

# FOUNDATIONS IN PALLIATIVE CARE

A PROGRAMME OF FACILITATED LEARNING FOR CARE HOME STAFF AND HOME CARERS



Roxburgh House, Dundee March 2018



Grianan Day Centre, Stornoway, September 2018



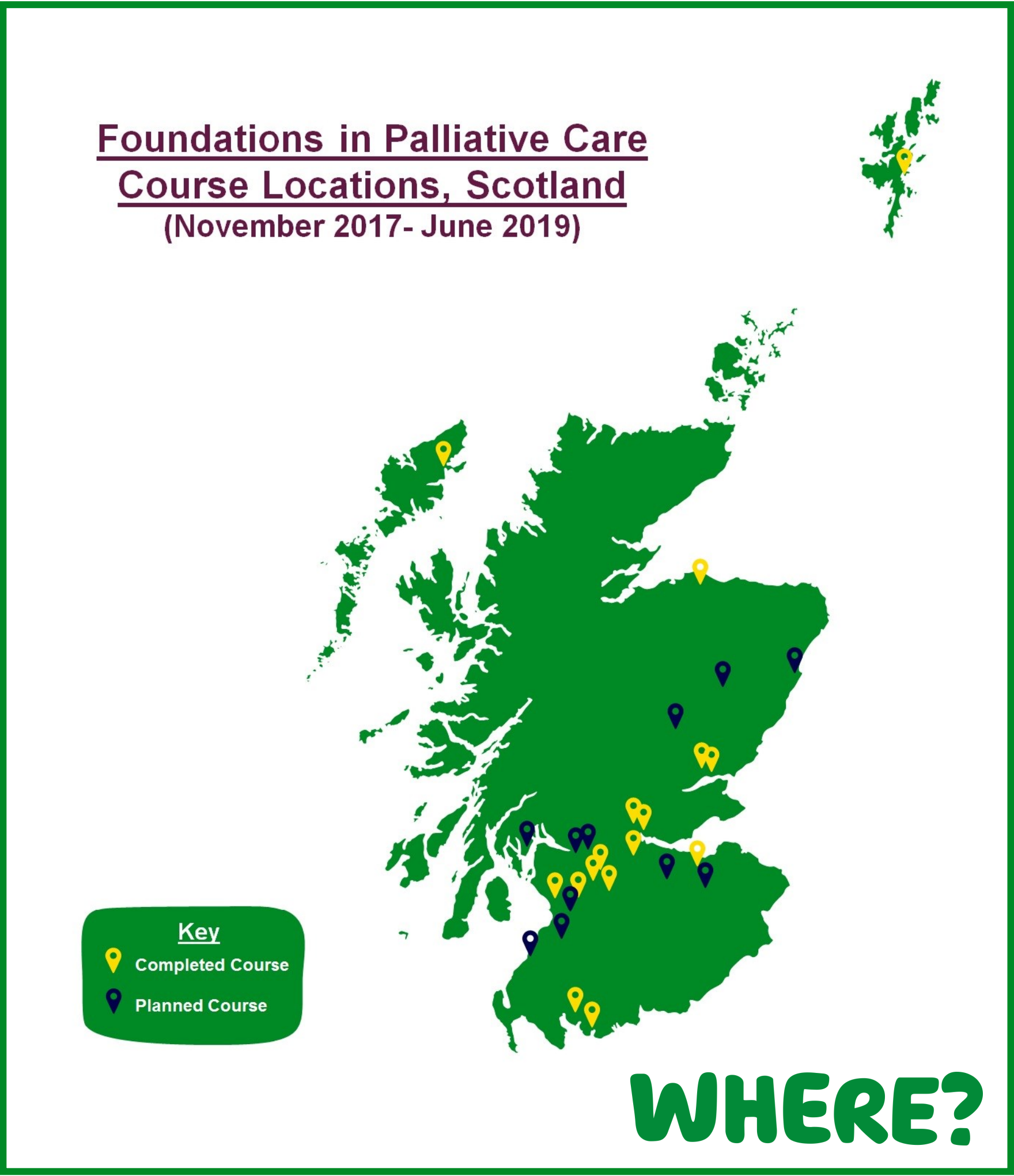
