

Guidance for Medical Students on the Palliative Care Programme

The St Luke's Integrated Palliative Care Service

- Derriford Hospital Palliative Care Team
- Hospice In-patient unit
- Hospital Outpatients (Derriford)
- Pain Clinic (Hospice)
- Community Specialist Palliative Care Team (Brooklands)
- St Luke's crisis team.
- Bereavement Service
- Education and Research
- Volunteers
- Fund Raising

We operate out of three sites: -

1. Level 8, (just outside Brent ward), Derriford Hospital, Plymouth PL6 8DH
Telephone No. 01752 436744 (admin team)
 - St Luke's at Derriford
2. Units 3-5 Brooklands, Budshead Road, Crownhill, Plymouth PL6 5XR
Telephone No. 01752 964250 (Education) 01752 964200 (community team)
 - St Luke's at home
3. St Luke's Hospice, Stamford Road, Turnchapel, Plymouth PL9 9XA
Telephone No. 01752 401172 (Reception)
 - St Luke's at Turnchapel

If you require directions, please contact the medical secretaries at any of the three sites. (Contact information for the medical secretaries is given on the attached sheet.)

Palliative Care Programme

The Palliative Care Pathway consists of 2 weeks, which can occur in either order:

- **Hospice week**
- **Hospital/community week**

1st Monday Morning of the pathway

The first Monday of the 2 pathways will entail an introduction to St Luke's Hospice Plymouth and to palliative care in general.

We are aware that this field can be difficult for some people that have had their own personal experience of a life limiting illness or bereavement. We would not necessarily know your individual circumstances but would encourage you to inform us if you feel that this is the case so that we can be as supportive of you as we can.

Last Thursday of the pathway

At the second pathway you will get your professional judgement forms completed. We would appreciate some feedback in regard to the pathway as well at this point via a short survey.

Seeing Patients at Derriford and St Luke's Hospice

Palliative Care patients are often very frail and it can sometimes be difficult for us to find patients at the hospice who are well enough for you to see on your own for long assessments. However, we will try to arrange a patient with whom you can review and present for your clinical feedback sessions. In the hospital/community week you may be able to use your experience seeing the community patient, we are very aware that this would be a different type of feedback compared to a hospital based patient, feel free to discuss this with us if needed.

NB It is advised that you should check with the ward staff (at Derriford and St Luke's) before going to see a patient.

There are sessions allocated for ward work on the timetable in both weeks.

We would encourage you to:

- See patients for your feedback sessions
- Join ward rounds
- Observe doctors clerking in and assessing patients.
- Attend any suitable educational events, which occur here during your time with us.
- In addition, at St Luke's Hospice you can observe a drug round, observe the setting up of a syringe driver, and follow the process of death certification.

Please return patient's notes to the appropriate place (e.g. notes trolley) after use so other members of staff can easily access them.

Seeing Patients in the community

You will have the opportunity to see patients and carers in their own homes. This should be in the company of a member of the St Luke's multidisciplinary team (nurse, doctor, social worker, allied health professional etc.). Any information you collect and record must be treated with strict confidentiality and kept in a secure place. We would not normally recommend returning to see a patient again alone however if this is required please discuss with a member of the medical or nursing team in advance of the repeat visit.

Dress Code

Clothing should be smart but casual, clean and tidy, please ensure patients feel comfortable and respected by your choice of attire.

Feedback sessions (see guide to clerking palliative care patients)

NB 11-1pm unless informed on the preceding Wednesday

We understand that you will not always be able to take a full standard history or clinical examination from the patient, especially if the patient is at home frail or limited capacity, however we would encourage an appropriate clinical examination in most cases. It is always possible to make a general “end of the bed” assessment of the patients’ physical conditions (for example any jaundice, anaemia, and visible shortness of breath) and acknowledgement of this in your presentation will be sought. We would encourage you to read the patient’s notes carefully if able to before you see the patient so you are fully aware of any areas of sensitivity.

In the feedback session we are interested in your holistic assessment of the patient starting with the physical symptoms, you should also cover psychological, social and spiritual issues.

Writing a patient problem list is a very helpful way of assessing our patients. Please feel free to talk through a patient’s problems with the nurse or doctor after seeing the patient. Gathering basic information about the results of recent investigations, the extent of disease and the sequence of events prior to admission or referral to the Community team is recommended. We are aware that it is not always possible to get detailed information from the patients themselves so if the opportunity arises, talk to the relatives.

When giving your case presentation in the Feedback Session please note:-

1. The summarising statement needs to state the reason for referral to palliative care.
2. The differential diagnosis should address the causes of the presenting symptoms on this admission or on referral to the Palliative Care Service.
3. Patient centred issues are very important in Palliative Care. Try to understand social issues, future care, and discharge issues if appropriate.
4. You should be aware of the medication being taken by the patient and why they are on the medication.
5. Observation of the patient’s general condition and functional status are expected. Physical examination is appropriate but may need adapting to minimise patient discomfort.
6. A problem list is helpful in developing a treatment plan.
7. There is often uncertainty when discussing prognosis, patient management and patient understanding. In Palliative Care the situation can change rapidly- these patients are often unstable. Revisit and reassess patient if time allows.

Self directed learning opportunities

Library facilities

- **Derriford Hospital**

The main library is on the 5th floor of the South West Cardiothoracic Centre.

- **St Luke's Hospice**

The volunteer Librarian, Pat Irving is available on Mondays 10.00 – 15.00.

Paula Hine is in charge of educational resources and would be happy to help you access any information you need about palliative care – now based at Brooklands – telephone 01752 964250.

Other opportunities

- Students may be invited to attend other activities in any relevant discipline as opportunities arise.
- Your time at the Hospice may provide you with a unique opportunity to experience the practicalities surrounding a patient's death e.g. certifying a patient's death, filling in a Death Certificate or cremation form. If you would like to take advantage of these opportunities, please let the doctor in charge of the unit know.

Self directed learning opportunities

There are plenty of SDL learning opportunities provided.

- **St Luke's Hospice resource page**

This is a good resource for medical students providing e-learning opportunities and information for the pathways

- **pallied.com**

www.pallied.com is a website that was designed specifically for medical undergraduate students in the UK. It has clinical cases that you can work through as well as links to other useful reference websites.

- **e-LFH**

'E-learning for health' is a resource from NHS England . Access is via the information sheet provided.