WHAT DOES END OF LIFE CARE TRAINING LOOK LIKE IN GHNHSFT?

We are committed to embedding pride in EOLC across our trust. We recognise the importance of everyone having a role within EOLC at all staff levels and extending into our patients and their families.

Health education England have produced core training standards around end of life care and this covers all staff groups, as well as recognising the importance of societal change. The training is divided into 14 themes and tiers according to 'role'. https://www.gloshospitals.nhs.uk/work-us/training-staff/training-education/. There is recognition of the need to take responsibility for one's own learning and continuing professional development. In addition an awareness of the importance of contributing to the ongoing improvement of care and support, participating as appropriate in evaluation and development, and of involving the people receiving care and support in that process.

As a trust, we are dedicated to supporting these principles and working with not only staff but our patients and families to support all aspects of EOLC. The core standards are relatively new and across Gloucestershire, we are reviewing the current EOLC training provision to ensure it is in line with this.

KEY AUDIENCES FOR TRAINING TIERS

Tier 1 — Those that require general end of life care awareness, focusing on a community development, asset based approach to care.	Relevant to you if:
Tier 2 — Health and social care professionals who require some knowledge of how to provide person centred, high quality end of life care as they often encounter individuals who need such support within their working environment.	Relevant to you if: Work in any clinical areas/roles. Support clinical services within the acute hospitals Work at a managerial level supporting development in end of life care services.
Tier 3 — Health and social care professionals who require in-depth knowledge of how to provide care and support for an individual approaching the end of life because they work in services that primarily offer care and support for individuals approaching the end of life, their family and carers.	 Relevant to you if: Work in clinical areas where many patients are in the last year of their life. Work within specialty areas where end of life care is often seen – cancer/long-term conditions and specialist Palliative care along with ED/DCC. Are a senior manager/leader of services across the trust.

EOLC training is a constant learning process, each situation is different and learning from daily interactions both in work and in life will enhance the care that is provided. We expect staff to take

responsibility for their own learning and not just 'tick a box' but actively seek out the additional resources available to them. We have outlined roles and responsibilities for certain staff groups in the 'Roles and Responsibilities document'. https://www.gloshospitals.nhs.uk/our-services/services-we-offer/end-life-palliative-care/ As highlighted, you should discuss EOLC within your annual appraisal and agree your priorities for learning.

Summarised below is the broad approach to the training that can be accessed within GHNHSFT — more detailed information is available on the Trust professional development pages and End of Life Care pages. Everyone will have slightly different needs specific to their roles, even within the same staff group. Many of these core skills are translatable to and from other aspects of your work and by completing training in end of life care, skills will be broadly enhanced. Staff should record any training that is undertaken within their professional portfolios and ideally link it back to each domain of learning. We record training centrally where possible but rely on staff maintaining their own portfolios alongside this. We are establishing an agreement that we can transfer training across organisations in Gloucestershire.

Our current focus 2018, is on establishing clear Tier 1 training for all staff.

TIER ONE CORE STANDARDS FOR EOLC

Over-arching goal of tier 1 training is to foster an open culture around death and dying. We are establishing a culture where we can discuss the barriers and challenges that we all face in discussing mortality and recognising where health is declining.

- Essential e-learning module approved June 2018 and awaiting addition to learning tree.
- EOLC email updates
- EOLC web-pages
- Schwartz Rounds
- Monthly drop in sessions 'White Rose Cafe– open forum to explore challenges/discuss concerns/share learning'
- Conflict resolution/safe-guarding/mental capacity act training
- Public/staff events dying matters week, write a will month etc.
- E-Elca modules https://www.e-lfh.org.uk/end-life-care-e-learning-e-elca/

TIER TWO CORE STANDARDS FOR EOLC

Re-launch of Shared care record in June 2018 will encompass learning around recognising dying, individualised care planning, symptom control and support for carers/those close to a patient.

- Range of micro teach/e-learning and ward based sessions.
- Syringe pump T34 competency
- Access to guidelines on Specialist Palliative Care webpages
- Compassion in conversations
- Band 5 transition/preceptorship training.
- E-Elca modules –https://www.e-lfh.org.uk/end-life-care-e-learning-e-elca/
- Medical undergraduate and postgraduate teaching sessions for all grades.

• OT/PHYSIO sessions being co-ordinated by oncology senior therapists

TIER THREE CORE STANDARDS FOR EOLC

Currently less formally co-ordinated but role based and as agreed with line manager.

- EOL care champions will undertake 3 whole day meetings annually including topics to tier three level.
- SPC symptom control days quarterly within the trust.
- E-Elca modules https://www.e-lfh.org.uk/end-life-care-e-learning-e-elca/
- Agreed higher training programmes e.g. advanced communication skills/Masters programme

HOW WILL WE KNOW IT IS WORKING?

Completion of training and staff attendance is only a number. The nature of EOLC makes many aspects hard to measure and we know that it will be a very individual experience for every individual/those important to them and the staff supporting them.

We do regularly review:

National Audit of Care at End of Life – participating in this for national benchmarking.

Incidents/Concerns/Complaints – looking for themes/ensuring learning is shared and monitoring for recurrence of any issues highlighted with hope that where learning is shared, the same issues do not occur with the same frequency.

User feedback – regularly seek feedback from families and disseminate to staff. Address issues where they are highlighted.

Staff feedback – qualitative reviews with staff to understand their confidence and also their experience in caring for patients.

Nursing Assessment and Accreditation System – trust wide project and end of life care is a domain within this.