

Whole System Approach: Supporting End of Life Care and Conserving Critical Medicines during the COVID-19 Pandemic

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Abbreviated abstract: During the COVID-19 pandemic it was anticipated there would be a significant increase in demand, across all care settings, for the timely provision of critical medicines to manage symptoms at the end of life. To address this challenge, a whole system multi-disciplinary team working approach, utilising established local and national networks, was taken across the Tayside health board area of Scotland.

Related publications:

- The Scottish Government. (2020). *COVID-19 Palliative Care Toolkit*. Edinburgh.
- NHS Health Improvement Scotland. (2020). *Scottish Palliative Care Guidelines*.



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Previous work, challenge, and approach

- In all care settings, **the availability of medicines in the end of life phase** has the potential to ensure people receive timely symptom management. Unnecessary crises can be prevented. **More people are cared for and die with dignity.**
- During the COVID-19 pandemic it was anticipated that there would be **a significant increase in demand**, across all care settings, for the timely provision of **critical medicines** to manage symptoms at the end of life. Several of these medicines are also used as critical medicines in the **ICU setting**. This required to be recognised and planned for on a national basis ensuring equal prioritisation of use.
- In tandem with these **increased & competing** demands, there was the potential for a **reduction in the availability of the workforce** to support the usual systems required for the **safe and effective** prescribing, dispensing and administration of these medicines.
- There was therefore an urgent need to **review existing systems and implement, at pace, revised processes** to ensure the critical medicines required for supportive and palliative care could continue to be available and used safely and effectively on a sustained basis for **those who needed them when and where they needed them.**

Techniques and Methods

To address these challenges, a **whole system multi-disciplinary team working approach** was taken across the Tayside health board area of Scotland.

The use of **virtual technology** enhanced the efficiency and reach of this approach.

Collaborative working with established local and national networks was maximised enabling the review of existing systems and the implementation of revised processes at pace and scale.

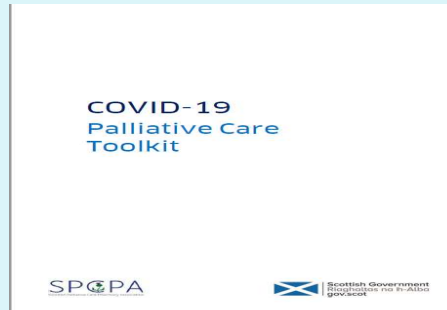
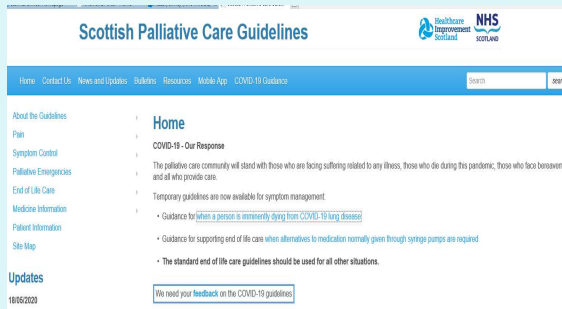


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Results and Conclusions

➤ Led, influenced and contributed to **national and regional tools**:



➤ Used these tools to **strengthen local contingencies** across a range of care settings:

General Practice, Out of Hours Centres, COVID-19 Assessment Centres, Community Pharmacy, Care Homes, Hospital & Hospice Inpatient Areas.

➤ **Ongoing collaborative working** with established local and national networks continues to ensure the **critical medicines** required for end of life care are **available on a sustained basis** and used safely and effectively by **those who need them when and where they need them**.



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