

Exclusion criteria:

- Palliative patients who have received chemotherapy within the past week are not likely to be accepted. These clients should be admitted to NGH under their treating Oncologist.
- Ventilated patients (not including MND clients on BiPaP)
- Severe behavioural problems – some patients with behavioural disorders may be admitted following assessment by SPCS Team.

Paediatric Inpatients

Paediatric patients may be accepted. Close liaison with the NGH Paediatric Treating Consultant is essential. The Paediatric Consultant will be invited to share the care of any palliative paediatric in-patient. Contact details for consultation and liaison with the Specialist Paediatric Palliative Care Service at Royal Brisbane Children's Hospital will be available at all times for any member of the multidisciplinary team for support.

For more information about Dove Palliative Care Unit contact:

Nurse Unit Manager (NUM)
Dove Palliative Care Unit
Caloundra Health Service
West Terrace
Caloundra Q 4551
Ph: **5436 8633**



Admission Protocol for Dove Palliative Care Unit, Caloundra Health Service



MAKING A DIFFERENCE

“We aim to provide specialist palliative care through ongoing consultation and education to people living with a life limiting illness, their family and care providers in a supportive environment.”

Introduction

The Specialist Palliative Care Service (SPCS) is a multidisciplinary service supporting clients with a palliative diagnosis, including their families and carers across the care continuum. The Service aims to provide high quality, evidence based, coordinated, comprehensive and sustainable specialist palliative care.

The SPCS provides:

- Inpatient care in Nambour General Hospital (NGH), Caloundra Health Service (CHS) Medical Ward and Dove Palliative Care Unit
- Inpatient consultancy at Nambour General, Caloundra, Maleny and Gympie Hospitals and private hospitals
- Outpatient services are provided at Nambour General, Caloundra and Gympie Hospitals, Domiciliary consultancy is provided via visits to clients either in their home or nursing home.

Education across the district is a core component of Service delivery.

Clients may enter the service via referral from their GP or treating specialist. Self referral or community nurse referral requires an accompanying medical referral.

Admission to Dove palliative Care Unit

- **All admissions need to be accepted by a Palliative Care Consultant.** Both consultants have inpatient responsibility.
- Proven palliative diagnosis with a prognosis of less than 6 months.
- Complex Palliative Care clients requiring specialist inpatient care, including symptom management.
- Clients in acute or subacute care without complex needs but who are in terminal phase and the family/patient or treating doctor have requested admission to the unit on consultation with a Palliative Care Consultant.
- Palliative clients awaiting alternative accommodation with completed ACAT assessment on consultation with a Palliative Care Consultant.
- Palliative clients who are disadvantaged by high care needs and are excluded by age and care level from any alternative community accommodation on consultation with a Palliative Care Consultant.
- Community Palliative Care clients requiring admission will be given preference to patients in acute/sub-acute beds in other facilities.
- Paediatric clients may be accepted for terminal phase care following acceptance by a Palliative Care Consultant and Nurse Unit Manager of Dove Palliative care Unit.
- The Nurse Unit Manager of Dove Palliative Care Unit will manage the admission wait list.
- When there are clients wait listed, admission will be determined on a priority needs basis.