

The Right Person at the Right Time: Introducing the Rehabilitation Support Worker to a Specialist Palliative Care Setting

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Introduction

Traditionally, hospices have operated with small specialist Allied Healthcare Professional (AHP) resources, limiting the scope for development of services provided and were not necessarily clinical or cost effective.

St Andrew's Hospice recognised that to allow us to achieve our strategic aim of ⁽¹⁾ implementing a Rehabilitative Model in line with Rehabilitative Palliative Care (2015) we needed to explore a different skill mix for our AHP Team. The aim of this project was to maximise the AHP resource in St. Andrew's Hospice and facilitate timely direct access to AHP services. This aim is in line with the recommendation in the Strategic Framework for Action on Palliative and End of Life Care (2016) ⁽²⁾, to enhance and support capacity planning, clinical excellence, service pathways, standard operating procedures and modernisation. This project aimed to improve St Andrew's Hospice ability to deliver safe, effective and patient centred palliative care delivered by the right person at the right time.

The objectives of this project are:

- To explore the role of a Rehabilitation Support Worker (RSW) within a Specialist Palliative Care (SPC) setting.
- To maximise the AHP resource in St. Andrew's Hospice.
- To release Specialist AHP resource for assessment and treatment of more complex patients.

Methodology

A clinical workforce review of AHP resource was undertaken which resulted in a Band 3 RSW (0.86 FTE) being recruited. The RSW is professionally supported and supervised by a Band 6 Physiotherapist and Band 6 Occupational Therapist. The RSW completed a Competency Framework utilising the competencies developed by NES, NHSL and Calderdale Framework ^(3,4). Evidenced by the framework, the RSW has generic Physiotherapy and Occupational Therapy competencies.

Following completion of the Competency Framework the RSW was responsible for:

Inpatient Services

- Continue Therapeutic Treatment as directed by the Physiotherapist and/or Occupational Therapist.
- Undertake Therapeutic Activities

Outpatient Service

Leading the following groups independently:

- Strength & Balance
- Fatigue Management
- Education, Therapeutic Activity & Exercise components of Wellbeing Programme



Results

The role of RSW has been beneficial and widely accepted both within the inpatient and outpatient setting in St Andrew's Hospice. This has resulted in:

- The introduction of Therapeutic Treatment and Activities in the Inpatient Unit.
- Weekly Strength & Balance Group and Monthly Fatigue Management Group in the Outpatient Service
- Contribution to the development and implementation of the Wellbeing Programme for Outpatients.
- We have released approx. 12 hours of specialist Band 6 AHP resource per week to assess and treat more complex patients in the Inpatient and Outpatient services



