

Response ID [REDACTED]

Submitted to Review of access to palliative care services - Organisations/Health professionals  
Submitted on 2024-11-21 03:04:32

## Consent

1 The Committee for Health would like your permission to publish your response as part of the survey results. Please indicate your preference.

Consent:

Publish my response but keep it anonymous.

## Who are you?

2 What is your name?

Name:

[REDACTED]

3 What is your email address?

Email:

[REDACTED]

4 Are you a healthcare professional? If yes, what is your role? If no, what is your interest in palliative care services:

Yes

1500 Characters:

Staff Nurse working with persons receiving palliative and end of life care in their own home through Marie Curie Community services

5 What is your organisation?

Organisation:

[REDACTED]

6 Do you currently work in palliative care services? If Yes, in what capacity?

Yes

1500 characters:

As a community staff nurse with Urgent Hospice Care at home services

current state of palliative care services

7 In your view what is the current state of palliative care services in Northern Ireland?

Good

8 Do you think there is an understanding by the public of what palliative care is? If no, what are the main barriers to the public understanding palliative care?

No

1500 Characters:

I believe the general public confuse palliative care and end of life care.

## Access to services

9 Are palliative care services equally accessible to all who need them?

Yes

10 From your experience where are the gaps in the provision of service?

1500 characters:

Due to increasing workload for District nurses patients suffer the consequences of rushed visits resultant in patient and family's voices worried and concerns not being heard; delays in nurse visits to provide symptom relief at end of life.

11 Do you believe barriers exist that prevent equitable access to these services? If yes, please provide examples in the box provided.

Yes

1500 characters:

Across the five NI trusts... different services are available to in each individual trust. No equality. Although Marie Curie do offer equality within these areas as sub contractors.

12 What additional services could/should be provided?

1500 Characters:

24 hour fully staffed provisions for people at end of life.  
More community specialist care teams

### Integration of Services

13 How well are palliative care services integrated across the health system, through primary, secondary and specialist care?

1500 characters:

Dependent on Trust area....SEHSCT appears to have a good (albeit understaffed) fluidity of provision for palliative care through primary and secondary care

14 Should palliative care be a regional service? Please outline your reasons in the box provided.

Yes

1500 characters:

Yes I believe so  
We need more staff to enable full optimal provision to our palliative and end of life patients.

15 What can be done to improve integration?

1500 characters:

Too many services... confusing patients and families. Tug of war for provision of services commissioned by trusts between charitable organisations. One solid palliative care team needed.

### Best Practice

16 Do you have any examples of good practice or pilots in palliative care that are meeting the needs of patients and families/carers? If so, is this best practice happening widely across Northern Ireland?

1500 Characters:

Marie Curie have a Community Outpatient Service providing holistic support and expert guidance to patients with palliative care needs and at end of life. Patients have access to extensive MDT professionals on a daily basis

Also

A fantastic service which is expanding in the SHSCT is that of "life and time" a provision for those at end of life. On call nursing staff and GPs within a 6 mile radius of each patient nearing end of life... ensuring efficient and effective response times for symptom relief.

An excellent service.

17 Do you think that families receive sufficient support when accessing services? Please outline your reasons in the box provided.

Not sure

1500 Characters:

Very dependent on the service and it's offerings. Patients and families not always fully aware of services within trusts and charitable organising which are accessible 24/7

### Funding and Strategy

18 Do you think the current funding for palliative care is sufficient?Please outline your reasons in the box provided.

No

1500 characters:

More funding needs to be offered out to give people with palliative needs and end of life care the full provisions available.  
Only one chance to have a good death

19 Is the current model for the funding of hospices, including hospice at home/community care/rapid response support, sustainable and sufficient to meet needs now and in the future?Please outline your reasons in the box provided.

No

1500 characters:

Always room for improvement!

20 Is there a need for a new Palliative Care Strategy for Northern Ireland? If yes, what should it include? If no, why not?Please outline your reasons in the box provided

Yes

1500 characters:

All of Northern Ireland having access to prompt palliative and end of life care.

Any other comments

21 Any other comments

1500 characters:

Patients and families as well as health care professionals necking concurred with a Web of services from different providers...Trusts, Marie Curie, NI Hospice, Macmillan - rather than competing against each other for commissioning and contracts... need to have a solid "one stop shop" for our palliative patients.