

Academic Unit of Palliative Care

Annual Report 2018/19



WORKING IN PARTNERSHIP WITH THE UNIVERSITY OF LEEDS



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Foreword

I am delighted to present this annual report from the Academic Unit of Palliative Care. We have expanded our research team with external grant income from European Union Horizon 2020 Funding and a Marie Curie Academic Research Fellowship. Our university based research team now comprises 10 externally funded staff: an Associate Professor, 4 senior research fellows, 4 research fellows and a research pharmacist. Working with the hospice-based research nurses, we remain a leading UK centre for recruitment to the National Institute for Health Research (NIHR) portfolio studies.

Under Trish Stockton's leadership, we continue to deliver our educational portfolio with rising demand from local and regional clinical professionals. We have been working closely with the University of Leeds to develop an ambitious academic strategy for the Academic Unit which particularly focuses on expanding our influence in research and teaching.

Our Evidence Based Practice is growing under Catherine Malia's leadership, enabling our practice enquiry programme to grow and for patient reported outcome measures to be captured and reported in much more detail; this has an important effect on improving clinical care which has always been the focus of our academic unit.



Mike Bennett
St Gemma's Professor of Palliative Medicine



Introduction

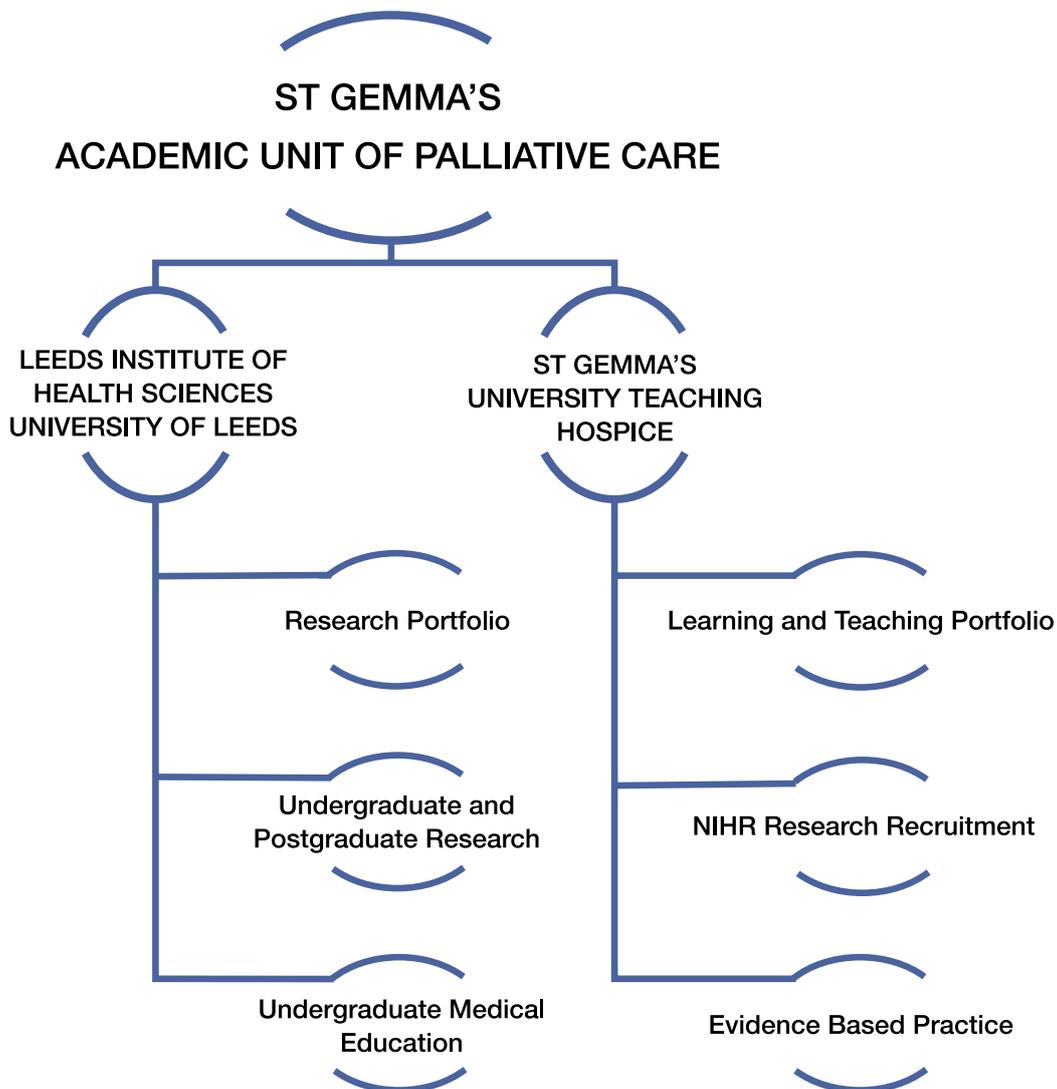
Academic Unit of Palliative Care Mission Statement

