

## Day 3 Psychosocial care, spirituality & bereavement



Principles & Practice of End of Life Care  
Non registered Practitioners - 2019  
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### Aim of day

- Explore the holistic approach to assessment & care planning to identify psychological, social, spiritual & bereavement needs of patients/families & carers & consider the impact this can have.

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### Learning outcomes

- Discuss meaning of holistic approach to assessment & care.
- Identify common reactions to loss & grief
- Increase awareness in contemporary bereavement theory
- Examine role of healthcare worker in supporting patients & families psychological, social, spiritual & bereavement needs & when to refer
- Appreciate impact of working with loss, death & grief



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### What is holistic assessment & who delivers it in end of life care?

#### Draw a spider diagram

- With the patient in the centre, consider the impact of facing death for the patient & the family.
- Identify the different aspects of care needed & who may be involved in delivering this care.



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### Holistic Assessment

- As well as focusing on physical concerns, equal emphasis must be made to ensure that psychological, social & spiritual needs are effectively met.



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### What does NICE have to say?

#### End of life care for adults. Quality Standard 13

*(NICE 2011 last updated 2017)*

- Quality statement 4: Holistic support – physical and psychological
- Quality statement 5: Holistic support – social, practical and emotional
- Quality statement 6: Holistic support – spiritual and religious
- Quality statement 7: Holistic support – families and carers

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## Psychological distress

- Psychological distress is common in advanced disease & can impact on patient & whole family system
- Patients have their own inner strengths and help of family & friends for support

### However

- Some patients need additional professional intervention due to the nature & level of distress
- Psychological symptoms are often not identified & patients may not have sufficient access to psychological support services

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## What should we be doing?

### When there is evidence of general emotional distress (Level 1)

- All staff responsible for patient care have a responsibility to assess & meet general emotional care needs.
- Staff must be able to recognise psychological distress & the awareness & competence to avoid causing psychological harm.
- Staff must engage with respect, dignity, kindness, communicate honestly & establish & maintain a support relationship.
- Communicate information effectively
- Recognise boundary of own competence & refer as appropriate (NICE 2004)

You will be exploring a group activity around this later today.

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## Tools to help assessment of needs

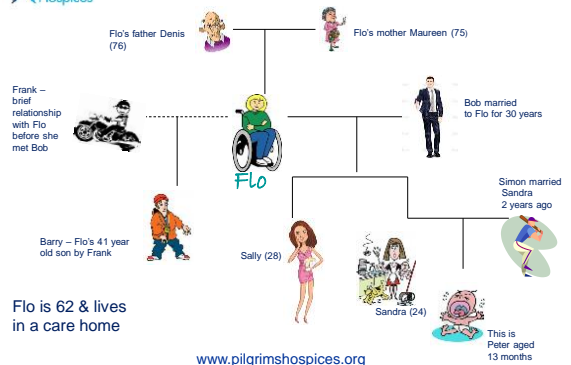
### Genogram

- A graphic representation of a family & their relationships
- Helps determine social network surrounding a person



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## Introducing you to Flo's genogram



Flo is 62 & lives in a care home

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"How people die remains in the memory of those who live on"



Dame Cicely Saunders

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## References & useful resources

- Dying Matters - check out their leaflets <http://www.dyingmatters.org/>
- Holistic Common Assessment (NEoLCP 2010) <http://webarchive.nationalarchives.gov.uk/20160805140434/http://www.nhs.uk/resource-search/publications/eolc-hca-guide.aspx>
- National Institute for Health & Care Excellence (NICE) 2011 (updated 2017). End of life care for adults. Quality standard [QS13] <https://www.nice.org.uk/guidance/qs13>

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