Cree Ward

End of Life Care within an Acute Organic Assessment Unit

Background

- Moved to Midpark Hospital in 2012
- 16 beds mixed sex ward
- Acute Assessment Ward for individuals with an Organic illness

Influencing Factors

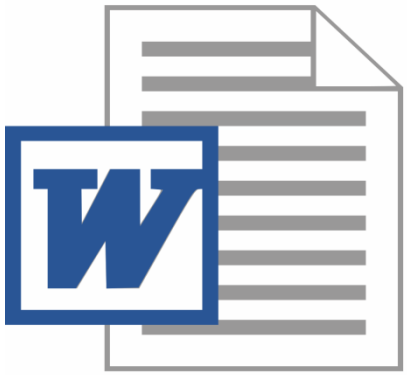
- Increased number of individuals displaying severe and unmanageable distress
- On a number of occasions opinion sought from colleagues within Palliative Care
- Decision made to turn to end of life care
- Consultation with person's family and medical staff on ward
- Little or no consultation with nursing staff

What we did

- Discussion between senior nursing team, In Patient Manager and Consultant
- Decided that some sort of framework was required
- Met over several months
- Widened the group

What we devised

- Workable document
- Aimed at decision making
- Utilised principally within Cree but transferable



Where we are now

- Nursing staff understand and actively contribute to decision making and outcomes
- Greater recognition that patients may be coming towards end of life
- Change in attitude
- Spread to Intermediate Care Ward

Continued……

- We believe that the whole ethos of Dementia care has changed and that now along with promoting well-being, we should be promoting Palliative and End of Life Care to ensure that individuals are granted the right to a dignified death. The framework allows correct decision making WITH and FOR each INDIVIDUAL

- In keeping with some of the key challenges with Scotland's National Dementia Strategy

- In line with NICE Guidelines and Strategic Framework for action on Palliative and End of Life Care

Considerations

- Do you believe that this person is in the last days or hours of life?
- Is this person displaying severe distress?
- Which pharma/non pharmacological options have been tried including treating possible reversible causes of distress?
- Has a case review been sought from fellow Mental Health Consultant?
- Has there been consultation with the specialist palliative care Medical Team with options for treatment formulated?

Continued

- Is this process in keeping with the person's current or previously expressed opinions/wishes? Is there an Advanced Directive/Living Will?
- Has appropriate discussion taken place with all relevant parties?

References

- Scottish Government 2017

Scotland's National Dementia Strategy

www.gov.scot/Publications/2017/06/7735

- Scottish Government 2015

Strategic Framework for Action on Palliative and End of Life Care

www.gov.scot/Publications/2015/12/4053

- NICE Guidelines (NG31) 2015

www.nice.org.uk/guidance/ng31

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