 

Specialist Palliative Care Virtual Ward

Following a successful pilot of Virtual Ward within Wheatfields we will now offer this service across the City of Leeds. We are now at a stage to open referrals from our colleagues within the LTHT Palliative Care Team.

Aims of Service

* To provide enhanced multidisciplinary specialist palliative care in people’s homes.
* To efficiently meet the needs of patients with the most relevant Health Care Professional, service or intervention they require
* To reduce admissions to hospital and hospice and help best achieve patients preferred place of care and death.
* To promote earlier complex discharge from the hospice and hospital for patients whose symptoms have not been maximised

Referral criteria

* Clinically unstable
* Rapidly changing condition
* Severe or overwhelming symptoms
* Extra- ordinary psychosocial need
* Clinical complexity (e.g. withdrawal of NIV at home, ketamine treatment)
* Dying with complex needs/high level of family distress

Who can refer to Virtual Ward?

* Hospice MDT
* Hospital Specialist Palliative Care Team
* Referrals received by the hospice maybe triaged straight to the Virtual Ward

How to Refer

* Existing referral processes within the hospice.
* If urgent LTHT PCT to ring appropriate Hospice Community Team and give verbal handover, (including NHS number, name DOB and address to enable safe registration). Once registered on S1, further information accessible there and on PPM.

Expectation

* Each patient on the VW will be discussed each weekday with the full hospice MDT.
* A daily management plan will be discussed, if patient requires review a decision will be made regarding which member of the MDT is most appropriate.
* On Saturday, Sunday or Bank holiday the CNS covering the weekend will follow identified plan and seek support from therapy team and consultant on call as required.

What the virtual ward doesn’t offer

* Enhanced care package
* Continued IV therapies

Discharge

* Once the goals of admission have been met the patient will be discharged from the VW back to usual CNS caseload.
* In the event of death the usual bereavement processes are followed.

March 2022