The Access Team

Becky Chaddock, Helen Gray, Kathryn Crichton, Tracy Hindle

Abbreviated abstract: The Hospice Strategy 2020 committed to reshaping services to provide easier access to help and support for as many people as possible. We have brought this plan forward and implemented a single point of contact for clinical services: the Access Team.

Since April 2020, we have:

- reshaped access to St Columba's hospice care
 - responded to all referrals/enquiries within 48 hours (urgent)/ 7 days (routine)
 - managed all inpatient referrals and admissions
 - directed people to the most appropriate service and,
 - developed an evaluation methodology.



access@stcolumbashospice.org.uk



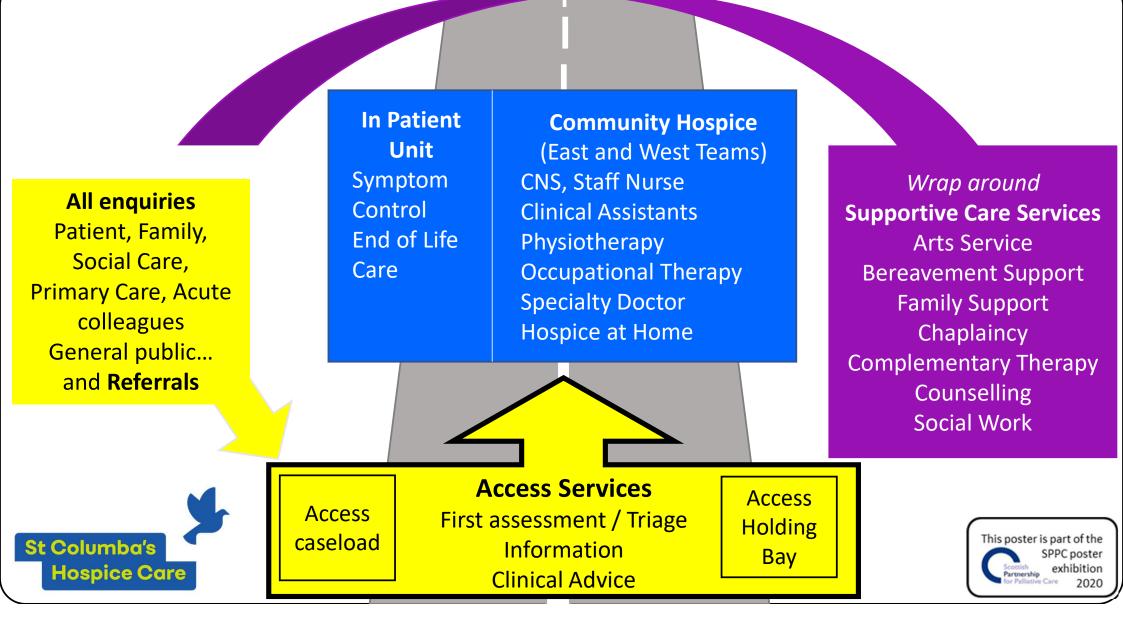
Previous work, challenge, and approach

The timeline for this strategic reshape was brought forward significantly in response to the Covid-19 pandemic, and the team was established in the first weeks of Lockdown.

- The background to this change of design, was based on patient and family feedback, locality based consultation, and national palliative care services scan gathered through 2019.
- A team lead (social worker), two specialist nurses and a clinical administrator were tasked to make this a reality and are now:
 - receiving and processing all hospice referrals
 - managing admissions to the inpatient unit and the Community Hospice waiting list
 - undertaking holistic first assessments by telephone
 - responding to requests for advice/clinical services information from patients, families, colleagues and other services.
- The work has involved adapting the NHS electronic patient record system, reorganising the role of hospice Clinical Administrators, designing and embedding policy/procedure, undertaking comprehensive holistic first assessment by phone to triage, signpost and managing admissions.





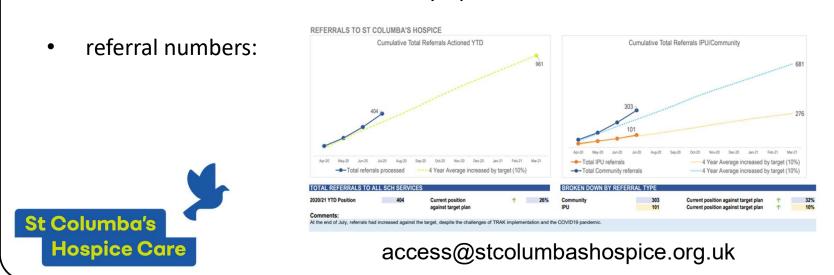


Initial Reflections

You have been wonderful to me and my family; you have supported us all the way through. Bereaved wife

In the first 5 months of running the new service we've found that:

- the new model is of value to patients, families and referrers......
- advice activity over 4 months: 250 calls taken: 60% were for information and advice only. the way through. 62 hours initial calls generating 72h additional work Subject of call: 31% Hospice services; 26% medication advice; 14% emotional/ psychological; 12% Social; 11% Symptom advice; 4% Advance Care Planning; 2% Spiritual care



Having everything in one place and one number for referrals has made a huge difference. Referrer

This poster is part of the

Partnership

SPPC poster

exhibition

You have been wonderful to me and my family; you have supported us all Patient