



Development of the Scottish Acute Palliative Care Clinical Nurse Specialist Forum (SAPCF)

BACKGROUND

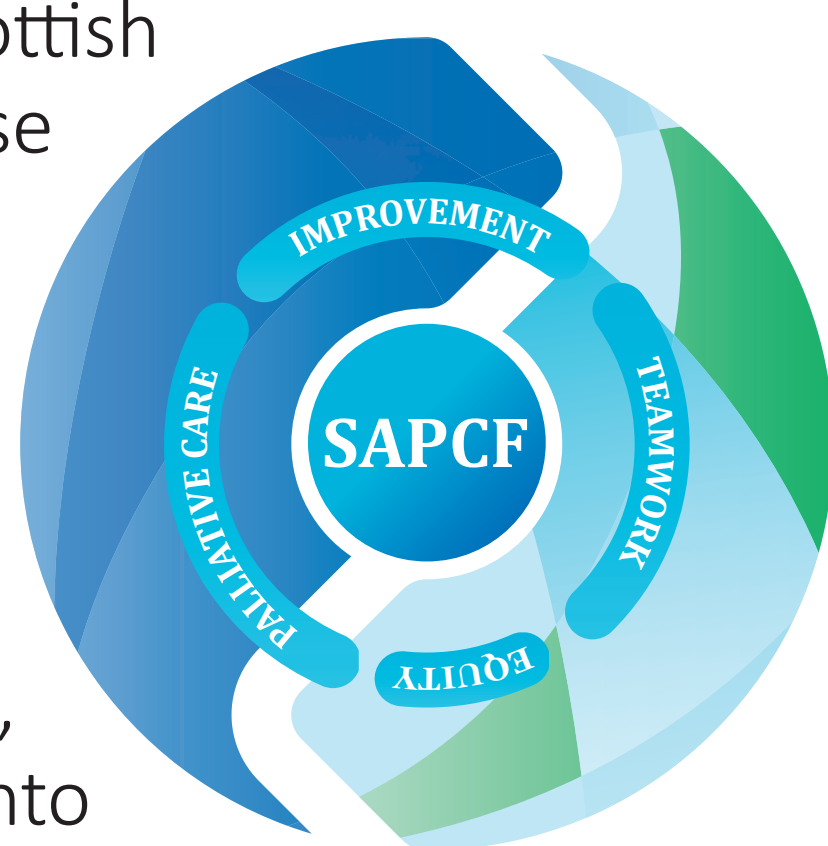
The acute hospital palliative care team collaborates with other healthcare professionals in an advisory, supportive and educative capacity to improve the care delivered to palliative patients and their families. Hospital palliative care teams are also involved in improving service delivery of palliative care through research and audit.

Over the past few decades hospital palliative care teams in the UK have developed inconsistently from different backgrounds and vary in their titles, numbers and structure of healthcare professionals involved. The first hospital palliative care team in the UK was founded in 1981 at St Thomas, London and the first in Scotland in 1996 at the Western General, Edinburgh.

Most hospital palliative care teams consist of clinical nurse specialists as the core backbone of the team with varying levels of support from Palliative Medicine Consultants, Speciality Doctors and other allied healthcare professionals. With increasing clinical workloads the demands on other key dimensions of the service suffers such as education, audit/research, service and quality improvement. In some Scottish hospitals the nurse specialist role can often be very isolated as the service is provided by a lone practitioner, and even in larger teams there can be feelings of isolation due to lack of leadership, direction, strategy and support. It was with this in mind that the founder of the group, an experienced palliative care nurse specialist wanted to heighten the work that hospital based palliative care nurses do and provide a professional forum for networking, providing support, sharing information and collaboration on joint initiatives for practice and service development. The Scottish Acute Palliative Care Nurse Specialist Forum (SAPCF) was developed.

It is well documented that hospital palliative care teams improve the psychological needs, symptom control and insight into the disease of cancer patients (1).

