

Hospice Transfer from Emergency Department (ED) – Instructions for Hospice Staff

Patient is dying and wishes for Hospice transfer / Best Interests decision

ED contact the Hospice via referral phone
Wheatfields xxxxxxxxx
St Gemma's xxxxxxxxx

Admission Nurse/ Nurse in Charge receives clinical details, checks bed capacity and discusses with admissions doctor.

Between 08.30am and 17.00pm

- Decision to admit is made and confirmed with ED
- Transport is booked by ED.
- Where Hospice A has no capacity, NIC contacts Hospice B. Hospice NIC informs ED of outcome.
- Where patient cannot be transferred, Hospital Palliative Care Team are contacted by Nurse in Charge to alert them so that advice and support can be offered.

Between 17.00 pm and 08.30am

Bed available:

- Decision re capacity to admit is made between Nurse in Charge and Dr On-Call
- Where there is capacity, consultant- on -call is contacted to discuss clinical situation.
- Where there is capacity ED notified and instructed to book transport

No Bed Available:

- If Hospice A has no availability, Nurse in Charge contacts other Hospice to check their capacity.
- ED notified of situation. Where both Hospices are full, Hospital Palliative Care Team are made aware of patient at earliest opportunity.
- Where there is no capacity to admit overnight but a bed is available, it can be agreed that a bed is blocked for transfer at 09.00. On-Call Consultant is involved in this decision.
- Where both Hospices are full, Hospital Palliative Care Team are alerted to follow up patient in LTHT

Further Information

During 08.30- 17.00 hours, Hospital Palliative Care Team may be contacted for advice on xxxxxxxxxxxxx

Decision from Hospice is based on

- Bed availability
- Urgency of referral
- Impact on service