

## **Discharge Criteria:**

All patients, carers and referrers will be made aware that they may be discharged from the team's care, if they no longer require specialist input. Individuals may be re-referred by any health care professional, themselves or their carers, according to the above guidance, if their needs or circumstances change at any stage in the future. The concept behind this is to make stays in the hospice short-term ones, with re-admission taking place if symptoms change or deteriorate.

Their needs will be reassessed in line with the guidelines above.

## Reasons for discharge may include:

- Acute needs stabilised, care to be continued by the primary health care team or acute trust or other provider.
- Patient/family/carer more able to cope emotionally, or receiving appropriate ongoing support.
- Patient's wellbeing is optimised and they, in partnership with their support network, are enabled to self-manage their condition, health and wellbeing without specialist support.
- Patient / family/carer perceive they do not require intervention/support at the current time.
- The specialist palliative care team agree that the service is not appropriate to meet the patient's needs (referral to another service).
- The non-specialist clinicians feel confident to deliver care using occasional specialist advice.