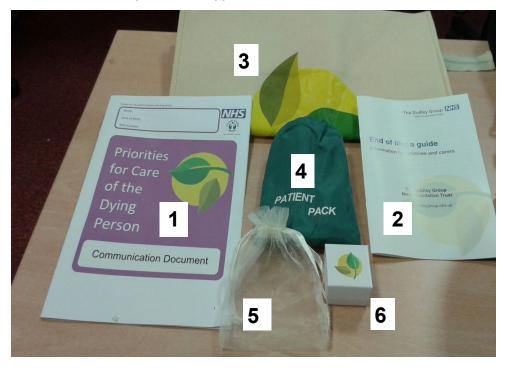
Palliative Care Champions Newsletter

September 2016, Edition 3

On July 1st 2016 we launched the Priorities for Care of the Dying Person Communication Document along with the End Of Life (EOL) Box on each ward. As a Champion it is your responsibility to make sure you know what is in the box and make sure all your staff know too.

This unfortunately has NOT happened on some wards.



WHAT IS IN THE EOL BOX AND WHERE SHOULD IT BE KEPT?

- 1. Priorities for Care of the Dying Person Communication Document This should be accessible for all staff (Nurses, Doctors and AHP's) in a draw behind each station the same as other documentation. It will not be used by all staff if it is kept in the box. You as champion need to know how many have been used on your ward when asked for re-ordering purposes.
- **2.** End of Life: a guide. Information for Relatives & Carers This should be kept alongside the priorities for care document and should be given to relatives when it is recognized that the patient is in the last hours to days of life.
- **3. EOL Property Bag** This bag is for patient's property that goes to the mortuary. This is for ALL patients not just those known to the Specialist Palliative Care Team. The bereavement office are carrying out an audit to inform us when any property goes to the mortuary not in the correct bag. These bags should be kept in the EOL box.
- **4. Patient Pack** This pack is to offer relatives if they stay overnight and have no toiletries. It consists of a toothbrush & paste, soap, a comb, razor & foam, cleansing wipe and shampoo. These should be kept in the EOL box.
- **5.** Organza Bag This bag is to put jewellery in or locks of hair if relatives have approached you after reading the 'End Of Life: a guide: information for relatives and carers'. These should be kept in the EOL box.
- **6. Ring Box** This box is to put jewellery / rings in if the relatives wish to take the jewellery of their relative home. These should be kept in the EOL box.





EDUCATION

E-ELCA

Please continue to work through section 09— Priorities for care. Any problems then contact Karen.lewis@dgh.nhs.uk

SAGE & THYME

Do you feel confident to talk to someone who is worried or distressed?

Would you benefit from extra training?

Contact:

Karen.lewis@dgh.nhs.uk

CHANGE IN STRUCTURE

It has become increasingly difficult for the Specialist Palliative Care Team to mentor you as we would have liked due to shifts etc..

We propose as of September 1st all Lead Champions will be aligned to Karen Lewis as End of Life Facilitator. The champion role will concentrate on end of life care until we have got it right.

Karen will meet up with every Lead champion at least once a month.

The Specialist Palliative Care
Team members will still be
aligned to the same wards but
will touch base with the lead
nurse at least once a week.

Hand Printing Equipment

In each EOL box there are hand print wipes and paper. This is not for everyone and should only be carried out on request of the relatives after reading the End Of Life: a guide: information for relatives and carers'. These are simple to use and should be kept in the EOL box.



PLEASE REMEMBER SUPPORT FOR YOU:

Pat Our Volunteer



Pat is working with us on a Monday and Friday currently and offers a fantastic service to our patients. She will sit and chat to those patients that need company, sit and listen to those that need support and just generally be there for patients and relatives in their time of need. She offers complementary therapies (hand & foot massages) for those patients that may benefit from relaxation. If dying patients enjoy music Pat will locate a CD player and do her best to get the music they love. To

contact Pat please call ext. 2238 and ask for her support. Patients do not need to be known to the Specialist Palliative Care Team (SPCT) to have Pat's support.

Hospital Imam



Usman is doing a fantastic job supporting Muslim patients and families at this very difficult time. He has really supported us as a SPCT especially where there are large groups of relatives who are extremely upset and having difficulty coping with the loss of their relative. Usman will also support you as staff even if the patient and relative do not wish to be referred to him. To contact Usman please contact switch 24 hours a day. He is also working behind the scenes to develop a Muslim box which will have resources in for patients and families.

Patient Stories: Critical Care—Examples of how we support practice

Two staff on Critical Care recently went above and beyond to support a wife and two children following the death of their husband / dad. They allowed the wife to wash her husband with them and gave her time and space to lie on the bed next to him for one last time. The family wanted hand prints which they facilitated and they involved them at all times in the care. Their one last wish was to walk to the mortuary with their Dad/ husband which the staff facilitated. The wife made a comment that the care she, her children and her husband received following his death was amazing and will be lasting memories of a lovely life. Well done to those involved!



LATEST NEWS

Palliative Care Champion Meetings 2016, 11-12.30, CFC:

- 13th September
- 9th November

Next Years Dates for your diary: 1-2pm, CEC:

- 14th Feb 2017
- 25th May 2017
- 5th Sept 2017
- 7th Dec 2017

On-going support

To help support and educate all staff Karen Lewis—End of Life Facilitator will be contacting each lead champion to arrange to spend some time on each ward. Please ensure you continue to inform all staff in the meantime.

Update on Mouth Care:

Pink sponges:

Julie Walklate is updating the oral care policy. Julie is going to stipulate that they can be used, the nurses responsibility will be to complete a risk assessment gaging whether the patient can use them independently or would require supervision (the sponges must only be used once and then thrown away - not left soaking in liquid at any time. (apparently causes the sponge to fall off from the stick according to the manufacturers).