Feedback from patients and RSW

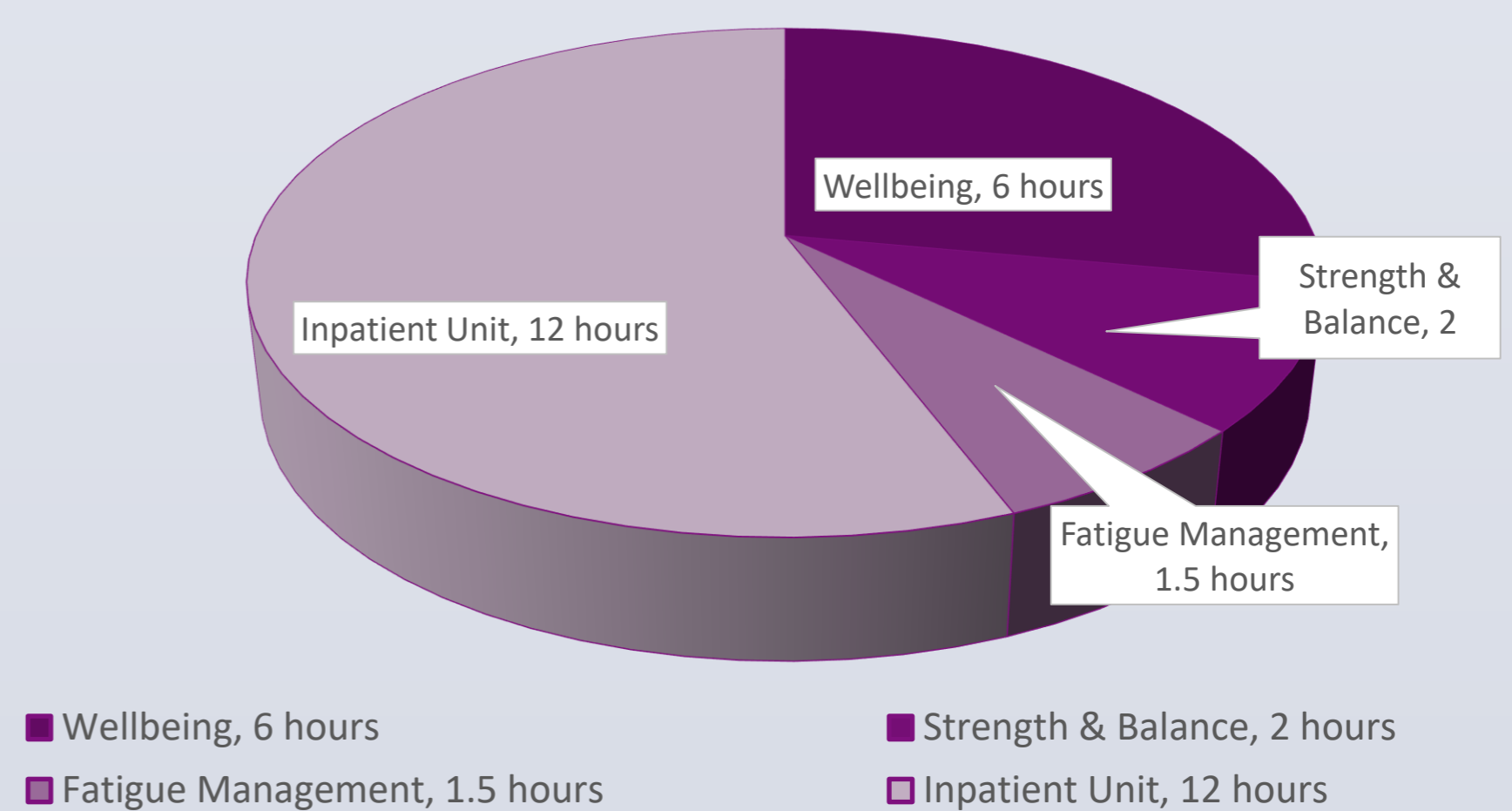
"I get to laugh... I feel my whole body tingle with my blood circulating."

"Coming into this post has really opened my eyes to the importance of RSWs and what the job involves. Working through the competencies has built up my confidence and I'm loving all the new skills I have gained."

"I feel better than I have in a long time, the exercises are doing me the world of good."

"This role has given me the chance to get to know patients and help address their varying needs across different stages of their journey. This continuity of care has received positive feedback from patients and families alike."

Utilisation of Rehabilitation Support Worker Time (per week)



Conclusion

This project has shown that the introduction of a RSW within a Specialist Palliative Care setting does allow for the maximisation of AHP resources. This ensures patients in both the Inpatient and Outpatient Services have access to the right person at the right time. As a result of the successful implementation of this new AHP model, St. Andrew's Hospice has recently recruited a further 0.6 RSW with the aim of further developing and supporting our Rehabilitation Model within SPC.

References

1. *Rehabilitative Palliative Care (2015), Rehabilitative palliative care: enabling people to live fully until they die.* <https://www.hospiceuk.org/what-we-offer/clinical-and-care-support/rehabilitative-palliative-care> (accessed 10/01/2019).
2. *Strategic Framework for Action on Palliative and End of Life Care.* <https://www2.gov.scot/Topics/Health/Quality-Improvement-Performance/peolc/SFA> (accessed 10/01/2019)
3. *Workbased Learning Resources for Support Workers.* <http://www.knowledge.scot.nhs.uk/ahpsupportworkerlearning/physiotherapy.aspx> (accessed 10/01/2019)
4. Smith, R& Duffy, J . *Developing a competent and flexible workforce using the Calderdale Framework.* 2010.

Thank you to the patients of St Andrew's Hospice for allowing us to use their pictures and comments