

Building a hospice at home team

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St Columba's Hospice Care strategy 2020 demonstrates a commitment to increasing access to community palliative support by improving and reshaping services. A response to the covid pandemic highlighted a more immediate need. Within a matter of weeks a hospice at home service was set up in May 2020 as a 6 months pilot project.

- The service aims to enable timely access to support at home, allowing patients to stay at home if that is their preferred place of care and death.
- A robust evaluation of the impact of the service and the service development is being carried out throughout using a pluralist approach⁽²⁾ and will be concluded in October 2020.

References

1McCormack, B. Manley, K. Titchen, A. (2013) Practice Development in Nursing and Healthcare. Wiley-Blackwell

2Gerrish, K., 2001. A pluralistic evaluation of nursing/practice development units. *Journal of Clinical Nursing*, 10(1), pp.109-118



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What is Hospice at Home ?



A project team was established to carry out the pilot project and included a practice development facilitator, 3 nurses and 6 community care support workers. The service covers 7 days from 8am-8pm.

As part of St Columba's community hospice, the hospice at home works alongside other services and teams to enable and empower patients and families.

The aim of the service is to offer:

- A person centred approach in the prevention of admission to or facilitate discharge from inpatient care, crisis management and support at times of rapid change including end of life care.
- Respite support for families and carers.
- The promotion of independence through enabling, empowering and educating patients and families.

Developing the team and the service

A key element of establishing the service was to use the principles of person centred practice development, using collaboration, inclusion and participation ⁽¹⁾. A comprehensive education programme was developed jointly by the project team and delivered over a month before the service started. This included:

- Classroom based groups (within covid restrictions)
- Online learning
- Learning in practice through reflection.

'it has been fun, educational and very rewarding being part of the team from the beginning' (co-ordinator)

'..involvement in writing the policy and statement has been of great benefit' (CCSW)

Key aspects to the service development were the involvement from the whole team in shaping and designing the service. Jointly working together to produce the policies and guidance that shape the service.

Results so far and next steps

The evaluation is still underway, but the initial findings show that for the period June to September, the Hospice at Home team supported 54 patients with 658 visits.



Initial data has shown the service has enabled patients to remain at home and the key elements of the service included:

- Psychological support
- Practical support related to EOLC and crisis management
- Respite support

'Hospice at home has meant that people who are at a critical point in their palliative care journey have been able to access care in a way that wasn't available before. Compassion, timely support and understanding provided at a time when it is needed most'

Hospice community Physiotherapist

Future developments of the service will focus on enabling and empowering patients and families facing the challenges of palliative illness to live well in the community, widening access to the service, ongoing learning.

