

Delivering a responsive and effective specialist community palliative care service in an environment of change. (Gibson 2015)

Inputs

Investment

➤ Set up costs

- Planning time = £456
- Equipment and resources = £1,283

➤ On- going costs

- Monitoring = £2,123

➤ Staffing

- Redeployment of staff = £3,635
- Increased admin support = £3,555

The service

Journey through service

➤ Referral Routes

- Self referral by patients or families
- Acute services
- Primary health care services
- Voluntary and private sector

➤ Delivery Volume (2014)

- Average of 91.5 referrals per month

Services:

➤ Clinical:

- Complex symptom management
- Psychological support
- Holistic care
- Advance care planning
- Access to Inpatient care and day hospice services
- Support to practice Gold Service Framework meetings

➤ Training/Consultation:

- To disseminate palliative care skills, techniques and ethos
- To Empower patients to enable them to make informed decisions
- To support primary health care colleagues through joint visits and informal education

Summary of benefits

For Service Users

- Enhanced access 24/7
- Increased patient choice
- Rapid response from service
- Increased ability to be cared for within their own home

For St Richard's Hospice

- Costs saved £35,182 pa which enabled
- Release of Clinical Nurse Specialist time and capacity, allowing services to focus on the most complex patients. Total hours released:1,674pa.
- Effective use of resources through telephone triage by Staff Nurse rather than home visits by CNS. Annual cost saving of £1,060 p.a.
- Enhanced reputation of service
- Enhanced data collection

For other local services

- Reduced demand upon GP services. Minimum annual avoidance of 40 GP home visits, to the value of £553 p.a.
- Reduction in unnecessary admissions. Estimated cost avoidance from 3 avoided admission of £32,760 p.a.