note this is neither a counselling service nor an emergency response service and is offered to adults only although parental guidance can be offered by the team regarding children's' grief responses.</p>
Admiral Dementia Nurse Service	<p>Admiral Nurses are qualified dementia specialist nurses. Their professional development is supported by the charity Dementia UK. They are a lifeline for people living with dementia and their families, providing tailored clinical advice alongside psychological and social support which promotes health and wellbeing. Their extensive knowledge of dementia means they can support people through the most complex of situations.</p> <p>When admitted to the service, your Admiral Nurse will commence an assessment of you and your family then provide personalised support with all aspects of dementia from dealing with symptoms such as distress or sleep problems, to stress management and coping strategies. They will focus on the family as a whole, ensuring your carers have the skills and knowledge they need to continue in their vital role. They can build links with other health and social care professionals, and support with care coordination. They will advocate for you and support with navigating the complex care systems, helping you with complicated processes such as applying for benefits or funding, or planning for your future and death.</p> <p>Dementia is a life-limiting condition so a palliative approach is a fundamental part of good dementia care which improves quality of life for people and their families supporting them to live well and die well.</p>

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	<p>This service is available to any individuals or families who are already using one of our St. Mary's Hospice services and staff will take you through the referral process if your needs meet the referral criteria. However, support and guidance are available for anyone affected by dementia. Please contact 01229 580 305 ext 252 or email admiraldementiateam@stmaryshospice.org.uk. Office hours are 9am-5pm. The office is closed during bank holidays. Please contact Dementia UK helpline on 0800 888 6678 with queries outside of these hours.</p>			
<p>Living Well Programmes including Day Hospice</p>	<p>The Living Well Team can offer a range of programmes to support individuals. These include</p> <ul style="list-style-type: none"> • “Feel Good” days – These are 2 hour sessions delivered at both our hospice sites and in our local community focussing on the 4 Pillars of Good Health* (Relax, Eat, Move and Sleep) and the 5 Ways to Wellbeing** (Connect, Be Active, Take Notice, Learn and Give). These will be delivered over 4 sessions. Patients can choose to attend any combination of these. • Fatigue, Anxiety & Breathlessness Programme (FAB) – 6 week programme to help patients develop non-pharmaceutical techniques and strategies to practically, emotionally and mentally to cope with fatigue, anxiety and breathlessness. Each session will last 2 hours. • Creative Therapy – 8 week group programme to enable individuals to take a sense of control and boost self-esteem. The programme allows a use of a wide range of art forms, building on new skills which can be shared with family and friends, thus encouraging reconnection during what can be a very lonely time, and help to make everlasting memories. Each session will last 3 hours. • Physical Activity Therapy – Various programmes delivered across both hospice sites in Ulverston and Barrow and in the local community. The programmes focuses on the benefits of movement, exercise and relaxation for wellbeing to help reduce symptoms, improve mood and quality of life. • Complementary Therapy – Our complementary therapy team can offer a range of 1:1 and group therapy sessions for patients and carers. A treatment plan will be developed on assessment. Complementary therapy is available at any point from diagnosis. • Day Hospice – 8 week programme for individuals requiring more extensive support. The programme includes goal planning, creative therapy, reminiscence, movement, relaxation, nutrition and sleep (4 Pillars of Good Health*) sessions to enhance confidence and wellbeing. The day hospice can help with symptom management, as well as emotional and spiritual support. Each session lasts 4 hours and a light lunch is provided. The day hospice is delivered at both our Ulverston and Barrow sites. <p><u>Which Living Well service to refer a patient to:</u></p> <p>Individuals will be assessed for their suitability for these programmes by a member of the Living Well Team. From assessment the team will decided on the most suitable programme to offer to meet their needs using a tool called the Australian Modified Karnofsky Performance Status (AKPS) which is a model used by St Mary's Hospice and other hospices nationwide. This model identifies the functioning and performance of individuals and their dependency of need. The Karnofsky scores range from 0 to 100. A higher score indicates the patients is better able to carry out daily activities. It can also be used to determine a patient's prognosis and to measure changes in a patient's ability to function.</p> <table border="1" data-bbox="309 2092 1497 2123"> <thead> <tr> <th data-bbox="309 2092 437 2123">AKPS</th> <th data-bbox="437 2092 1107 2123">Description of Performance Status</th> <th data-bbox="1107 2092 1497 2123">Suitable Living Well Programm</th> </tr> </thead> </table>	AKPS	Description of Performance Status	Suitable Living Well Programm
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Score				
100%	Normal, no complaints, no evidence of disease.	Not suitable for Programmes		
90%	Able to carry on normal activities and work, minor signs or symptoms of disease.	Feel Good Days		
80%	Normal activity with effort, some signs or symptoms of disease.			
70%	Carers for self, but unable to carry on normal activity or to do active work.	FAB Day Hospice	Inpatient Unit	
60%	Able to care for most needs, but requires occasional assistance.			
50%	Considerable assistance and frequent medical care required. District nurses and CNS involvement, frequent GP input.	Day Hospice		Hospice at Home
40%	In bed more that 50% of the time.	Hospice At Home		
30%	Almost completely bedfast.			
20%	Totally Bedfast and requiring extensive nursing care by professionals and /or family.	Inpatient Unit Hospice at Home		
10%	Comatose or barely arousal, unable to care for self, requires equivalent of institutional or hospital care, disease may be progressing rapidly	Inpatient Unit Hospice at Home		
0%	Dead	Bereavement Support		
<p>Complementary Therapy can be delivered at any stage of the AKPS Score.</p>				