

Your Fylde Coast Adult Specialist Palliative Care Team

In these rapidly changing and challenging times, with the anticipation of unprecedented morbidity and increased mortality in our local community due to the current coronavirus pandemic we wanted to remind all our Fylde Coast colleagues of the advice and support available to you from your local Specialist Palliative Care Service.

We would like to introduce our new consultant Dr Martin Davidson who joins our community consultant Dr Amy Gadoud, our hospital based consultants, Dr Andrea Whitfield and Dr Harriet Preston, our specialty doctors and our skilled teams of in-patient unit, community and hospital based specialist nurses to offer specialist palliative care advice and support for our local community.

Our service is supported by a wider MDT aiming to deliver holistic support and guidance in the care of patients approaching end of life, after death and through bereavement.

The Association of Palliative Medicine issued guidance on 22.3.20 on end of life and bereavement in Secondary Care ***Guidance is available [here](#)***

Aware of concerns from colleagues, in anticipation of a potential shortage of syringe drivers for the care of patients in the community, we have produced the following concise symptom management guidance for the care of patients in the last days of life, where a syringe driver would normally be needed and where the patient is no longer able to tolerate oral medications and symptoms not managed with infrequent 'as required' medication.

Symptom management guidance available [here](#)

Over the weekend NICE issued Covid-19 rapid guidance: critical care (NG 159) March 2020 for decision making in the management of patients with suspected coronavirus infection admitted to hospital with reference to their frailty and underlying co-morbidities and escalation to critical care.

In the community, never has the time been more urgent for practicing good anticipatory care end of life care. We should be identifying those patients whose lives are limited and would benefit from supportive and palliative care, ensuring advance care planning and honest conversations to support them and their families in decision making on preferred place of care and death, DNACPR and ceilings of care and recording these in EPaCCS for continuity and coordination of care whenever possible. **This particularly applies to our Nursing and Care Home patient population.**

Our Trinity inpatient unit, hospital and community services are running as normal with enhanced medical support for our community service in anticipation of need in the coming weeks and months.

We have had to suspend all face to face out-patient clinics, day therapy unit attendance, counselling and lymphoedema services, replacing these contacts with telephone or video consultations and support wherever possible.

We are increasing support for our local care homes and Clifton hospital through virtual consultations.

In partnership with our hospital, chaplaincy and community colleagues we are developing a bereavement support service and resources and will keep you posted with this information shortly.

The End of Life team are in the process of providing further training and updates for care after death, verification of death and syringe drivers to community and hospital teams. We will contact areas and professional development teams to arrange this.

We have enhanced the medical support to the community service from 23.3.20 in anticipation of increased need and are here to offer 24/7 advice and guidance to our colleagues if needed on **01253 952566**

The weeks and months ahead are going to be extremely challenging for us all and it is important we look after ourselves and our colleagues. We want to reassure you of our support and thank you for all you are doing.

Dr Gillian Au, Medical Director, Trinity Hospice and Palliative Care Services.