The Role of the District Nurse (DN) in Palliative Care

1. **Establish relationships** with patients and their families prior to implementing end of life care (Patients are often identified to DNs via the Gold Standards Framework register at GP the surgery)

2. **Attend regular GSF meetings** at GP surgeries.

3. **Initiate Preferred Priorities for Care** document at the appropriate time to enable patients wishes to be met.

4. Provide **ongoing support and advice regarding symptom management** for patients and their relatives

5. Take a **lead role within the MDT when co-ordinating care** for patients at the end of life

6. **Referral to the following organisations** as agreed with the patient/family;
   - Marie Curie
   - Crossroads
   - Continuing Health Care (Fast-track referral)
   - Hospice Services
   - Social Services
   - OT

7. **Prescribe and order equipment** that may be required (Profiling bed/Commode/Mattress variator etc)

8. If appropriate, **wound care, catheter care** as required

9. **Liaison with out of hours services/specialist nurses/GP's/secondary care** regarding patients’ condition.

10. **Administration of stat dose medication/syringe driver medication**

11. Responsible for **ordering and stock control of injectable medication** to ensure availability of appropriate drugs at all times

12. **Assist/support carers providing personal hygiene for EOL patients** (double-up care if required)

13. Provide **education and support for residential care home staff** when EOL care required in this environment.

14. **Implement Integrated Care Pathway for the dying** when appropriate

15. **Ensure GP's review the patient as their condition dictates** and request prescriptions to be adjusted to manage symptoms effectively

16. Provide **advice and support for the family once the patient has passed away.** Ensure ’What to do after a death’ booklet is given to the family

17. **Bereavement visit** usually after the funeral has taken place