## What is CSNAT & Why Should We All Be Doing it?

Most people living with a terminal illness and approaching death will need the assistance of a non-professional carer such as a family member, friend, or neighbour to provide physical, emotional, and practical caring supports (Tieman et al., 2023).

Research shows that palliative care patients are often re-admitted to hospital following discharge due to a breakdown in carer support at home (Kadu et al., 2021), emphasising how important the role that carer support plays in caring for a dying loved one at home.

We share our findings with the wider team and encourage them to take on the assessment within their own area of expertise as well. It is essential CSNAT that family providing critical care need to integrate Intervention with the health professional (CSNAT-I) team as this significantly impacts the decisions for Place of care and death. Stage 5 (Vermorgen et al, 2012). Shared Introduce Stage 4: In the 3 review CSNAT-I months pilot the main Concerns were around Dealing with their own Worries and not Carer Support Needs knowing what to Assessment Tool expect Stage 4 Shared After a year of action considers administration the plan main concerns were around support with Stage 3 moving and handling,

Stage 1: The CSNAT tool focuses on social, and practical support needs of

Stage 1

Stage 2

Carer

needs

of care they provide

Stage 2: It is important that we as a team identify the carers needs with the aim of the patient and the carer can having the best experience of being cared for at home and dying at home if this is the patient choice. It is

to provide physical, emotional and practical caring supports to remain at home.

critical for people living with a terminal

illness to have carers and family members

Stage 3: It is useful to have a conversation separately with carers to provide a space for them to voice their own concerns and worries and know that their voice is being heard.

Carers have unmet information needs and these information needs can change across the caring period (Tieman et al, 2023).

Assessment

conversation

From January 2025 - April 2025, of the patients who wished to die at home, we were able to facilitate 81.6% of those patients to fulfil their wish.

having, practical help in the home

with worries.

i.e. dealing with bins, cleaning, etc, along

with having time for themselves and dealing

