

Ashgate Hospicecare
Ashgate Road
Old Brampton
Chesterfield
S42 7JD

Physiotherapy Student Information

Welcome to Ashgate Hospice. This induction pack is designed to help you settle and get the most out of your placement here. The pack is a mixture of specific information about the hospice, its ethos, policies & procedures, and organisation, as well as more general information.

A Brief History of the Hospice Movement

It was in the nineteenth century that the first institutions were set up to care for dying patients. In Dublin the religious sisters of Charity under the guidance of their Mother Superior, Sister Mary Aitkenhead, set up St Vincents hospice in Dublin and St Joseph's in Hackney East London. The hospice movement throughout both the 19th and most of the 20th century was made up of independent establishments the majority with a religious affinity.

What most commentators talk of as the modern hospice movement is dated back to the work of Dame Cicely Saunders. Cicely Saunders trained as a nurse originally and then went on to study medicine. Her motivation for this was to try and help maximise a holistic plan for the dying patient. Up until her ground-breaking work the role of the hospice concentrated on good quality nursing care, care for the 'souls' of the dying and relied on the good will of local GP's to prescribe drugs. What Cicely Saunders did initially in her work at St Joseph's, and then continued with the establishment of St Christopher's, is to have built the foundation of today's palliative medicine.

There are hospices in most towns and cities in the UK as well as spread throughout the world. The philosophy of holistic care as demonstrated by the hospice movement is often held up as a model of what all healthcare could be.

"How people die remains in the memory of those who live on. You matter because you are you, and you matter to the end of your life. We will do all we can not only to help you die peacefully, but also to live until you die"

A Brief History of Ashgate Hospice

The hospice was opened in 1988 as a purpose-built unit offering palliative care to the people of North Derbyshire. Over the years there has been extensive work to improve the hospice by expanding the space and facilities available. This includes updating the old buildings, new offices, new wings on the ward and clinical rooms. In recent times, the grade 2 listed building, now known as the Harry Fisher, has been renovated to house offices for the fundraising and finance team and provide multiple clinical rooms for counselling sessions, art therapy and one to one sessions. There has also been extensive work on the inpatient unit to redesign the 3 bedded bays to provide single private rooms for all patients. The main hospice building is positioned to the West of Chesterfield and is surrounded by extensive gardens close to the Derbyshire Peak District.

When COVID-19 spread across the world, many things had to change dramatically across the hospice. The ways in which both clinical and non-clinical staff work, what areas are used for, and the services we offer. Community teams now work remotely, only occasionally visiting the main site if needed, but still attending visits to see our service users in the community. IPU staff remain on the ward. Most non-clinical teams were also initially asked to work remotely or were furloughed. Including, fundraising, finance, retail and many more. Thankfully all our shops have now reopened for business. With staff now not on site there are many rooms and areas that are not being used and this is currently being reviewed to make the required amendments. One example of this is the large day hospice centre that is attached to the main site. This service was closed due to the pandemic and will not return in the foreseeable future. However, there is now a community hub offering some similar services that is constantly being evaluated and reviewed to improve and progress the service. The large space is at present being emptied so we can start bringing patients back to see our doctors and other health professionals during a clinic slot.

The hospice is an independent charity and is organisationally separate from the NHS. However, the hospice has a close working relationship to the NHS providers in the region. Being a charity Ashgate Hospice must find about 70% of its yearly running cost from fundraising. The remaining 30% is from Derbyshire CCG. The independence of the hospice from the NHS allows the ethos that hospices must be maintained. At the same time the close working relationship with partners in the NHS helps with recruitment and retention of staff, as well as helping to maintain high standards of education and learning. This of course has been very

difficult over the recent months due to the COVID pandemic. Our fundraising team have been limited in being able to organise the events that pull in that funding from our supporters. Therefore, we have now gained an agreement that over the next few years the CCGs will provide the necessary funding support, alongside our fundraising team, to ensure we can deliver a high standard palliative care service to the people of Northeast Derbyshire.

The patients that use the services offered by the hospice will have a variety of diseases. The one thing that they will have in common is that the disease is beyond the realms of curative practice. These people can be quite well and active at the point of referral, others may be at the end of their lives. The predominant pathology treated is cancer. Increasingly we see patients with Heart Failure, Dementia, Neurological disorders, COPD and Renal Disease. We support people over the age of 18 who live in North Derbyshire. This includes clinical visits out in the community. Our IPU has 21 beds, however we currently only have funding for 15 of these, and we have a good physiotherapy presence there. We are also supporting the community hub with talks and classes for service users to attend.

The Philosophy of Palliative Care

The delivery of high-quality holistic care to the dying patient has been central to the development of palliative care since its early development. It has been expressed by the World Health Organisation (WHO) as '...the active total care of patients whose disease is not responsive to curative treatment. Control of pain, of other symptoms, and of psychological, social and spiritual problems is paramount'

The application of this holistic care is delivered through the Multi-Disciplinary approach. Here at Ashgate Hospice there is a large and diverse team of staff applying their skills to meet the various needs of the patients. These include; Doctors, nurses, healthcare assistants, physiotherapists, occupational therapists, social workers, chaplaincy, art therapy, complimentary therapists and volunteers.

