

Q&A from The Myton Hospices Referrers Event 09/06/2021

I used to work for another Hospice where we would offer short stays in the Inpatient Unit e.g. for bisphosphonate infusions for bone pain, or symptomatic anaemia requiring a blood transfusion, can you clarify what will and what won't be done in Myton's Inpatient Unit?

If you feel a patient may benefit from an admission to Myton please call us. We would be happy to discuss your patient's needs with you. This conversation could be with our Referrals nurse and/or with the Palliative Medicine Doctor supporting the external calls and admissions allocation. We will consider any proposed intervention alongside an admission for symptom control.

We do give IV treatments on the inpatient unit when we feel that the patient would also benefit from admission and support from the whole multidisciplinary team. We do not just admit a patient purely for an intervention. If an inpatient requires a blood transfusion at the current time we are liaising with our partner hospitals to arrange this on a short visit over to the nearest hospital from our inpatient unit.

Can a patient self-refer to the Living Well programme if not already known to the Myton team?

A patient that is not known to Myton can self-refer to the Wellbeing Services, which incorporates both the Patient and Carers Wellbeing Service and the Living Well Programme.

The Referral team can take a self-referral from a patient on the telephone between 09:30hrs to 13:30hrs, Monday to Friday. The phone number for the Referrals team is 01926 838889.

Patients and carers can also find out more information about our Wellbeing Services by speaking directly with our Wellbeing nurses on 02476 936786, Monday to Friday from 09:00hrs to 17:00hrs.

Does this program cover patients living in North Warwickshire?

Yes, we support patients and their families and friends who are registered with a Coventry and Warwickshire GP surgery. We work in partnership with all of the local Palliative Care Teams and our partner hospices, to support patients and their carers in the Coventry and Warwickshire community.

With regard to patients who would benefit from your services but have anxieties. Do you still have the service where they can just visit to see the hospice and chat with staff?

If a person would like to visit our hospice and have a tour, we can support this by arranging with them a pre-planned visit, where one of our staff members can show them around. At the time of the visit they will need to provide evidence of a negative lateral flow test. While visiting they must follow strict guidance in relation to wearing PPE, handwashing and social distancing.

There are many ways patients and their loved ones can make contact with us to get a better understanding of what support we can offer to them. They can telephone our Referrals Team or Wellbeing staff. They can also make contact with our Community Engagement Manager, Olivia Bowskill, to learn more about our services and to explore how Myton can support patients with a life-limiting illness. On The Myton Hospices website we also have many resources such as printable service

leaflets, virtual tours across our three hospice sites and videos where patients are talking about their positive experiences accessing our services.

Some helpful Myton telephone numbers and web links:

Referrals Team: 01926 838889

Wellbeing Services: 02476 936786

Fatigue and Breathlessness Management Programme: 01926 838806

Community Engagement Manager: 01926 838 878 olivia.bowskill@mytonhospice.org

Myton Website:

Available services:

www.mytonhospice.org/patients-and-families/the-services-we-provide/

Virtual Tour:

www.mytonhospice.org/patients-and-families/coming-to-myton/virtual-tour/

People's stories:

www.mytonhospice.org/patients-and-families/peoples-stories/

Myton Videos:

<https://www.mytonhospice.org/videos/>

The FAB service - can this be used by end stage COPD patients, or do they have to have a cancer diagnosis?

The Fatigue and Breathlessness Programme is designed to support people aged 18 and over who have a life-limiting condition, for whom breathlessness is a core symptom, but who may also suffer from fatigue and/or anxiety. We support many patients with a variety of conditions, including malignant and non-malignant diagnoses – for example, COPD, ILD, Heart failure, Cancer, Renal failure, MND.

What are Myton's plans for the 12 week outpatient programme at Rugby?

We are currently developing a Myton Hospice Hub which includes a range of teams using the Rugby Myton Hospice site, such as the Rugby Myton at Home Team, the Rugby Specialist Palliative Care Team and the Rapid Response team. We are looking into working more collaboratively with a variety of different health care partners, to develop our services outside the walls of the hospice.

We have recently redesigned our day unit provisions across our three sites to maximise our outreach. The Patient and Carers Wellbeing service and the Living Well Programme are now incorporated into Wellbeing Services which cover all three sites, supporting patients who are registered with a GP surgery across Warwickshire and Coventry.

We no longer provide the 12 week outpatient programme, but instead we assess the patients' and carers' individual needs and offer a tailor made service. As we no longer discharge a patient from our Wellbeing Service, unless a patient requests for this to happen, it means we can support patients for longer than previously, where patients and carers can use our services as little or as much as they need.

I have a patient needing a walking aid, do Physiotherapists carry out home visits to patients in the community with a Cancer diagnosis?

If you are supporting a patient that has Palliative Care needs and mobility challenges in the community, we would advise you to make contact with the Myton Wellbeing Services team. Our team would be able to discuss the situation with you and explore how Myton can support this patient's needs and also if necessary signpost you to non-Myton services that may be able to help in this situation.

Are you accepting Respite patients again?

We made a decision to no longer have patients that require respite in our Inpatient Units. These are generally patients in the past that had a stable malignant or non-malignant condition. At the beginning of the pandemic we made the decision that continuing the Respite Service wasn't the right thing to do because of the risks of infection control with patients mixing in the Inpatient Units and the care provided by the team.

We would encourage you to contact Myton if you have a Palliative Care patient that would benefit from Respite, our Wellbeing Services will see if we can support this patient in other ways. All of our services are currently looking at how we can outreach more to community patients working in collaboration with other community health care teams.

Do you still provide counselling?

We do provide counselling for patients and their loved ones who are known to our Outpatient and Inpatient services. We are currently offering this service through remote, telephone and face to face support. At this present time group work is on hold due to the Covid -19 government restrictions that are in place, however we are planning to commence limited group work later on in the year.

Are you providing any Complementary therapy?

At Myton the Complementary Therapy service is an integral part of Myton's multidisciplinary team providing support to patients that access our Inpatient and Outpatient services. The team offers a wide range of therapies including:

- Clinical Aromatherapy
- Reflexology
- Massage
- Acupressure
- Yoga Therapy
- Meditation/Mindfulness
- Energy therapies, such as the Butterfly technique & Reiki
- Guided visualisations

During the Covid -19 pandemic the Complementary Therapy service was not able to provide face to face therapy due to the Covid measures that we had to put into place. Recently the team have reintroduced Complementary therapies in the Inpatient Units taking into account social distancing measures and providing options such as distanced guided visualisations. Over time additional therapies will be introduced based upon the government Covid-19 guidelines.