

SCHEDULE 2 – THE SERVICES

A. Service Specifications (B1)

Service Specification No.	06/CEOL/0007
Service	Day Hospice
Commissioner Lead	Cancer and End of Life Clinical Commissioning Programme
Provider Lead	Chief Executive - Lewis Manning
Period	1ST April 2015 to 31st March 2016
Date of Review	

1. Population Needs

1.1 National/local context and evidence base

The primary purpose of the service is to provide evidence based specialist palliative care services for the population of Dorset through direct clinical support to patients with complex palliative care needs that cannot be dealt with by a patient's own clinical team and through support to services that provide general palliative care to patients, such as primary care and community teams

Evidence Base

The services described in this service specification have been considered inline with the End of Life Care Strategy (Department of Health 2008); Quality Markers and Measures for End of Life Care (Department of Health 2009); NICE Improving Supportive and Palliative Care for Adults with Cancer (NICE 2004) and NICE End of Life Care Standard for Adults QS13 (NICE 2011).

2. Outcomes

2.1 NHS Outcomes Framework Domains & Indicators

Domain 1	Preventing people from dying prematurely	*
Domain 2	Enhancing quality of life for people with long-term conditions	*
Domain 3	Helping people to recover from episodes of ill-health or following injury	
Domain 4	Ensuring people have a positive experience of care	*
Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	*

2.2 Local defined outcomes

- Patients experience an improvement in quality of life as measured by an appropriate validated tool
- Patients have fewer avoidable admissions to hospital
- More patients die at home if this is their choice

3. Scope

3.1 Aims and objectives of service

Aims

- To improve the quality of life patients by providing a range of specialist support for the alleviation of physical, emotional, spiritual, practical and family related problems.
- To reduce numbers of avoidable admittances to secondary care by providing effective symptom relief to patients
- To educate patients to be able to manage their symptoms where appropriate
- To maintain excellent links with other professionals to ensure that patients receive person centred care in response to identified need

Objectives

- To provide day hospice support for patients at the palliative stage of their illness
- To offer advice and support to carers over the phone and in person at Lewis Manning hospice
- To involve patients in developing the services at Lewis Manning Hospice
- To review patients care plans every three months to ensure treatment is responsive to patient need
- To teach self management techniques to patients throughout their care
- To identify patient need and refer to other professionals as necessary
- To provide transport to and from the day hospice free of charge
- To offer a SOS referral service to patients whose symptoms are exacerbating
- To provide patients with comprehensive information on their diagnosis and support available
- To ensure patients symptoms are controlled to a level that is acceptable to them
- To offer support services to family members and carers.

3.2 Service description/care pathway

Service Description

A nurse-led day patient unit providing a range of services for adults with palliative care needs. These services include management of symptoms for those undergoing active cancer treatments, or those with long-term life limiting conditions.

General Overview

- Provision for 15 patients per day
- Patients attend one day per week
- Day care is available Monday-Friday (excl. bank holidays) between the hours of 10am and 3pm, depending on the patient's needs
- Day care is provided at the hospice site

Service Model

It is a nurse led model with services mainly provided from Lewis Manning hospice with initial assessment visits undertaken at home.

Pathways

Palliative and supportive care pathways and the dementia pathway.

Days/Hours of operation

The service operates from 10am to 4pm Monday to Friday excluding Bank Holidays.

3.3 Any acceptance and exclusion criteria and thresholds

Accessibility/acceptability

Services are open to all patients who are able to travel to the hospice and are registered with Dorset Clinical Commissioning Group GPs

The day hospice provides services to patients from Bournemouth and Poole and Dorset.

Referral criteria & sources

- Aged 18 and over
- Living with a life limiting or life threatening illness where curative treatment is no longer the primary aim of care
- The illness is active
- Diagnosis of cancer, neurological illnesses, respiratory, cardiac and renal failure
- Patients registered with an NHS Dorset Clinical Commissioning Group GP

Referral route

Referrals will be accepted from:

- Specialist Palliative care nurse
- District nurse
- GP
- Consultant
- Community oncology nurse
- Site specific nurse
- Social worker
- self referral to the Day Hospice- the patient's GP must be contacted before the referral is accepted to confirm that the referral is appropriate.
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Exclusion Criteria

- Patients who are under the age of 18.
- Patients not registered with an NHS Dorset Clinical Commissioning Group GP

Response time and prioritisation

- Referrals processed within 3 working day from being received at the centre.

3.4 Interdependence with other services/providers

Whole System Relationships

Work closely with community health and social care colleagues and staff from Forest Holme and the Macmillan Unit.

Interdependencies

Work as part of the whole system working closely with community health and social care colleagues and staff from Forest Holme and the Macmillan Unit.

Relevant Clinical Networks and Screening Programmes

- National Council for Palliative Care, other regional or national networks
- Dorset End of Life Care Service Delivery Group
- Dorset End of Life Care Workforce and Education Group

4. Applicable Service Standards

4.1 Applicable national standards (e.g. NICE)

- Quality Markers and Measures for End of Life Care (Department of Health 2009);
- NICE Improving Supportive and Palliative Care for Adults with Cancer (NICE 2004)
- NICE End of Life Care Standard for Adults QS13 (NICE 2011)

4.2 Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)

4.3 Applicable local standards

- Discharged when planned goals as agreed with the patient have been achieved or patient's condition deteriorates and he/she is too ill to attend or patient dies.
- Patients are encouraged to self care with assistance provided as required. General Patient Information booklet given

5. Applicable quality requirements and CQUIN goals

5.1 Applicable quality requirements (See Schedule 4 Parts A-D)

- Overall satisfaction with care received.
- All appropriate referrals accepted
- Accessibility criteria is inclusive
- Number of patients who have an assessment and management plan.
- Number of patients who have their management plan reviewed by the review date

5.2 Applicable CQUIN goals (See Schedule 4 Part E)

6. Location of Provider Premises

The Provider's Premises are located at:

Lewis-Manning Hospice, 1 Crichel Mount Road, Lilliput, Poole, Dorset BH14 8LT

7. Individual Service User Placement