The Academic Unit of Palliative Care aims to be recognised internationally as an outstanding model for improving care of those approaching the end of life through integrated research, teaching and clinical practice. Our work is guided by our values:

- Respect and value patients, carers, staff and all those we work with
- Innovate and integrate with local clinical practice
- Inspire and support continual development and sharing of knowledge
- Build capacity to ensure a sustainable academic unit
- Be responsible and accountable for the standard of our work

Academic Unit of Palliative Care Structure

We link academic and clinical partners and are physically located on two sites: the Leeds Institute of Health Sciences, University of Leeds and St Gemma's University Teaching Hospice. This underpins our commitment to integrated clinical academic practice.



The Faculty of Medicine at University of Leeds has chosen our research to be an impact case study for the forthcoming Research Excellence Framework exercise in 2020. This national assessment of the research from all UK universities identifies internationally excellent and world leading research. Our research over many years on the assessment and classification of cancer related pain, the effectiveness and access to analgesia and importance of supported self-management has directly impacted policy on cancer pain management internationally within the World Health Organisation, Europe, USA and UK. Leeds research has also influenced international healthcare professionals in relation to their assessment and management of cancer pain. For patients, this is likely to lead to more tailored treatments, more informed prescribing and better support for self-management.

Academic Unit Research Programme April 2017 – March 2018

New grant income during this period:

INADVANCE: European Horizon 2020 funding - £3,584,069 (2019 to 2022)

Patients with non-cancer diseases, particularly Chronic Obstructive Pulmonary Disease (COPD), will be at the heart of this is EU Horizon 2020 funded programme that will examine and evaluate more timely integration of palliative care. Six other European centres are linked with Leeds who together will explore patient and carer needs, then design and test interventions to support these needs within a randomised controlled trial. The AUPC is leading the intervention development across the

European sites in conjunction with colleagues at the School of Computing who will be analysing digital health care records and textual data using Artificial Intelligence.

Extending reach of digital technologies to advance palliative cancer care delivery in low and middle-income settings. Research England GCRF £98,740 (2019-2020). M Allsop, B Ebenso, MI Bennett, T Ensor, R Harding, K Nkhoma

This collaborative grant builds on a previous MRC funded project to explore digital technologies in Uganda, Nigeria and Zimbabwe, and is led by AUPC University Academic Fellow, Dr Matthew Allsop. The results will inform development of interventions to support palliative care delivery across sub-Saharan Africa.

Research projects:

- **IMPACCT** (Improving Management of Pain from Advanced Cancer in the Community): programme grant – Primary data analysed and disseminated.
- **PIPs** (Prognosis in Palliative Care): recruitment completed end of April 2018.
- **StOIC**: this observational study at St Gemma's and Wheatfields continued until March 2019 to investigate whether adherence to a protocol involving peripheral opioid antagonists improves the treatment of constipation.
- **Leeds Cancer Pain Assessment Study**: commenced in May 2018 at St Gemma's Hospice and August 2018 at Wheatfields with the aim to develop a safe and cost effective test to identify neuropathic pain. This study continued at St Gemma's and Wheatfields', and a collaboration with centres in Germany, Italy and Scotland to widen the study is in process.
- **MePFAC** study: Methylphenidate: this multicentre randomised clinical trial began in July 2018 and investigates whether methylphenidate is effective for treating fatigue. St Gemma's UTH was one of 3 pilot sites.

- Access to Medicines at End of Life **ACTMED** [AUPC programme grant] began in March 2019. We are recruiting patients and health care professionals to improve access to medicines for symptoms of advanced disease for community patients.
- Supporting Timely Engagement with Palliative care – **STEP** [AUPC programme grant] Recruiting patients and HCPs to improve access to and transition to palliative care services.
- **NACASY** – an observational ‘real world’ study of a treatment for opioid induced constipation began in March 2019

Publications:

The following papers were published in peer reviewed journals:

