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## Background

Following a recommendation by the North Ayrshire Health and Social Care Partnership under the Integrated Care Fund, Ideas and Innovations scheme the **Abbotsford Care Home** set up an Enhanced End of Life Care Service. The funding for one bed was provided for a year to enable local residents with end of life care needs the opportunity to be cared for as close to home as possible, when remaining in their own home was no longer a viable option. The management team recognised the importance of ensuring their staff felt prepared and equipped to support this service and approached Macmillan Cancer Support, the Ayrshire Hospice and NHS Ayrshire and Arran to plan, develop and deliver a robust bespoke training programme to support this new and innovative service.



Abbotsford Care Home, Ardrossan - 39 residents

"This course has highlighted that I am part of a team, I need to initiate change - and now feel more comfortable to do so."

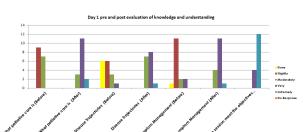


## **Education Programme**

The education programme consisted of four half days at three weekly intervals using a wide range of teaching strategies and included an introduction to palliative care, pain and symptom management, advance/anticipatory care planning, do not attempt cardiopulmonary resucitation, emotional wellbeing, end of life care and loss grief and bereavement.

Trained staff were also given the opportunity for clinical visits. The experiential learning sessions were arranged at mutually agreed times with the care home, the Ayrshire Hospice and the specialist palliative care team at University Hospital Crosshouse. These opportunities proved invaluable in helping to consolidate the learning and are ongoing. A further half day on foundation level communication skills using the Sage and Thyme model was offered to all registered and support staff. Homework sessions were incorporated to enable participants to utilise their learning in practise and feedback at the next session.

The first cohort of training is complete with a second tranche of training due to start. Two members of staff from the care home who participated in the Macmillan funded education project in palliative and end of life care for general staff in NHS Ayrshire and Arran will support this work by helping to co-facilitate future training sessions. In addition and perhaps more importantly, they will support staff to transfer their skills from the classroom to clinical practice in the role of mentors. Undoubtedly, this will be beneficial not only in terms of supporting staff to implement their learning but also the longer term sustainability of the project. The management team have identified gaps in the training provision for staff and are committed to their continuing professional development.



"People sometimes want or need to talk about death - they are not being morbid - now perhaps I won't shy away from the discussion."





"I have a better insight into how to approach the subject of death and dying with relatives and will judge their understanding in the first instance."



"I didnt believe Sage and Thyme would work but the day after my training one of my new residents was very upset so I decided to try it and I can't believe how well it worked. I was able to help this lady and in turn her daughter to understand why she was so upset - its great."

## Conclusion

This project has been an excellent example of collaborative working between health and social care and a local and national charity to provide current evidence based education in palliative and end of life care. It also has the potential to prevent avoidable admissions to acute care settings. Whilst the new service was the basis for the training, the staff quickly realised that their enhanced knowledge and understanding would not only apply to the designated bed but would influence the care of all current and future residents.

"Its OK not to know all the answers, but it is the listening that is important and I will feel more confident to approach subjects I would not normally have done."

"I will be more thoughtful & caring when a resident comes in from home, as I didnt always think about what the person leaves behind."