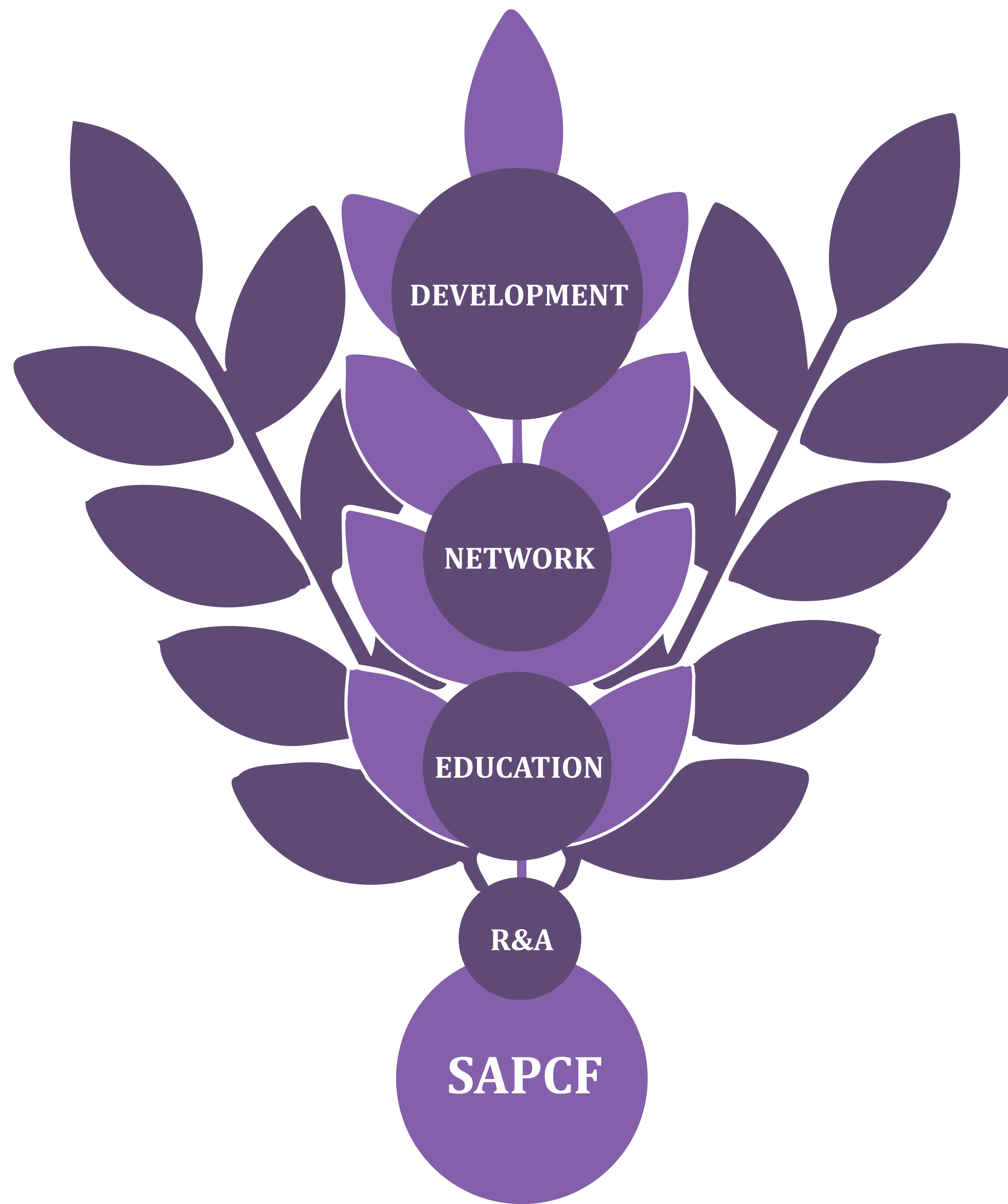
Furthermore, it is well evidenced that clinical nurse specialists make a positive impact on patient outcomes and are a pivotal part of service delivery and design (2,3). The work of the SAPCF will continue to build upon what is already known about these teams and work collaboratively to provide a cohesive approach on recommendations for the future delivery of hospital palliative care services in Scotland, including education, research, audit, quality assurance and equity.



AIMS OF THE SAPCF

To promote a unified approach, providing equity of service and best practice approaches for specialist palliative care patients across all hospitals in Scotland irrespective of locality or diagnosis.

To provide a networking infrastructure for all hospital palliative care clinical nurse specialists to allow for peer support, discussion of new and innovative ways of working, dissemination of research and audit, and provide strategic direction for future palliative care services in Scotland.



OBJECTIVES TO FULFILL THE AIMS

The group will fulfil the aims by:

- Leading best practice approaches to the delivery of specialist palliative care in acute Scottish hospitals.
- Publicising and promoting the work of the SAPCF to external stakeholders.
- Establishing sub committees and other work groups as required to fulfill the work-plan of the group.
- Contribute, comment and provide recommendations on the future strategic direction of palliative care in Scotland.
- Partnership working and collaboration to provide peer support.
- Providing educational opportunities for staff working in the acute setting.
- Securing funding without favour or prejudice to support educational events such as study days.
- Acting as a source of information for staff working in the acute setting.
- Undertaking and dissemination of research and audit in palliative care practices across Scotland.

MEMBERSHIP

Any clinical nurse specialist working in a hospital based specialist palliative care team in Scotland will be eligible to join the group. The group is made up of a core management committee and a steering group comprising all the other members. There are currently 30 members with representation from 10 of the 14 health boards across Scotland.

WORKPLAN 2016-2017

- Raising the profile of the SAPCF including website, poster presentation at conferences, meetings with external stakeholders including SPPC, Scottish Government and Macmillan Cancer Support
- Development of national database (in line with minimum data set for palliative care)
- Review of current working practices, services offered, referral criteria and referral form, levels of intervention

CONCLUSION

Although a relatively new forum it is an exciting time for the group, with a view to working in partnership generating ideas and projects with the vision of providing a specialist palliative care service that is person centred, safe effective, efficient, equitable and timely to any palliative patient in any acute Scottish hospital. We look forward to contributing and influencing the development, delivery and evaluation of local and national strategies, policies and guidelines.

For any further information or questions about the group please contact: Shona Dickson, Chairperson and Founder on shonadickson@nhs.net

REFERENCES

1. Higginson, J. and Evans, C.J. 2010. What is the evidence that palliative care teams improve outcomes for cancer patients and their families? *Cancer*. 16 (5) 423-435
2. Berry, L. 2013. Employing more specialist staff improves outcomes. *Cancer Nursing Practice*. 12 (6) 5
3. National Cancer Action Team. 2010. Excellence in cancer care: the contribution of the clinical nurse specialist. Available from: <http://www.macmillan.org.uk/Documents/AboutUs/Commissioners/ExcellenceinCancerCaretheContributionoftheClinicalNurseSpecialist.pdf> (accessed June 2016).