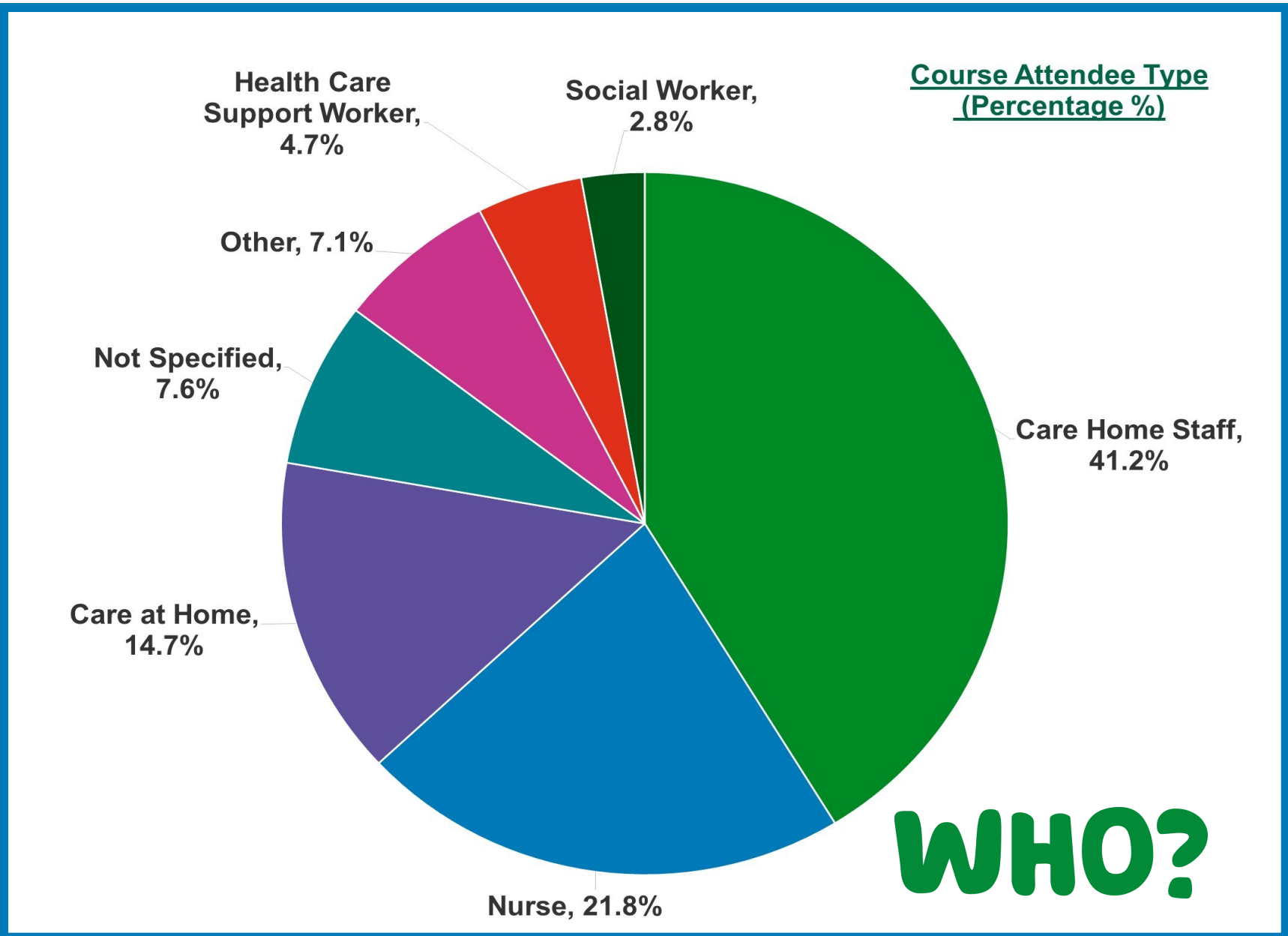
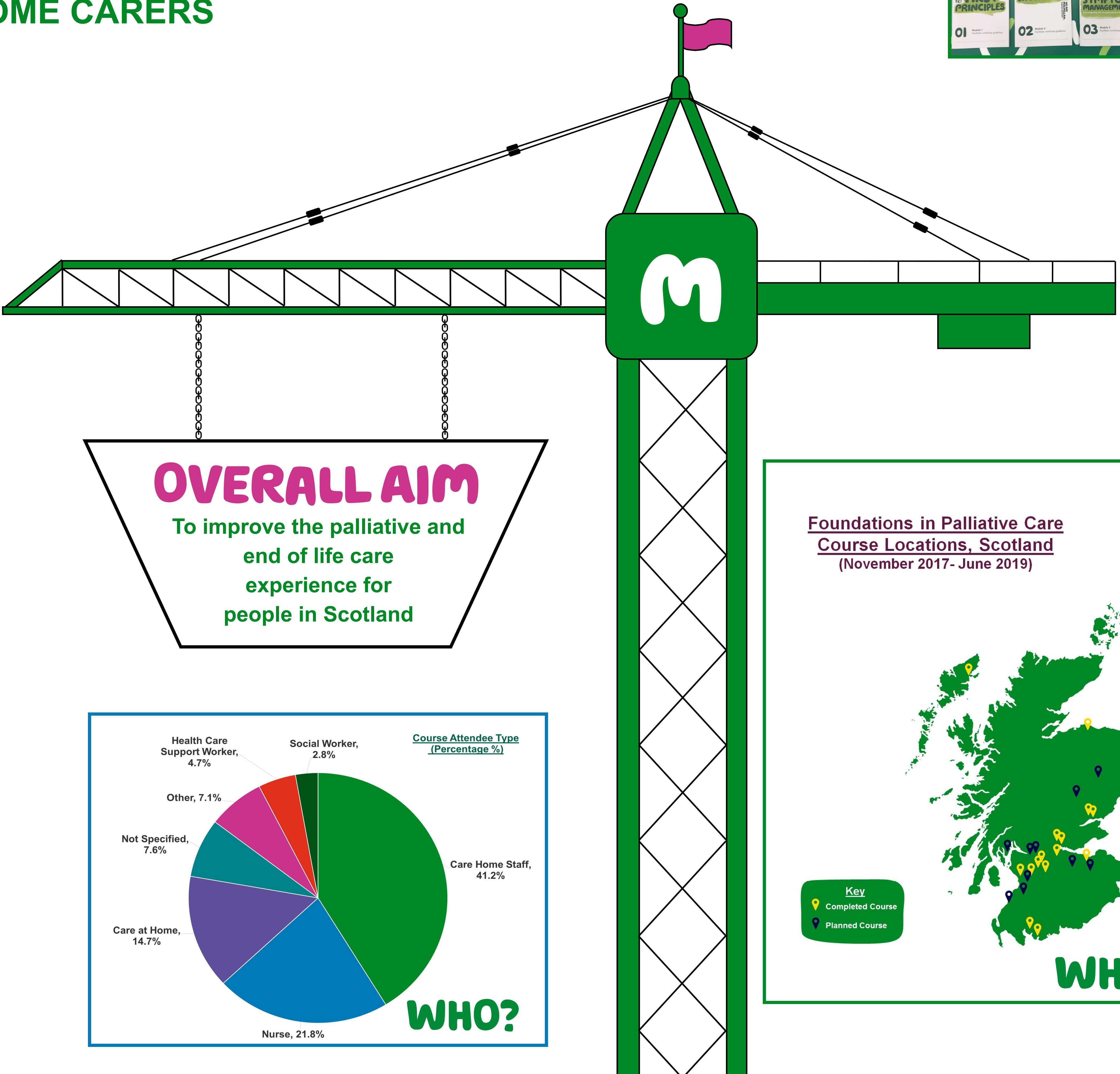
Whins Resource Centre, Alloa, June 2018



