

National End of Life Care Programme End of Life Care Systems Modelling Project (East Midlands)

EoLC Stories that informed the Description of Workforce Needs Using Functional Analysis (2010-11)

Use of a Care Pathway allows for description of need at all entry points

A female cancer patient who lived alone with her teenage children and had no support network was introduced to the Community Nursing team when she requested dressings.

On initial assessment it was identified that she had an extensive fungating breast wound, but the lady refused all offers of support other than the dressings. Her living conditions were poor as a result of her ill health and she was challenging to the community team although she acknowledged concerns about the state of her house, her children and her finances.

Her condition was deteriorating but it wasn't until a nurse found her semi-conscious one day that she consented to a hospital bed and equipment being introduced to her home.

Within 4 hours the lady was in bed with a pressure relieving mattress which she accessed using a hoist. Pain relief was instigated via a syringe driver and her care became shared between community nurses and Hospice @ Home with Marie Curie providing support overnight. In working with Social Services other help was introduced to address her living conditions and the care of her children (including contact with their father).

The lady died within 2 weeks comfortable and pain-free.

Our work allowed us to consider individuals who enter the EoLC pathway at various points – this lady became known to the community team at a point when she needed complex care, and when the assessment of her needs and care plan delivery needed to take place rapidly. Functional analysis has reflected the additional skills and time that may be required in dealing with individuals accessing the pathway at this stage. Importantly cancer patients are often viewed as being predictable and on a long pathway of care, but this illustrates the need to plan for those who present later in their illness, either out of choice or late diagnosis.

Want to find out more? Further detail on how we worked with health and social care professionals to describe the care needed for individuals in their last year of life in community settings can be found on the NEOFELCP Intelligence Network site (http://www.endoflifecare-intelligence.org.uk/end_of_life_care_models/skills_for_health.aspx).

More detail about the use of functions and competences as a way of reviewing and designing your teams based on patient need can be found at www.skillsforhealth.org.uk, or by contacting pippa.hodgson@skillsforhealth.org.uk.