1. Allsop MJ, Wright-Hughes A, Black K, Hartley S, Fletcher M, Ziegler LE, Bewick BM, Meads D, Hughes ND, Closs SJ, Hulme C, Taylor S, Flemming K, Hackett J, O’Dwyer J, Brown JM, [Bennett MI](#). Improving the management of pain from advanced cancer in the community: study protocol for a pragmatic multi-centre randomised controlled trial. **BMJ Open** 2018;8:e021965.
2. Ziegler L, [Bennett MI](#), Mulvey MR, Hamilton T, Blenkinsopp A. Characterising the growth in palliative care prescribing 2011-2015; analysis of national medical and non-medical activity. **Palliative Medicine** 2018;32(4):767-774
3. Crowther G, Brennan C, [Bennett MI](#). The Barriers and Facilitators for Recognising Distress in People with Severe Dementia on General Hospital Wards. **Age and Ageing** 2018;47(3):458-465
4. Jordan RI, Mulvey MR, [Bennett MI](#). A critical appraisal of gabapentinoids for pain in cancer patients. **Current Opinion in Supportive and Palliative Care** 2018;12(2):108–117.
5. Hackett J, Bekker H, [Bennett MI](#), Carder P, Gallagher J, Henry C, Kite S, Taylor S, Velikova G, Ziegler L. Developing a complex intervention to support timely engagement with palliative care for patients with advanced cancer in primary and secondary care in the UK: a study protocol. **BMJ Open** 2018; 8(5): e022835.
6. Edwards Z, Blenkinsopp A, Ziegler L, [Bennett MI](#). How do patients with cancer pain view community pharmacy services? An interview study. **Health and Social Care in the Community** 2018; 26:507–518.
7. Corli O, Roberto A, [Bennett MI](#), Galli F, Corsi N, Rulli E, Antonione R. Non-responsiveness and susceptibility of opioids side effects related to cancer patients’ clinical characteristics: a post-hoc analysis. **Pain Practice** 2018;18(6):748–757
8. Craigs C, West R, Hurlow A, Carder P, [Bennett MI](#), Ziegler LE. Access to palliative care for patients with advanced cancer: A longitudinal population analysis. **PLoS ONE** 2018;13(8):e0200071
9. Allsop MJ, Ziegler LE, Mulvey MR, Taylor R, Russell S, [Bennett MI](#). Duration and determinants of hospice-based specialist palliative care for patients in the UK. A national retrospective cohort study. **Palliative Medicine** 2018;32(8):1322–1333
10. Craigs C, [Bennett MI](#), Hurlow A, West R, Ziegler LE. Older age is associated with less cancer treatment: A longitudinal study of English cancer patients. **Age and Ageing** 2018;47(6):833-840
11. Hjermstad M, Aass N, Aielli F, [Bennett MI](#), Brunelli C, Caraceni A, Cavanna L, Fassbender K, Feio M, Haugen DF, Jakobsen G, Laird B, Lohre ET, Martinez M, Nabal M, Pardon K, Pigni A, Piva L, Porta-Sales J, Rizzi F, Rondini E, Sjogren P, Strasser F, Turriziani A, Kaasa S. Characteristics of the case mix, organisation and delivery in cancer palliative care: a challenge for good-quality research. **BMJ Supportive and Palliative Care** 2018;8:456–467
12. Hackett J, Ziegler L, Godfrey M, Foy R, [Bennett MI](#). Primary palliative care team perspectives on coordinating and managing people with advanced cancer in the community: a qualitative study. **BMC Family Practice** 2018; 19:177
13. Schmidt-Hansen M, [Bennett MI](#), Arnold S, Bromham N, Hilgart JS. Efficacy, tolerability and acceptability of oxycodone for cancer-related pain in adults: an updated Cochrane systematic review. **BMJ Support Palliative Care** 2018;8(2):117-128
14. Neoh K, Gray R, Grant-Casey J, Estcourt I, Malia C, Boland J W, [Bennett MI](#). National comparative audit of red blood cell transfusion practice in hospices: recommendations for palliative care practice. **Palliative Medicine**, September 2018: p1-7
15. Hjermstad M, Aass N, Aielli F, [Bennett MI](#), Brunelli C, Caraceni A, Cavanna L, Fassbender K, Feio M, Haugen DF, Jakobsen G, Laird B, Lohre ET, Martinez M, Nabal M, Pardon K, Pigni A, Piva L, Porta-Sales J, Rizzi F, Rondini E, Sjogren P, Strasser F, Turriziani A, Kaasa S. Characteristics of the case mix, organisation and delivery in cancer palliative care: a challenge for good-quality research. **BMJ Supportive and Palliative Care** 2018;8:456–467