Balhousie Care Group, Dundee, April 2018



Macmillan Edinburgh Office, September 2018



## WHY?

High quality palliative and end of life care delivery across Scotland should be the gold standard, but to achieve this there must be robust education and training in place to support all health and social care staff to achieve this goal.

The Strategic Framework for Action on Palliative and End of Life Care (2015) highlights that everyone should have access to palliative and end of life care but acknowledges that there are challenges for staff to be released for training. Similarly, Macmillan Cancer Support in Scotland have also outlined in their priorities that people with palliative and end of life care requirements should have their experience improved, but to do this, we must develop and integrate the wider cancer workforce.

To address the ongoing educational requirements of health and social care staff delivering palliative and end of life care, Macmillan Cancer Support approved additional funding to allow the role out of this programme of facilitated learning.

## WHAT?

The resource pack comprises of four sections each containing a facilitator guide and participant workbook:

**First Principles:** The student is invited to explore the meaning of palliative and end of life care, the experience of loss, prognostic indicators and the dying process.

**Communication:** In this workbook the student is invited to explore core communication skills, and communication challenges in relation to palliative and end of life care within their care setting.

**Pain and Symptom Management:** Pain assessment & management of the older adult is explored and the vast benefits of pain assessment tools are highlighted. Common symptoms associated with aging and advanced disease are explored and recognising and managing the last days of life are discussed.

**Bereavement Care:** The student is asked to reflect on their experience of loss, grief and bereavement within their care setting and to discuss the support needs of everyone involved in this process.

This programme has been mapped to the 'informed level' of the Palliative and End of Life Care Framework: Enriching and Improving Experience. (NHS education for Scotland & SSSC, 2017)

## RESULTS

After completing the course attendees (N=211) reported\* that their:

- Knowledge of palliative care issues increased by an average of 28.8%
- Confidence in dealing with palliative care clients increased by an average of 22%
- Confidence in dealing with communications issues increased by an average of 26.6%
- Knowledge about the use of assessment tools in palliative care increased by an average of 33.7%

\*All data collated from daily and pre/post evaluation forms from courses running between November 2017 to September 2018.

## FEEDBACK

"I feel better prepared and knowledgeable about helping my residents prepare for death."

"It will help me communicate much better with the dying person & help the family cope with their bereavement & mourning process."

"It will certainly help me deliver better bereavement care for all involved in my home."

"Excellent four day programme. I feel this should be applied to all care homes to support staff to recognise the difference between palliative and end of life and to enable them to support families through this process of residents illness and progression to end of life care."

"It has provided me with valuable communication tools to help me talk to residents and family members more effectively."

\*\*All quotes taken from evaluation forms from November 2017 to September 2018

## NEXT STEPS...

15 courses scheduled from January to June 2019 and a formal evaluation is being planned by Glasgow University.

"Using assessment tools. More confident to use words death and dying. Being more supportive to colleagues."

"Be more aware of the day to day changes in residents that do not necessarily mean they are EOL. I will feel more confident in questioning doctors about medications. To change the way we communicate death of residents to other residents and all processes around that."

What attendees plan to do differently or change in their workplace since completing the course \*\*:

"In the future I will discuss death openly with other residents and family members. Find out as early as possible what each persons wishes are regarding death/dying. Be more aware of different cultures and their practices."

"Conveying the importance of ACP with carers, family, residents when practical. Consider how to acknowledge the death of a resident with regards to residents/carers. Consider how we can better support staff and residents follow up death within home."

"Use of SPAR tool. Work with staff on communication. Be more confident talking to families & GPs"

"Look at the emotional and spiritual care as well as the information/physical care, use the tool to decide when we change from supportive care to terminal care, take care to identify bereavement in close relatives and care and support"

"I will ensure or encourage my clients/families to have an ACP in place so all needs are met. I will ensure all staff/families know that we have an open door at the office is there is anything at all they need to discuss. Make sure are all aware of the fact that final actions are the last memory that families will have so we must make them be good at all times."

### References

NHS Education for Scotland & Scottish Social Services Council (2017) 'Palliative and end of life care: A framework to support the learning and development needs of the health and social services workforce in Scotland'

Scottish Government (2015) 'Strategic framework for action on palliative and end of life care 2016-2021'

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