

Standard 11: End of Life Care

Patients and their families / carers are supported effectively during End of Life Care



11.1.	Element: Safe and effective patient care	Process Evidence (CCAAT available as an appendix)	Evidence Compliant	Comments	Mapped to:
11.1.1	Patients who are dying are identified and documentation reflects MDT decision that the person is in the last days of life	Review: <ul style="list-style-type: none"> CCAAT sections: 3.3-3.4, 4.14-4.17, 4.31, 6.3, 7.1 -7.2, 14.1-14.3 Documentation reflects ongoing end of life care/dying discussions with patients/relatives/friends. Discussion: <ul style="list-style-type: none"> Ask staff how to access Guidance at End of Life (GAEL) for Health Care professionals Ask staff to share clinical indicators or signs and symptoms which may be indicative of dying 			Scottish Government 2014 Statement Caring for people in the last days and hours of life: Guidance Health Care Improvement Scotland Care of Older People in Hospital Standard 4 NMC – The Code
11.2	Element: Enhancing the patients' experience of care	Process Evidence (CCAAT available as an appendix)	Evidence Compliant	Comments	Mapped to:
11.2.1	Patients who are dying have care planned in line with NHSGGC Guidance At End of Life (GAEL). Documentation reflects regular review of the dying person's condition, symptom management, wishes and needs.	Review: <ul style="list-style-type: none"> Documentation reflects an individualised plan of care including: <ol style="list-style-type: none"> Patients wishes preferences including place of care and place of death Ceilings of treatment plans DNACPR decision making Discontinuing unnecessary medical, nursing and drug interventions Nutrition and hydration at end of life Symptom management Review medicine prescription form : <ol style="list-style-type: none"> non essential medications discontinued anticipatory medications prescribed CCAAT sections: 1.8, 3.3, 4.15 - 4.17, 4.31, 6.3 -6.6, section 7, section 14 Discussion: <ul style="list-style-type: none"> Ask staff how to access Rapid Discharge Guidance for patients in last days of life 			Scottish Government DNACPR Policy Health Care Improvement Scotland Care of Older People in Hospital Standard 4 Care of dying adults in the last days of life NICE guideline [NG31] Enriching & Improving Experience – Palliative and End of Life Care – See Domains 4 & 5

11.2.2	<p>Staff communicate with patients/relatives/friends in relation to patient wishes; religious and spiritual care needs, preferred place of care and death, comfort and symptom management, discontinuing unnecessary interventions, nutrition and hydration at end of life.</p> <p>Relatives are given ‘What Can happen when someone is dying’: information for relatives or friends booklet</p>	<p>Review:</p> <ul style="list-style-type: none"> • CCAAT sections: 1.3- 1.4, 1.8, 2.1 - 2.2, 3.3, 4.15- 4.16, 4.17, section 14 <p>Discussion:</p> <ul style="list-style-type: none"> • Ask patients, relatives and friends if they feel their wellbeing (including spiritual) is considered and that they feel involved/ comfortable with the level of information available to them • Ask staff to identify what information/facilities available for relatives/friends when someone is dying • Ask staff if the booklets are given to relatives/friends. 			Glasgow Royal Infirmary Compassionate car parking pass
11.2.3	Staff know of end of life care resources and guidelines.	<p>Review:</p> <ul style="list-style-type: none"> • CCAAT sections: 14.1 - 14.3 <p>Discussion:</p> <ul style="list-style-type: none"> • Ask staff if they can identify and access: <ol style="list-style-type: none"> 1. Palliative care resource folder 2. Scottish Palliative care Guidelines 			
11.3	Element: Leading, managing and developing the performance of the team	Process Evidence (CCAAT available as an appendix)	Evidence Compliant	Comments	Mapped to
11.3.1	Staff know how to refer to hospital palliative care team and spiritual care team.	<p>Review:</p> <ul style="list-style-type: none"> • CCAAT sections: 14.1 - 14.3 <p>Discussion:</p> <ul style="list-style-type: none"> • Ask staff if they can identify how to contact and refer to: <ol style="list-style-type: none"> 1. Hospital palliative care team 2. Spiritual Care team 			Spiritual Care Policies
11.3.2	Staff know and engage in palliative and end of life care education.	<p>Review:</p> <ul style="list-style-type: none"> • CCAAT section: 14 • Review staff training records for evidence of attendance at education events and completion of Learn pro e-modules 053 and 099 <p>Discussion:</p> <ul style="list-style-type: none"> • Ask staff if they can identify how to access the palliative care education calendar via Palliative care resource folder on Staffnet 			Enriching & Improving Experience – Palliative and End of Life Care – See Domains 4 & 5
11.4	Element: Contributing to the organisation’s objectives	Process Evidence (CCAAT available as an appendix)	Evidence Compliant	Comments	Mapped to

<p>11.4.1</p>	<p>Staff undertake confirmation of death and last offices in line with organisational policies. Relatives/carers receive personal belongings of the deceased in a sensitive manner using the NHSGGC bereavement bags. Relatives are given:</p> <ol style="list-style-type: none"> 1. 'When someone has died - information for you' booklet. 2. 'What to do after a Death in Scotland' Blue Booklet 	<p>Review:</p> <ul style="list-style-type: none"> • CCAAT section 14 <p>Discussion:</p> <ul style="list-style-type: none"> • Ask staff if they can identify and access the: Adult Death in Hospital, Last Offices and Bereavement policies • Ask staff if the booklets are given to relatives/friends • Ask staff if bereavement bags are given to relatives/friends 			<p>NHSGGC Bereavement Policies, Procedures & Guidelines</p> <p>National Bereavement Standards</p> <p>NHSGGC Public Health Resources Directory</p> <p>Medical Certification of Cause of Death(MCCD) Information</p>
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