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THE ROLE OF THIRD PARTY DELEGATION IN PALLIATIVE CARE: MANAGING PALLIATIVE CARE CRISES AT HOME

Rhona Winnington

University of Plymouth, UK

Recent research suggests that 70% of individuals would choose to die at home if possible, but this is not reflected in the actual statistical detailing where one actually dies. One obstacle in achieving home as the preferred place of death is the current inability to meet the symptomatic needs of patients as they near death in the UK. A poll by Dying Matters conducted in 2017 indicated that 60% of family or friends in the UK would be willing to give "a pain-relief injection" in order to facilitate the wishes of their loved ones; however, this is not yet a routinely occurring event. Palliative care in New Zealand, often due to the rurality of patients, routinely engages family members or friends in giving

sub-cutaneous PRN medications to manage patient symptoms out of hours, often averting palliative care crises. With a small number of trusts in the UK now implementing the option of informal carers providing this service, I am currently working with a hospice in South Devon to transform their out of hours palliative care services to meet the needs of their patients due to their often rural location. Also, I am looking to roll this out across the South West of England thereafter.

Rhona.winnington@plymouth.ac.uk