

Fast track Discharge



Doncaster and Bassetlaw
Teaching Hospitals
NHS Foundation Trust

What does 'fast track' mean?

A fast track discharge is considered when someone has a life-limiting illness, and their condition appears to be rapidly deteriorating and they may be entering the terminal phase. The Fast Track Pathway aims to provide access to NHS Continuing Healthcare as quickly as possible and with minimum delay.

What does a fast track mean for you?

A fast track provides you with appropriate care in the community. This may be in your own home or a 24 hour care facility. The Integrated Discharge Team (IDT) will get involved to help facilitate this, and will involve you and your family within the decision-making process of what will be the right care for you and the right place to receive that care. When considering your care it is important to discuss with a healthcare professional what your preferences are and what is important to you. Advance care planning helps you and your loved ones prepare for the future, to ensure your wishes are expressed, and to help healthcare professionals to provide the care that you want.

Once the appropriate care package has been agreed and put in to place, it is important that your needs are reviewed to ensure they are met according to your condition, as this may change. Your care needs will be subject to a review within 12 weeks, and the focus will be on whether your needs have changed so that the right care can be provided. This review will be carried out by the Clinical Commissioning Group (CCG). It is important to know that when care has been reviewed and is to continue, care providers may change according to availability and your individual needs. The funding may change according to the outcome of the review. Please note: we are unable to provide 24 hour care at home.

Who is involved?

Integrated Discharge Team- this may involve different health care professionals to ensure we get the right care for you. This may include:

Social Workers/Discharge Nurse Specialists - to help you decide what type of care and how much care you will require to ensure you can manage. They will also discuss support from Community Nurses which can be provided for you when you are discharged from hospital.



Occupational Therapists/Physiotherapists- to discuss any equipment/adaptations that you may need at home to help you manage at home and help you stay as independent as you can for as long as you can.

Specialist Palliative Care Team- this team may be involved in your care if you are experiencing complex symptoms which they can help to manage, and/or to provide additional psychological/emotional support for yourself and your loved ones.

Support in the community

Once you are discharged you may need further support to help you. This support can come from your GP and also the Community Nurses (unless you are discharged to a Nursing Home where 24 hour nursing care is provided). Together they can help you manage any symptoms that you may experience, provide emotional support for you and your family, and help you to stay in your preferred place of care. However if this becomes difficult this can be reassessed and other places of care explored. If your needs become more complex and further support is required the community team can refer you to the Community Specialist Palliative Care Team who can advise further with symptom management and psychological support.

When you are discharged from hospital you will be provided with a “Just in Case Bag”, also known as pre emptive medication. This is a set of injectable medications that are prescribed for any symptoms you may experience. If you are experiencing any symptoms, please contact the Community Nurse (unless discharged to 24 hour nursing care) who will assess your needs and can give you appropriate medication as required. These injectable medications can only be administered by trained staff.

****Please be aware that although we aim to provide care as quickly as possible, sometimes it may take a little time to put specific care in place if there are insufficient care providers in your preferred place of care.**

Useful contact numbers for you at home

Single Point of Access (District Nurses)
GP:

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

Telephone: 01302 642764 or 0800 028 8059. **Email:** dbth.pals.dbh@nhs.net

