

# Palliative Care Needs Rounds Checklist

## Triggers to discuss resident at needs rounds

### One or more of:

- 1 You would not be surprised if the resident died in the next six months
- 2 Physical or cognitive decline or exacerbation of symptoms in the last month
- 3 No plans in place for last six months of life/no advance care plan
- 4 Conflict within the family around treatment and care options
- 5 Transferred to our facility for end of life care

## 1. Reviews

- Have all actions been implemented?
- Have any new symptoms or concerns emerged?
- Give positive feedback on actions that the staff managed well
- Decide if the resident should be kept on the specialist palliative care list, for on-going review

## 2. New Referrals

- What are the resident's diagnoses and co-morbidities?
- What are their palliative care needs (including physical, psychosocial and spiritual symptoms)?
- What are staff current concerns around treatment or goals of care?
- Who supports the resident outside the facility (eg family/friends)?
- Provide case-based education (eg recognising deterioration and dying, bowel management,

## Actions

- Medication review (e.g. change meds, anticipatory meds)?
- Organise surrogate decision maker?
- Develop an advance care plan?
- Organise a case conference?
- External referrals (e.g. pastoral care, dementia support services, wound care)?
- Refer to specialist palliative care?

Forbat, L., et al. (2018) Improving specialist palliative care in residential care for older people: a checklist to guide practice. *BMJ Supportive and Palliative Care*. 8(3): 347-353.