

## **Community Pharmacy Academy - End of Life Care**

### **Introduction**

*“You matter because you are you, and you matter to the end of your life”*

Dame Cicely Saunders (1918 - 2005)

In England, approximately half a million people die each year. The number is expected to rise by 17% from 2012 to 2030. Approximately three quarters of deaths are expected, so there is potential to improve the experience of care in the last year and months of life for at least 355,000 new people, and those close to them, each year. High quality generalist end of life care is required for all these people, and can be delivered by non-specialist health and care staff as part of their core work, provided they have adequate time, education and training, and support, to do so <sup>(1)</sup>.

As community pharmacists and support staff, there is a role to play in palliative and end of life care. Patients and more often their families and carers are likely to visit you on a regular basis to have prescriptions dispensed. This may be as analgesic requirements change, as symptoms are managed, to the dispensing of Just In Case Drugs, and the disposal of these following a patient's death. At any point in this journey, you may need to provide support and advice, refer to specialist services or just be a friendly place for a chat. The community pharmacy academy for end of life care is designed to provide you with the tools to enable you to do this confidently, and support other colleagues with what can be a complex and emotionally challenging task.

The Community Pharmacy Academy is delivered over 3 sessions, detailed below. It can be used as Continuing Professional Development, towards the Outcomes for End of Life Care (NHS Health Education Yorkshire and the Humber) (to be confirmed), or towards a RPSGB Faculty portfolio.

## **Aims & Objectives:**

Sessions will run one evening every 3 weeks, with a light buffet provided from 6pm, with teaching running from 6.30-9pm.

### **Session 1**

#### **Sensitive Communication**

Aims:

- To encourage attendees to discuss and debate how “difficult conversations” may be managed in a sensitive and appropriate manner
- At the end of the session the attendees will be able to demonstrate the art of sensitive communication
- For students to feel comfortable and confident when broaching difficult or sensitive conversations.

Objectives:

- To update and refresh existing communication skills.
- To consider alternative approaches to sensitive communication dependent upon the situation

#### **Loss, Grief and bereavement:**

Aims:

- To understand how grief can be normalised
- To have an awareness of local bereavement services
- To be able to discuss how to recognise trauma and phobias
- To understand the concept of pre-bereavement support
- To be able to discuss what you would look for in bereavement
- To have an understanding of the fears of dying patients
- To appreciate the importance of looking after yourself

Objectives:

- At the end of the session you will demonstrate an understanding of the theories of loss, grief and bereavement and how you may manage this.

## **Session 2**

### **The management of Advanced Pain:**

Aims:

- What is pain?
- Assessment and review of pain in palliative care
- Consider the causes of advanced cancer pain
- Pharmacological management of pain

Objective:

- At the end of the session you will demonstrate an understanding of the principles of pain assessment and the rationale for prescribing

### **Non-Malignant Palliative Care**

Aims / Objectives:

- To understand which diseases are classed as non- malignant conditions
- To have an awareness of how to predict disease progression
- To be able to discuss related symptoms
- To consider inequalities in access to care for patients with non-malignant conditions
- To have an awareness of how to predict end stage disease

## **Session 3**

### **Advanced Care Planning:**

Aims:

- Via critical reflection of a case study we will explore the use of end of life care tools
- Promote the importance and use of advanced care planning

Objectives:

- At the end of the session the student will demonstrate an understanding of advanced care planning and best practice in end of life care

## **Just in Case Drugs/ Symptom Management (including dyspnoea):**

Aims / To understand the causes treatment of nausea and vomiting, including non-pharmacological management

- To understand restlessness and agitation, and its treatment
- To understand what anticipatory prescribing is
- To be able to identify and discuss the 4 key just in case drugs used in the community
- To have an awareness of local policies and procedures related to the anticipatory prescribing.

Objectives:

- For the student to be able to demonstrate an understanding about the complexities of nausea and vomiting and its management
- Recognise the possible causes of agitation and restlessness
- Identify good practice in the management of agitation and restlessness

## **Dyspnoea:**

Aims / Objectives:

By the end of the session the student should be able to:

- Understand the pathophysiology of dyspnoea in palliative care
- Understand the assessment process
- Treat the likely causes appropriately
- Identify good practice in the management of dyspnoea
- Recognise the impact of dyspnoea upon patient's well being



## **Royal Pharmaceutical Society Faculty**

A professional recognition programme designed to help you to identify what you need to know and do at different levels of practice. There is a repository of curricula that can support access to relevant knowledge to develop skills and experience and help demonstrate how to deliver complex care across all sectors.

The RPS Faculty is based on the Advanced Pharmacy Framework (APF), a developmental framework that helps:

- Identify where you are in your development or career
- Identify your strengths and weaknesses
- Gaps in your skills and knowledge

Once you have access to the Faculty tools the first step will be to read through the Advanced Pharmacy Framework (APF) together with the other framework(s) provided on the RPS website, and, using the Advanced Practice Portfolio (APP) to begin compile evidence against each of the competency clusters of which there are six:

- Expert Professional Practice
- Building Working Relationships
- Leadership
- Management
- Education, Training and Development
- Research and Evaluation

Your portfolio could include details of courses and training that you have undertaken (including on the job training and coaching), professional development activities (including reading, attending meetings, conferences and events), case studies, feedback from managers, colleagues and service users (including patients), self-assessments, continuing professional development (CPD) records, etc.

Where you have identified gaps in your knowledge, skills, experience and behaviours, the Faculty curricula can be used to create a professional development plan. The curricula can be tailored to your area of practice, whether generalist or specialist, and will define what knowledge, skills and experience you need to develop and advance your practice and will help you identify resources and training to help you develop your practice.

### **References**

NHS England (Nov 2014) *Actions for End of Life Care*.

<http://www.england.nhs.uk/wp-content/uploads/2014/11/actions-eolc.pdf> (Accessed Sept 2015)

Royal Pharmaceutical Society. <http://www.rpharms.com/faculty-faqs/resources-faqs.asp#cpd> (accessed Sept 2015)

NHS Health Education Yorkshire and the Humber *Learning Outcomes for End of Life Care* (to be confirmed)