16. Hackett J, Ziegler L, Godfrey M, Foy R, [Bennett MI](#). Primary palliative care team perspectives on coordinating and managing people with advanced cancer in the community: a qualitative study. **BMC Family Practice** 2018; 19:177
17. Schmidt-Hansen M, [Bennett MI](#), Arnold S, Bromham N, Hilgart JS. Efficacy, tolerability and acceptability of oxycodone for cancer-related pain in adults: an updated Cochrane systematic review. **BMJ Support Palliative Care** 2018;8(2):117-128
18. El Mokhallalati Y, Mulvey MR, [Bennett MI](#). Interventions to support self-management in cancer pain. **Pain Reports** 2018;3(6):e690
19. Neoh K, Gray R, Grant-Casey J, Estcourt L, Malia C, Boland J, [Bennett MI](#). National Comparative Audit of Red Blood Cell Transfusion Practice in Hospices: Recommendations for Palliative Care Practice. **Palliative Medicine** 2019;33(1):102-108
20. Treede RW, Rief W, Barke A, Aziz Q, [Bennett MI](#), Benoliel R, Cohen M, Evers S, Finnerup NB, First MB, Giamberardino MA, Kaasa S, Korwisi B, Kosek E, Lavand'homme P, Nicholas M, Perrot S, Scholz J, Schug S, Smith BH, Svensson P, Vlaeyen JW, Wang SJ. Chronic Pain as a symptom and a disease: The IASP Classification of Chronic Pain for the International Classification of Diseases ICD-11. **PAIN** 2019;160(1):19-27
21. [Bennett MI](#), Kaasa S, Barke A, Korwisi B, Rief W, Treede RD, and the ICD-11 task force. The IASP classification of chronic pain: Chronic cancer-related pain. **PAIN** 2019;160(1):38-44
22. Scholz J, Finnerup NB, Attal N, Aziz Q, Baron R, [Bennett MI](#), Benoliel R, Cohen M, Cruccu G, Davis K, Evers S, First M, Giamberardino MA, Hansson P, Kaasa S, Korwisi B, Kosek E, Lavand'homme P, Nicholas M, Nurmikko T, Perrot S, Raja SN, Rice ASC, Rowbotham MC, Schug S, Simpson DM, Smith BH, Svensson P, Vlaeyen JW, Wang SJ, Barke A, Rief W, Treede RD. The IASP classification of chronic pain for ICD-11: Chronic neuropathic pain. **PAIN** 2019;160(1):53-59.
23. Habberstad R, Hjermsstad MJ, Brunelli C, Kaasa S, [Bennett MI](#), Pardon K, Klepstad P. Which factors can aid clinicians to identify a risk of pain during the following month in patients with bone metastases? A longitudinal analyses. **Supportive Care in Cancer** 2019; 27(4):1335-1343
24. [Bennett MI](#), Eisenberg E, Ahmedzai SH, Bhaskar A, O'Brien T, Mercadante S, Škvarč NK, Vissers K, Wirz S, Wells C, Morlion B. Standards for the management of cancer-related pain across Europe. A position paper from the EFIC Task Force on Cancer Pain. **European Journal of Pain** 2019;23:660–668.
25. Edwards H, Mulvey MR, [Bennett MI](#). Cancer-related neuropathic pain. **Cancers** 2019; 11:373
26. El Mokhallalati Y, Woodhouse N, Farragher T, [Bennett MI](#). Specialist palliative care support is associated with improved pain relief at home during last 3 months of life in patients with advanced disease: analysis of 5-year data from the national survey of bereaved people (VOICES). **BMC Medicine** 2019;17:50
27. Meads DM, O'Dwyer JL, Hulme CT, Lopez RR, [Bennett MI](#). The Cost-Effectiveness of Pain Management Strategies in Advanced Cancer. **International Journal of Technology Assessment in Health Care** 2019;35(2):141-149

An update on AUPC research was presented at the following:

- o IMPACCT Dissemination Event in Leeds on 20 September 2018
- o IMPACCT and Voices disseminated at Practice Enquiry
- o PIPS2 data disseminated at Practice Enquiry

Research from the AUPC was presented at the World Palliative Care Congress in Bern, Switzerland in May 2018. Three researchers have been selected for oral abstract presentation, from over 1100 abstracts submitted, and one has been ranked in the top 5 best abstracts for plenary presentation.

Learning and Teaching

We know that having a workforce with the right skills and knowledge, confidence and resilience are the fundamental elements in being able to deliver high quality care for dying people and their families regardless of where they are cared for. In response to this, the Learning and Teaching department continues to develop and deliver high quality education to staff internal and external to the Hospice, working collaboratively with different organisations and healthcare providers.

1. University Collaboration:

- **University of Leeds** delivery of the Patient Focus Palliative Care Module: This 10 credit degree module was attended by 31 pre-registration nursing students from the University of Leeds. The assessment is a written 2500 word assignment based on a case study.

“I would strongly recommend this module to other students. Our learning was well facilitated and support was provided during emotive discussions. I particularly enjoyed that this module was held at the Hospice and we could look around the Hospice. I enjoyed the amount of guest speakers. This module was very stimulating, never boring and always realistic and relevant to current practice.”

“I really appreciated that various people from different areas and disciplines came to speak to us and give us their ‘take’ on palliative care and this helped me think about my own approach to palliative care.”

- A CPD training session was delivered in collaboration with Leeds Institute of Medical Education, focussing on MBChB undergraduate assessment. Fourteen medical students attended on 24 October 2018.

