# Making a Referral to Phyllis Tuckwell

For adult patients registered with a GP in Guildford & Waverley, Surrey Heath, NE Hampshire & Farnham

### Patients (18+) with:

- Advanced cancer.
- End stage non-malignant disease.
- Moderate/severe frailty.
- Terminal/advancing illness.

**Carers and Family Members** 

### **Complexity**

- Physical and symptom control needs.
- Psychological and/or spiritual symptoms.
- Social needs related to end of life and palliative care.
- Help with advance care planning.
- Help with end of life care discussions and decisions.

# Single Point of Access for Advice & Referrals

with

one or

more

For professionals, patients, their carers.

8am - 6pm

01252 729440

PTH.adviceandreferral@nhs.net

#### Out of Hours after 6pm:

Calls transferred to the In-Patient Unit and Hospice Care at Home for access to nursing and medical advice.

# Responsive Assessment & Intervention

For those with rapidly changing or unstable palliative or end of life care needs.

By a PT Clinician, via home visits and telephone contacts (working in partnership with the GP and Community nursing).

# Community Team

Working as part of a team with GPs, community and hospital health and social care professionals.

# Living Well

Supporting patients with unstable physical symptoms or psychological needs at home (or in a care home), or as an outpatient, individually or in groups at the Hospice or Beacon Centre, managing complexity, promoting independence, coping skills and quality of life.

- CNSs.
- PT Consultants/Drs.
- Living Well nursing.
- Therapists, Counsellors, other members of the MDT.

### **Living Well Programmes**

Supportive and therapeutic programmes based on needs (reviewed with the patient every 8 weeks).

A range of therapeutic sessions for groups and individuals promoting physical and emotional wellbeing and quality of life.

## Carer & Family Support

During the illness of the family member/partner/friend, under care of PT.

### **Information & Support**

A range of support and information services for patients/carers/families.

#### **Bereavement Support**

Following death of PT patient.

# Hospice Care at Home

Supporting patients at home (or in a care home), in the last days of life.

- CNSs aligned to GP Surgeries.
- PT Consultants/Drs.
- Hospice Care at Home nursing.
- Therapists, Counsellors, other members of the MDT.

# In-Patient Unit

Supporting patients for symptom control and end of life care.

7 day/week admissions.

- PT Consultants/Drs.
- Ward Manager and Nursing team.
- Therapists, Chaplain, Pastoral Care, Patient & Family Advisors, Counsellors, other members of the MDT.



...because every day is precious