

## Fast Track Referral Operational Guideline

### **Background**

Fast track referrals have consistently been flagged as a reason for patient delays. A contributing factor to this is that the responsibility for completing referrals does not consistently sit with one team: on some wards Discharge Support Leads (DSLs) are responsible, on others registered nurses are. This contributes to variability in the quality and timeliness of referrals.

A paper was taken to the Chief Nurses meeting on 1<sup>st</sup> August 2018 to outline the pros and cons of the accountability sitting with either DSLs or nursing staff. It was decided that from 11<sup>th</sup> September 2018 the accountability for Fast Track referrals should sit with DSLs. This guideline sets out the roles and responsibilities of the MDT in this process.

### **Roles and responsibilities**

#### **Doctors are accountable for:**

- Deciding, with MDT input, that a patient requires Fast Track referral
- Discussion with patient and their family
- Documenting the decision in the patient medical notes
- Ensuring a ReSPECT form has been completed with a resuscitation decision
- Completing an e-discharge summary, including the points noted on the Fast Track Discharge Recommendations sticker
- Prescribing anticipatory medications on the TTO

#### **Discharge Support Officers (DSO) are responsible for:**

- Referring Fast Track discharges to the DSL once a Fast Track decision has been documented in the medical notes
- Adding the Fast Track or Out of Area (OOA) Fast Track icon to ExtraMed as soon as a Fast Track decision has been documented in the medical notes
- Ensuring a Fast Track patient information leaflet is given once a doctor and DSL have discussed Fast Track with the patient and family
- Ensuring that discharge icon on ExtraMed is updated to keep the rest of the ward team informed of progress
- Putting a Fast Track sticker into the patient's notes

#### **Discharge Support Leads (DSL) are accountable for:**

- Ensuring a conversation has been had by the doctors and to inform the patient and family that they are suitable for Fast Track and discuss their options and wishes
- Completing the Fast Track referral icon (for in-area referrals) or paperwork (for out of area)
- Ensuring the patient and family are kept informed of progress
- Keeping the discharge icon on ExtraMed updated to keep the rest of the ward team informed of progress
- Liaising with ward coordinator to ensure continuity of care regarding the Fast Track discharge
- Responding to requests for information regarding patients in delay from the IDT

**The Integrated Discharge Team (IDT) are accountable for:**

- Ensuring Fast Track referrals are suitably prioritised at all times
- Ensuring processes allow for Fast Track referrals to maintain priority at times of staff absence and at weekends

**Registered Nurses (RN) are responsible for:**

- Initiating discussions in board rounds about a patients eligibility for Fast Track funding
- Liaising with DSO and DSL to ensure continuity of care regarding the Fast Track discharge
- Supporting and updating families in the absence of DSO/DSL i.e. out of hours/weekends
- Highlighting any issues raised regarding the Fast Track discharge to DSO or DSL
- Refer to community palliative care team if appropriate
- Refer to district nursing team if appropriate
- Ensure patient has a discharge summary and TTO, including anticipatory medications
- Ensuring patient has a completed ReSPECT form
- Discharge to a person's home, ensuring that the patient/family has received the EOL information booklet and community services leaflet

Nursing staff are not accountable for the Fast Track process, but can be responsible for parts of the discharge if it is agreed with their DSL at a local level that this is appropriate.