University of Bradford - Peer Facilitator Dementia Training

St Gemma’s Hospice AUPC’s collaborative programme, developed with the School of Dementia Studies at the University of Bradford, facilitated Peer Dementia Care Training to 11 hospices in the Yorkshire and Humber region over 2 cohorts.

- Facilitators from five of the seven hospices from the Yorkshire and Humber region, who attended the Peer Facilitator Dementia Training at the beginning of the 2018-2019 cohort year, received a support visit to their organisation by one of the trainers during their delivery of the programme to their colleagues.
- A Community of Practice day took place on 1 October and was attended by peer facilitators from 7 of the original 11 hospices. The event was hosted at St Gemma’s Hospice AUPC. As well as colleagues in dementia care training from the University of Bradford, guest speakers included:
 - o Professor Murna Downs, Centre for Applied Dementia Studies, University of Bradford
 - o Wendy Mitchell – Expert by experience, Alzheimer’s Society Ambassador

The day had a positive outlook bringing lots of discussion and peer support. Feedback from individual hospices identified that the training was well received by their staff; foundation training brought rich discussions when there was a mix of staff and volunteers with both clinical and non-clinical backgrounds who could draw on both their professional and personal experiences. This highlighted that supporting people living

with dementia (who may be patients, family members or members of the public) through our hospice services was everybody's business from medical and nursing teams to hospitality and housekeeping staff, gardeners and receptionists.

Professor Murna Downs highlighted the need to recognise the complexities both medical and psychosocial for people living with advanced dementia. It is necessary to look at the whole person and understand how to apply the person-centred philosophy integral to palliative care to those who have difficulty in expressing their needs. She applauded the achievements of those attending in taking the training to their staff and in turn influencing practice within their individual hospices.

The main highlight of the day from the point of view of the attendees was hearing from Wendy Mitchell. *"Listening to Wendy speak of her experience of living with dementia has taught me more than anything else."* This brought home the value of involving 'experts by experience' in training programmes and developments to services.

Wendy Mitchell writes in her blog *'Which me am I today'* about her day at St Gemma's Hospice: <https://whichmeamitoday.wordpress.com/2018/10/02/a-day-at-st-gemmas-hospice-leeds/>

- St Gemma's Hospice was one of the hospices to have facilitators trained to deliver the programme which is now being rolled out to its staff:
 - o 27 clinical staff, non-clinical staff and volunteers have received foundation level training
 - o 15 clinical staff have completed the intermediate training in enhanced communication and end of life care.

Foundation Level:

"A very interesting and informative training session which I will take away and use in my role."

"Good to have one session with people from other departments to understand the challenges that they face and get a wide range of perspectives."

Intermediate Level:

"Course is extremely relevant to my practice with lots of relevant information. More tools for my 'tool box'."

Ethical Issues in Palliative and End of Life Care

This study day explores major ethical issues in palliative and end of life care with reference to key contemporary cases. During the day, discussions include the significance of death and the sanctity and value of life and ethical and legal debate concerning withdrawing and withholding life-prolonged treatment.

Dr Janet Holt, Senior Lecturer in the School of Healthcare, University of Leeds with extensive experience of teaching healthcare ethics and nursing philosophy delivered the study day on Friday, 22 June 2018. Fifteen healthcare professionals working with patients with palliative and end of life care needs attended.

"Lecturer very good, very engaging: interesting topics discussed: thoroughly enjoyed this study day."

2. Regional/Yorkshire and the Humber/National Professional Provision

Advanced Communication Skills Training (ACST)

This 2 day course aims to enhance senior health care professionals' ability to deal with difficult communication situations.

From April 2018 to March 2019, we delivered the programme to multi-disciplinary groups from Yorkshire and Humber Hospital Training Trusts, Leeds GPs and other Hospices from across the region. Fifty nine delegates attended during this period.

The analysis of the pre and post course questionnaires showed a highly significant increase in confidence for all 17 domains.

"Can I also just say that it was the best course I've been on for years and I've recommended it to lots of people!"

European Certificate in Essential Palliative Care (ECEPC)

This 8 week, distance learning, multi-professional programme, developed at Princess Alice Hospice is offered twice a year in the AUPC. Assessment includes submission of a portfolio, a written examination and a practical / oral assessment.

Our second and third cohorts of students completed their assessment days in June and November 2018. Twenty three candidates: nurses, doctors and therapists, including one doctor from Malta completed the certificate this year.

“A very rewarding course that helped me to deliver a person-centred and holistic care to our patients suffering from end of life conditions.”

Symptom Assessment and Management in Palliative Care Masterclasses

These popular masterclasses are delivered by our expert clinicians in palliative medicine and care including consultant in palliative medicine, nurse consultant and members of the multi-disciplinary Hospice team.

