

The gathering of detailed information, by a CNS, on day of referral and provides an outcome for speed of response. Same day assessment and treatment of symptoms and if necessary referral to other disciplines, Education for referrers, patients and carers about symptom control, Provides patients and carers with telephone numbers straight away for them to access our service and 24 h helpline.

Conclusion Triage is a team initiative which has directly benefited patients and carers; opened communication with referrers; ensured we achieve local and national standards; standardised the referral process; improved data collection; provided a tool for audit.

P24 **IS A TRIAGE SYSTEM OF REFERRALS TO A COMMUNITY PALLIATIVE CARE NURSE SPECIALIST TEAM WORKABLE?**

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Aim To provide an insight into the workability of a triage system for patient referrals to a team of Community Palliative Care Clinical Nurse Specialists (CPCT).

Background The community team were concerned about delays in responding to patients referred to their service. Patients are referred to a specialist service for specialist advice for complex symptom management / psychological support. Any delay in responding to the referral impedes the management of their symptoms or support and can lead to further distress.

Methods Triage was introduced as a 6 month pilot in an attempt to improve the response time in line with local and national initiatives. An audit was then carried out using questionnaires to district nurses, GPs, and the CPCT with the aim of providing the team with evidence of the feasibility of triage as a long term working commitment.

Results Triage has provided the team with a workable practice which enables prompt response to both the patient and the referrer. Due to the process of triage the team has also ensured an accurate recording of the number of referrals, as well as a uniformed and structured response. Triage also allows for;