

1 End of Life Care and Palliative Support

- 1.1 Clients with palliative and/or end of life care needs should be supported to make the last stage of their life as good as possible because everyone works together confidently, honestly and consistently to help them and the people important to them, including any carers.
- 1.2 The Service Provider will ensure a culture is established within the service that gives value to a person's dying as well as to their living.
- 1.3 The Service Provider will ensure that all care provided to Clients with palliative and/or end of life care needs is aligned to the following 6 National Ambitions for Palliative and End of Life Care (May 2021):

01

Each person is seen as an individual

I, and the people important to me, have opportunities to have honest, informed and timely conversations and to know that I might die soon. I am asked what matters most to me. Those who care for me know that and work with me to do what's possible.

02

Each person gets fair access to care

I live in a society where I get good end of life care regardless of who I am, where I live or the circumstances of my life.

03

Maximising comfort and wellbeing

My care is regularly reviewed and every effort is made for me to have the support, care and treatment that might be needed to help me to be as comfortable and as free from distress as possible.

04

Care is coordinated

I get the right help at the right time from the right people. I have a team around me who know my needs and my plans and work together to help me achieve them. I can always reach someone who will listen and respond at any time of the day or night.

05

All staff are prepared to care

Wherever I am, health and care staff bring empathy, skills and expertise and give me competent, confident and compassionate care.

06

Each community is prepared to help

I live in a community where everybody recognises that we all have a role to play in supporting each other in times of crisis and loss. People are ready, willing and confident to have conversations about living and dying well and to support each other in emotional and practical ways.

- 1.4 The Service Provider will have a written policy and procedures relating to caring for Clients with palliative and end of life care needs. This will include care provided in the last days of life and cover what occurs in the event of a Client's death. The Service Provider's staff will be familiar with the policy and procedures and have received appropriate training to ensure the provision of appropriate and timely care before and after death. This may include free End of Life Care training accessed via the East Sussex County Council Adult Social Care Training Portal: [East Sussex CPD Online \(eastsussexlearning.org.uk\)](http://eastsussexlearning.org.uk)
- 1.5 The Service Provider's written policy and procedures will take account of the National Ambitions noted above and recommendations made in the following National Institute for Health & Care Excellence (NICE) Guidelines:
- Caring for adults in the last days of life (NG31, Dec 2015)
 - End of life care for adults: service delivery (NG 142, Oct 2019)
- 1.6 The Service Provider will have systems in place to identify Clients who are likely to be approaching the end of their life to ensure individuals' preferences and wishes for their care are known and documented.
- 1.7 The Service Provider will ensure that all care staff have awareness of Advance Care Planning (ACP) principles and tools including Recommended Summary Plans for Emergency Care and Treatment (ReSPECT). The Service Provider will have processes in place to record details of existing ACPs (i.e. staff know if a Client has a plan).
- 1.8 The Service Provider will ensure that all staff involved in the delivery of care to a Client with an ACP are aware of the provisions within their plan(s) to ensure care is provided in line with individuals' wishes wherever possible. The Service Provider will liaise with the authors of a Client's ACP in the event that any content appears inaccurate or cannot be supported by the service.
- 1.9 Palliative and end of life care provided by the Service Provider will:
- focus on the quality of life remaining to the Client
 - be person-centred and focused on the physiological, psycho-social and spiritual aspects of an individual's care. This will include consultation with the Client and those important to them over any religious, ethical or cultural customs they may wish to be observed during their care and after death
 - seek to support the relief of pain and other distressing symptoms, in liaison with other appropriate healthcare professionals as required
 - support the Client and those important to them to access appropriate generalist and specialist palliative care advice and support. This may include hospice services.
 - support the Client's family and those important to them, before and after the resident's death
- 1.10 The Service Provider will be person centred in their approach to the use of equipment (including profiling beds) when supporting Clients with palliative and/or end of life needs. Clients will be consulted about equipment options and the benefits and risks associated with different equipment choices. The Service Provider will respect Client choices regarding the equipment to be used and ensure staff are appropriately trained to accommodate this. The Service Provider can access free training in '*Moving and Handling of People with Restricted Mobility for Care Givers*' via the East Sussex County Council Adult Social Care Training Portal: [East Sussex CPD Online \(eastsussexlearning.org.uk\)](http://eastsussexlearning.org.uk)
- 1.11 The Service Provider will use all reasonable endeavours to ensure that a dying person is not left alone, unless this is their choice, and that they support those who are important to the Client, including families, and fellow staff.

- 1.12 Where nursing care is provided, The Service Provider's nursing staff will be appropriately trained and competent to carry out timely Verification of Expected Death (VOED) both in and out of hours. Timely verification is considered to be within four hours in a community setting ([Special Edition of Care after Death: RN Verification of Expected Adult Death Guidance \(Nov 2020\)](#)). Should staff require remote support to complete timely VOED, the following protocol from The British Medical Association should be followed: [BMA Guidelines for Remote VOED Out of Hospital \(April 2020\)](#)

Bereavement help and guidance

- St Michael's bereavement service – Hastings & Rother - offering bereavement counselling and support by phone to adults:
[Referral form on the website](#) or phone 01424 456 361
- St Wilfred's Hospice bereavement service - adult bereavement support to the whole community:
[Wilfrid's website](#) or phone 01323 434 251 Health and Care Professionals can [make a referral](#).
- Sussex Bereavement Helpline is available Monday to Friday from 8am to 5pm on 0300 111 2141.
- Cruse local support - <https://www.cruse.org.uk/get-help/local-services>
- The [Good Grief Trust](#) signposts to a choice of immediate, tailored, local and national support. This includes a free coronavirus bereavement crisis and support line, available from 8am-8pm on 0800 2600400
- Sussex Health and Care Partnership have produced a [bereavement guide\(opens new window\)](#) to support people during COVID-19.
- The government has published [What to when someone dies guidance](#) to help bereaved families, friends or next of kin make important decisions if they have lost someone during the COVID-19 pandemic.

Resources/ Training & Guidance:

Skills for Care have developed an [End of Life care support supplement\(opens new window\)](#) to help the workforce during the Pandemic.

National framework to support caring for dying people:
<http://endoflifecareambitions.org.uk/>

Stop Look and Care:
<https://eastsussexlearning.org.uk/node/1468>

E-Learning or Healthcare:
<https://www.e-lfh.org.uk/>

National Council on Palliative Care – Every Moment Counts
https://www.nationalvoices.org.uk/sites/default/files/public/publications/every_moment_count_s.pdf

WWW.dyingmatters.org