These days are particularly relevant for those who take a lead in palliative/end of life care and St Gemma's clinical staff.

- o Wednesday, 2 May 2018 – 30 delegates attended
- o Tuesday, 8 May 2018 – 27 delegates attended
- o Wednesday 27 March 2019 – 17 delegates attended

“Very good speakers, excellent knowledge: has enhanced my practice and refreshed some skills and knowledge.”

Yorkshire Regional Palliative Medicine Learning Group

The Yorkshire Regional Palliative Medicine Learning Group is attended by over 40 consultants, specialist trainees, doctors and senior nurses from across Yorkshire and the Humber.

During the year, 5 meetings were held. In May we held a showcase of Academic Palliative Care research. Professor Mike Bennett and other members of the AUPC team presented their research, Dr Jason Ward spoke about developments in medical education at Leeds Medical School. Staff from the Hull York Wolfson Centre and Sheffield Academic Unit also presented on the day. In February Dr Hannah Zacharias led a well attended General Medical Update day with speakers from across the region.

3. Leeds Citywide education

ECHO development

A small team of St Gemma's Hospice staff have received training through Hospice UK to allow St Gemma's Hospice to become an ECHO (Extension for Community Healthcare Outcomes) hub. This is a regional centre bringing a multidisciplinary team of palliative and end of life care specialists together to develop and deliver education programmes using video-conferencing.

ECHO programme for GP Practices

Twelve GP practices are registered with this programme to be delivered over ten months February - December 2019. Monthly sessions have been delivered at St. Gemma's (Hub), attended by the GP Practices (Spokes) via a zoom link. Several GPs and other healthcare professional may be present in a single GP Practice. The February session was attended by 9 practices with 27 participants; the March session was attended by 7 practices with 15 participants. Dr Jason Ward, Jane Chatterjee and Don Glass comprise the Hub team at St Gemma's and have also been joined by Hospice Clinical Nurse Specialists (CNSs), End of Life Community Leads, and Heart Failure CNSs to raise awareness of the programme.

Training on End of Life Care for People with Dementia

This study day explores international and national best practice guidelines and initiatives to support the end of life care needs of people living with dementia. It looks at the following

topics: the experience of living and dying with dementia; assessment of symptoms; end-of-life care and decision-making; family carer support and bereavement. The study day is aimed at healthcare professionals across a range of services working with people with dementia towards the end of their life. Interactive exercises, case studies and group discussions helped participants share experiences.

Twelve healthcare professionals working with patients with dementia and end of life care needs attended a training day on 12 October 2019.

“Very interesting and thought provoking day.”

Beacon Housing Services: supporting the homeless

Beacon Leeds is a Leeds citywide initiative that helps vulnerable homeless people with multiple and complex needs.

Bespoke end of life care training was delivered in January 2019 to support workers and their managers from Beacon Leeds. The day was aimed at supporting the participants to gain an understanding of palliative and end of life care in relation to the needs of their clients and consider some of the specific challenges they face. There was also emphasis on the practicalities of referral to palliative care services; helping them to consider who this would be appropriate for, and when, as well as the services available to offer this support.

Key areas included: what is palliative care? difficult conversations, palliative care support and what to expect when someone is dying.

“Much better and relevant than I expected. I have more knowledge and confidence in regards to palliative care and the process involved and how to handle sensitive issues – Facilitators were great.”

Palliative and End of Life Care communication skills training

This training for Leeds Community Healthcare (LCH) staff focuses on the skills needed to have conversations at the end of life.

- Advanced Communication Skills Training: LCH Senior Clinicians
 - o 10 May 2018 – 7 attended
 - o 9 October 2018 – 8 attended
 - o 26 March 2019 – 8 attended
- Communication Skills for LCH Registered Clinicians
 - o 7 June 2018 – 10 attended
 - o 11 September 2018 – 10 attended
 - o 13 November 2018 – 9 attended
 - o 12 March 2019 – 15 attended
- EoL Communication Skills for LCH Health Support Workers, Neighbourhood Clinical Assistants, Occupational Therapists and Care Home staff
 - o 11 December 2018 – 15 attended

Sharing in End of Life Care (SiELC) at St Gemma’s Hospice

Four senior nurses from Leeds Teaching Hospitals Trust (LTHT) attended a 5 day programme at St Gemma’s Hospice which included a combination of teaching and practice: 2 days in clinical practice and 3 classroom days to allow for reflection on practice and teaching on topics of their choice. Staff from the AUPC and our clinical team facilitated the programme. Two follow up half days were delivered, covering the following key areas:

- Becoming link nurses to support their staff to deliver end of life care
- Facilitate the giving of scheduled controlled drugs at the correct time intervals
- Increasing communication skills of staff and helping them understand the importance of taking time to explore what the patient and families understand
- Consider ways of increasing support and clinical supervision for staff
- More consideration to non-pharmacological management of symptoms e.g. offering a fan to aid the feeling of breathlessness.

