

North Hampshire Six Steps Programme Newsletter December 2015

In August 2015 the first 7 homes to complete the North Hampshire Six Steps end of life care education and practice development programme celebrated their accreditation with a lavish afternoon tea event at Oak Lodge care home.



The programme is funded by North Hampshire Clinical Commissioning Group and delivered by St Michael's hospice and is available to all care homes in North Hampshire, providing low cost, high quality end of life care education and practice development. In this first edition of the newsletter, accredited

homes share some reflections of how the programme has enhanced the end of life care they deliver:

Dawn Gilbert Senior HCA at Marnel Lodge describes the care she delivered to a dying resident and his family:

“I was on shift for the residents final days and I spent my time making sure he was in no pain and was comfortable, all his final wishes were in place and that his surroundings were peaceful and his family were present. I was always on hand if there were questions from the family and I feel that I cared for them as well as their father. On the day that my resident passed the family had requested I be the one to perform the last offices and be there when their father left Marnel Lodge. I stayed on shift for 15 hours on the day that he passed so that his family’s wishes were met and that everything was done to the standards we expect after our training on the six steps. For the 2 weeks after his death I had continuous contact with the family who said that my support made a really difficult time a lot less stressful and they were pleased with everything the team at Marnel had done to make their dads final days peaceful”.

Mary Thason Deputy Manager of Marlfield Nursing home describes how her team were able to recognise and manage a resident’s end of life symptoms:

“Mrs E was a 96 year old lady was transferred from the Residential to Nursing Unit due to deterioration in her general physical health and increased nursing needs. E was a strong lady who expressed her wishes that she wanted to die in the nursing home surrounded by her family. She was expecting death, as if it was round the corner for her after her younger daughter who had passed away couple of years ago. E had a daughter and grand children who mostly visited her every day and spent most of the day with her.

It was observed that E was coming towards end of life. We could see the prognostic indicators very lethargic, sleepy, not seems interested in anything, poor appetite, weight loss, moaning and groaning, being breathless and nauseated. E was seen by the GP on several occasions and also had discussions with her as she had capacity to express her feelings. The GP asked her if there was anything we would be able to help her with. She stated that she was ready to die. We requested anticipatory medication and ensured the DNACPR form was signed. The family were very supportive to E in all her decisions even though we could see they were distressed at seeing their mum’s condition.

E daily care needs were met by and she reached a stage where she could not verbalise any pain, so we used an observational pain assessment tool. She was commenced on Oramorph to control her pain in the right upper quadrant of the abdomen and constantly monitored to assess her pains to ensure drug effectiveness. Injections of morphine sulphate were given PRN s/c when required. E was offered drinks and she was able to tolerate small sips of fluids at frequent intervals.

E's daughter stayed with her most of the days and nights till she passed away. We supported the family by providing a quiet room for them to be in when they needed some time out and offered drinks and emotional support.

On the third day E's symptoms increased she became more restless and agitated, so a syringe driver was commenced which enabled her to be comfortable and pain free until she passed away. E's daughter's anxiety was relieved when she saw her mother more calm and peaceful and she felt able to be present at her mother's bedside when she passed away".

Deborah Macartney Deputy Manager at Pax Hill describes the difference how she and her team used the Six Steps colour coding system to help them plan for the end of life care of a resident:

"Managing the care of an individual's final stages of life can be both challenging and traumatic for any nurse. A recent experience for me was greatly supported in applying the concept of the Six Steps to end of life care, by providing a framework which guided each stage to achieve a dignified and peaceful death.

On arrival to our unit it became apparent that the individual was clinically unstable and by applying the needs based coding of Six Steps, it was evident that the amber stage was appropriate to meet the residents care needs. This meant in reality that as a multi-professional team with the GP, we could review and agree an escalation plan to address anticipatory prescribing. In this case the resident had full capacity with regards to decision making therefore it was possible to sit and talk about choice and expectations of the days ahead. It was the individual's choice to decline any religious support and the comfort of touch, through holding hands proved to be the compassion needed. Close family members were supported each day with explanations about what was happening and what they might expect to see with the decline in health. This was important especially when eating ceased, restlessness emerged and pain began to increase.

As the disease process progressed and the clinical signs emerged a review of the code was adjusted accordingly to red, with care plans and assessment needs being updated. This stage of planning considerably reduced the discomfort and distress experienced and with constant monitoring, allowed the titration of prescribed doses. Again this classification and guidance supported me in tailoring the care specific to symptom management, with the initiation of the anticipated drugs via a syringe driver during the last days of life.

After the death of our resident, we were able to offer support and comfort to the close relatives followed by guidance and bereavement signposting. For my team, I was able to talk over their experience, concerns and feelings about managing similar situations in the future".

Applewood Care Home



Marnel Lodge are planning their first Celebration of Life service. Families and staff will be invited to write treasured memories of deceased resident's onto paper stars which will be hung on the home's Christmas tree during the service.

If you would like more information about the Six Steps programme please contact the facilitator Susan martin: susan.martin@stmichaelshospice.org.uk