#weareNHFT

CYNTHIA SPENCER AND CRANSLEY HOSPICES

FAST TRACK DISCHARGE

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MAKING A DIFFERENCE FOR YOU, WITH YOU
FAST TRACK DISCHARGE

Fast track discharge is for a person whose health is quickly deteriorating and who is thought to be approaching the end of their life. A member of the hospice team will discuss what will be needed for the person to be cared for out of the hospice environment.

FAST TRACK TO HOME

Personal care needs will be discussed and assessed with you and your family/ the people close to you. The hospice team then apply for Fast Track funding from the NHS Continuing Healthcare (CHC), requesting an appropriate package of care, if accepted this care will be free. Having end of life care at home can often rely on family providing support during times between carers’ visits at home. All packages of care can be reassessed by the community nurses as the person’s care needs change.

Before discharge from the hospice, it may have been decided that equipment is required to help. The need for equipment will be assessed by the Occupational Therapy Team. These items may include a hospital bed, pressure relieving mattress, a commode, hoist, etc. To facilitate delivery to the home before discharge, access will be required. There may be some items that can be delivered once the person is actually at home.

FAST TRACK TO A NURSING HOME

Sometimes discharge to a nursing home care is the most appropriate plan. Many nursing homes are equipped to provide 24 hour nursing care to people at the end of life. They can be supported by Specialist Palliative Care Community Services.

If the person’s chosen place of care is a nursing home, the hospice team apply for Fast Track funding from the NHS Continuing Healthcare (CHC), if accepted this care will be free. A CHC Brokerage Worker will provide information on nursing homes with availability. The patient, family or other people close to them will be involved in choosing the nursing home. The hospice team will liaise with patient, family/ others involved and CHC to finalise transfer to the nursing home.
THE ROLE OF COMMUNITY SERVICES

If the person is being cared for at home, their GP and District Nursing team continue to provide medical interventions and, where appropriate, will involve other community services to provide support to the person and their family on a regular basis, i.e. Palliative Care Clinical Nurse Specialists (PCCNS).

The GP is informed of discharge from hospice to either home or nursing home. A nursing home placement may require a change of GP. The GP will review symptoms and general aspects of care.

FUNDING REVIEW

As the care package or nursing home is funded by the NHS, the person’s healthcare needs will be reviewed initially at 12 weeks. If there is improvement or the person no longer meets the Fast Track criteria a Continuing Healthcare assessment will be completed.

The outcome of this assessment may be that the person is still suitable for NHS Continuing Healthcare or it may be that they are not; in this instance the Fast Track status is withdrawn, however current care would continue whilst review decisions are concluded.

If the person remains eligible a review of the current package of care is performed to make sure it is appropriate to their needs.

If the person is no longer eligible for Continuing Healthcare Funding, the County Council may provide services to meet the social care needs of the person. However, a financial assessment will be carried out and the amount that the person pays towards their care will be dependent on their financial circumstances. Help and support through this process will be provided by the person’s appointed care manager.