Advanced Care Planning including Do not attempt Cardio-Pulmonary Resuscitation (DNACPR) for Leeds Community Healthcare (LCH) staff.

This training runs 3 times per year and aims to provide senior nursing staff working within Leeds Community Healthcare and St Gemma's Hospice with the necessary knowledge and skills to enable them to hold complex discussions with patients about their future wishes. After the training, staff are able to autonomously undertake Do Not Resuscitate discussions with patients and complete Do Not Resuscitate forms.

St Gemma's Hospice Community team continues to deliver training on Advanced Care Planning, Pain and Symptom Management to support GPs, Care Home and Hospice staff. They continue to hold regular Education Meetings with GPs.

The Community team delivered:

- o 12 teaching sessions
- o 183 Gold Standard Meetings
- o 11 reflection sessions
- o 27 Education meetings

4. Clinical Placements

Undergraduate Medicine at Leeds is 1st out of 18 in the Russell Group and 2nd out of 34 UK medical schools in this year's National Student Survey. We want to celebrate our ongoing partnership with the University of Leeds in their success. These results don't happen by chance – they are testament to the year round work of many individuals and teams, including St Gemma's Hospice. Student satisfaction is a function of the way we meet, greet, teach, assess, support and take care of our students so this is truly a whole school success.

Hospice Student Placements: April 2018 to March 2019

- o Medical students x 46
- o Physician Associates x 9
- o Elective Doctors x 13
- o Physio & Social Work students x 1
- o Elective placement Theology student x 1
- o Elective placement Speech and Language therapist x 1

- Nursing student placements:
 - o Pre-Registered:
 - In Patient Unit - 17
 - Community Team - 2
 - o Nurse Associate Trainees:
 - In Patient Unit – 12
 - Community Team – 9
 - o Elective:
 - Total – 7

Correspondence from the MBChB Programme Lead advised the following:

One of the year's Palliative Medicine Registrars on placement at St Gemma's Hospice, Dr Laura Deacon, has been awarded the Community Contribution Recognition Certificate from University of Leeds School of Medicine. This was in recognition of exemplary feedback from the medical students on her role in their learning at St Gemma's Hospice.

“We recognise that St Gemma's provides an excellent learning environment for students on placement and wanted to acknowledge the role that St Gemma's staff have in undergraduate medical placements.”

As a sample of the feedback the following two comments give an idea of the high standard throughout the year:

“Amazing! Had the best time at the hospice. Learnt so much about palliative care and medicine in such a short space of time. I was really inspired and hoping to potentially get a job in palliative medicine in my foundation years.”

“St Gemma's was the best experience I have had so far in my entire medical career. Everyone from the doctors, patients and other staff were extremely helpful and friendly. There is a real supportive atmosphere at the hospice that is in no way over-bearing. I learned so much and I am so grateful to every person I have met during my time at St Gemma's for helping me have such a wonderful experience.”

5. Conference presentations/ posters/publications

Association of Palliative Medicine's Annual Supportive and Palliative Care (ASP) Conference - Harrogate March 2019

Trish Stockton, Head of Learning and Teaching presented an oral session entitled the "Development of Teaching and Research in Palliative Care (the journey of developing an Academic Unit."

Dr Jason Ward's oral presentation "Does a one day hospice placement for medical students do more harm than good?" was delivered with Rayment and Hallam.

Dr Emily Frinton's "Deteriorating Patient" poster was displayed.

Association for the Study of Medical Education Annual Conference: Sustainability, Transformation and Innovation in Medical Education Glasgow 2019

"Future proofing clinical placements" (workshop) - Kirby, Ward, Brown

National Executive Clinical Leads in Hospice and Palliative Care Conference (ECLiHP): 22 June 2018.

Catherine Malia presented on the subject of "Sedation at the End of Life".

Healthcare Conferences UK: December 2018

Catherine Malia presented on "Non-medical Prescribing in End of Life Care."

Publication: Book Chapter

Chatterjee J and Downs M (2018) Person-Centered End-of-Life Care for Individuals Living with Dementia in the United Kingdom In: Rebecca S Allen, Brian D Carpenter, Morgan K. Eichorst (eds) *Perspectives on Behavioural in Palliative and End-of-Life Care: Disease, Social, and Cultural Contexts* London and New York: Routledge pp 58-88



6. Internal staff training

The Learning and Teaching department supports staff to develop within the Hospice by delivering a comprehensive internal training programme and approval of study leave.

Learning Management System (LMS)

Our LMS has 23 modules for all staff and Trustees.