The Role of the Physiotherapist in Palliative Care

The role of the physiotherapist in palliative care has also changed over the years. Since the NICE document; *The End of Life Care Strategy*, Physiotherapists have increasingly become involved in a rehab model. This is partly because patients are getting referred much earlier in their disease trajectory often just after they have finished their treatment. This can mean that the patient can expect to see

a good return of function and therefore the physios' role is to help maximise that return.

Physiotherapy is also integral to helping each patient achieve their goals on a functional level. Physio can do this by getting involved in mobility advice and aids, pain management (heat, TENS, acupuncture), chest physio, management of common musculoskeletal problems and advice on positioning for comfort at end of life.

As our patients deteriorate we are also there to support them through this transition and provide them with the correct aids and support to make their quality of life as good as we possibly can during potential difficult times.

The Physiotherapy Team at Ashgate Hospice

We would like to welcome you to the Physiotherapy Team at Ashgate Hospice. We work 8.30am - 4.30pm Monday to Friday, with patients who are in the palliative stages of disease, mainly cancer care. We provide a specialist palliative care physiotherapy service to patients in a range of settings including the in-patient unit, patient homes, the community hub and as an out-patient. It is important that we possess a good all-round set of physiotherapeutic skills, a strong sense of empathy, good communication skills and sensitivity to patient's needs and situation in life.

Palliative Physiotherapy's main aim is to promote patients' independence and quality of life by offering help and advice, in areas such as pain control, mobility, breathlessness management, fatigue management, simple oedema, exercise prescription and relaxation.

Referrals are accepted from any member of the specialist palliative care team, primary health team and other health professionals.

Due to the nature of our caseload and the ongoing COVID pandemic, we are unable to plan too far in advance what you will be able to see on your placement.

Please always respect confidentiality.

We are very happy to provide support, advice and education to staff and carers alike.

Uniform

Please come appropriately dressed in your Health Care uniform and ID badge. This can be tunic tops or white/ Royal Blue polo shirt. No jeans or trainers. Black

socks and shoes. Jewellery (bare below the elbows), make-up and perfume/aftershave should be kept to a minimum. You may be visiting patients on the inpatient unit, in the community or seeing them as an outpatient. There are staff changing rooms if needed. The therapy team do tend to arrive in uniform if travelling by car to work. However, you will need to consider a change of clothes if you need to see patients in different clinical areas. Due to COVID it is essential you come prepared to change if required. I would also advise that you get changed before going home unless you are going straight home to shower and change.

Food and Drink

There are facilities to either purchase a hot drink or make one in the office. Milk is provided by the catering team. You can bring your own lunch and store it in the fridge or there is a café onsite. However, in the current climate you need to pre order hot food on the day. There are sandwiches, salads, cold drinks, and cakes that can be purchased too.

Getting to the Hospice and Parking

By Car: The postcode for your Sat Nav is S42 7JD.

If travelling by motorway: Leave M1 at junction 29 direction Chesterfield. At roundabout take 3rd exit to town centre. At next roundabout take first exit passing Next, Currys and PC world on your left. Go straight ahead at traffic lights and keep in left hand lane. At roundabout take 2nd left to Chatsworth road. Go straight over small roundabout by Morrisons. Continue on Chatsworth road after a petrol station (on your right) turn right at the traffic lights then at the mini roundabout turn left continue along old road past the ambulance station then turn left at the junction. Ashgate Hospice is about $\frac{1}{2}$ a mile along this road on your right.

If travelling from Sheffield, the A61 at the round about take the 5th exit onto St Johns road B6150, continue on this road, turn first left. Then continue straight over the mini round about, continue straight on past the Spar shops on the left. At the roundabout take the 2nd exit onto Newbold road B6051/ b6150. Keep in the left hand lane at the traffic lights and turn left, stay on the B6150.

At the round about take the 3rd exit onto Ashgate road. The hospice is on the right.

Car Parking; It is possible to park your car here at the hospice. A car parking permit will be provided on the first day which will allow you to park during your placement. You are free to park there on your first day without a permit anyway.

Cycling; There is a Bike stand near the Harry Fisher Building on site. You will need to provide your own lock.

Accommodation:

There is no accommodation available for students at the hospice.

Other useful information

Please bring your smart card with you on your first day. If you do not have a smart card please contact us pre placement to arrange this. You will need to provide 3 forms of ID (2 with photo ID and 1 proof of address).

If you would like to arrange a pre-placement visit. Please contact emma.wright@ashgatehospicecare.org.uk.

On the first day please arrive at reception for 9am and ask for a member of the Physiotherapy team.

Expectations

It is expected that as a result of the placement the student will have:

- An understanding of some of the issues facing those living with a Palliative diagnosis.
- -To be able to do a holistic Physiotherapy assessment and develop a treatment plan appropriate to each patient.
- Actively partake in the MDT with regards to patients that they are responsible for
- To see patients in numerous settings and be able to appreciate the different approaches that maybe appropriate for each setting.

Useful Pre-placement reading:

Conditions you may see:

Heart Failure

Lung Cancer

Prostate Cancer

Breast Cancer

Bowel Cancer

Brain Tumours

Motor Neurone Disease

COPD

Common oncology treatments - chemotherapy, radiotherapy, immunotherapy

Metastatic spinal cord compression

Useful web sites

www.mndassociation.org

www.nhs.uk

www.macmillian.org

Macmillian physical activity for people with bone metastasis

Nice.org.uk: Metastatic Spinal Cord Compression in adults

CSP "So your patient has cancer"

www.hospiceuk.org, rehabilitative palliative care