IT Skills Pathway – offering PowerPoint and EXCEL training on e-learning to all staff

Face to face training included: Hospice and Clinical Inductions, Clinical Skills updates along with AED/CPR, Clinical Communications Training, Bereavement and Loss (Estates and Facilities Teams), Dementia Training to all staff and Volunteers, Strengthening Leadership Programme (delivered by Fathom for Senior Nursing Team), Dementia Care Training, Safe Handling and Moving (SHAM), Corneal Donation and Mentorship Updates.

Training was provided to Moors ward staff on Care at the End of Life. This included national guidance, symptom management and communication skills.

“I recognise that I am doing the ‘right’ thing now – reassured that my instincts are good and am in awe of my wonderful colleagues.”
(Bereavement and Loss training)

“Brilliant Induction and really got across what St Gemma’s is all about. I have learnt a lot and understood how the Hospice helps and changes people’s lives by helping patients and families with other information about the organisation.” (Hospice induction)

Implementation of HEEYH End of Life Care (EoLC) Learning Outcomes

The Health Education Yorkshire and Humber EoLC learning outcomes were introduced into clinical practice. By the end of the year, half the clinical workforce were actively using these outcomes, which provide a unified approach to the delivery of high quality palliative and end of life care. Progress included:

- Role Profiles – learning outcomes embedded into Band 3, 5, 6 and 7 nursing role profiles in the In-Patient Unit and Band 7 Advanced Nurse Practitioner
- Mapped to St Gemma’s training programme, E-elca and European Certificate in Palliative Care
- Incorporated into Clinical Induction
- Learning outcomes will be an integral part of the new appraisal system on the Learning Management System
- Currently being evaluated by Professor Vanessa Taylor.

Evidence-Based Practice

Evidence-based practice requires that healthcare decisions are based on the best availability, current, valid and relevant evidence. It enables the development of a culture in which good decisions are made.

The **Evidence-Based Practice** (EBP) group meets monthly with the aim of ensuring that our clinicians are supported to integrate latest evidence alongside clinical expertise in order to underpin safe and effective patient care.

Create a culture of enquiry and innovation

The EBP group update clinical guidelines, oversee the clinical audit programme and promote evidence based practice. Representatives of the group contribute to citywide palliative care guidelines through membership of the Leeds Palliative Care Network.

Over the past year, the following guidelines have been updated and loaded on to the Hospice H:Net:

- Bowel Obstruction
- Terminal Agitation Management
- Prevention and Management of Pressure Ulcers
- Wound Management

Our **Practice Enquiry Forum** brings together clinicians from across the Hospice to consider developments in palliative care and their impact on care at St Gemma's. Presentations attended by about 150 clinical staff have included:

- Breathlessness (May 2018) – presented by Catherine Malia
- Engaging with Black, Asian and Ethnic communities (June 2018) – presented by Peter McEvoy
- Deteriorating patient and use of an early warning score (August 2018) – presented by Becky Owen
- Pain Management in the Community (September 2018) – presented by Mike Bennett
- Homelessness (October 2018) – presented by Nicky Hibbert
- Feedback on the results of the PiPs Prognosis Study (November 2018) - presented by Kath Black
- Recognition and Management of Delirium (December 2018) - presented by Kitty Jackson
- Changes and new Services in Day Hospice (January 2019) - presented by Shona Eyre
- Young People's Service (March 2019) - presented by Jacqui McGuire

Clinical audits

A clinical audit of **diabetes management within the Hospice IPU** was undertaken between January and March 2019 in order to establish compliance with recently implemented Diabetes guidelines.

Recognition of the deteriorating patient at St Gemma's Hospice: Does use of the NEWS score help?

This audit examined whether recently introduced national early warning score does influence practice in terms of recognizing acute deterioration and prompt timely intervention. A poster was presented at the annual Association of Palliative Medicine Conference.

Evaluating the effect of prn Midazolam in management of terminal agitation audit

This baseline audit was undertaken prior to implementation of updated Terminal Agitation guidelines.

Dr Karen Neoh and Catherine Malia hosted a Hospice UK webinar in order to discuss recommendations for improved practice on the back of the National Blood Transfusion Audit we were part of. Twenty hospices took part showing how recent evidence is being used to improve practice and our potential to influence this nationally.

Implement nationally agreed outcome measures to judge the effectiveness of care

The nationally recommended OACC suite of clinical outcome measures for use within palliative care has been in use at St Gemma's Hospice for 2 years. New software was purchased, installed and tested to enable accurate reporting of OACC data. This ongoing development of new software to support reporting of OACC outcome measures has enabled us to report on a series of symptom related outcomes for each service across the Hospice for the first time. This will now be implemented into routine practice to support individual patient symptom management and inform service development.





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