

<u>Practical Symptom Management – Pilot Study Day</u>

Wessex Children's & Young Adults' Palliative Care Network

Agenda for the day

| Session | Aims and objectives | Time | Duration | Delivery |
|---|---|-------|----------|------------------|
| Registration & Coffee | Networking opportunity | 08.30 | 1hr | |
| Welcome and introduction | Introduce the day/format/faculty. | 09.30 | 15mins | TW Training room |
| Pain assessment and initial management | Understand key concepts in pain assessment Holism Individualism & relativism Total pain Pain syndromes Understand practical pain assessment Be aware of physiology of pain & physical/psychological integration Apply understanding of pain assessment to a real case & generate a holistic assessment summary. Be able to clearly document a pain assessment using approach above. | 09.45 | 60 mins | TW Training room |
| Non pharmacological approaches to symptom management and symptom management plans | Be able to describe common non-pharmacological treatments and their application for symptoms. Be able to guide a child or parent through breathing exercises for breathlessness/anxiety. Understand the format of the symptom management plan. | 10.45 | 30 mins | VC training room |



| | Be able to use a symptom management plan to escalate treatment when needed. | | | |
|---|---|-------|---------|-------------------------|
| Coffee break | Networking opportunity | 11.15 | 15 mins | Training room |
| Symptom Pop up Sessions | Secretions | 11.30 | 90 mins | KR & GS |
| Case introduction | Nausea & vomiting | | | |
| Key learningMedications and initial | Breathlessness | | | |
| PRN dosing | Seizures | | | |
| Case discussion | | | | |
| Lunch | Networking opportunity | 13.00 | | LTV Foyer area |
| Opioids session 2 | Understand morphine sulphate and how it works Explain the reasons and process for opioid rotation Understand the difference between common opioids and how that impacts on their use. Be able to perform an opioid swich on our patient case with support. | 13.45 | 45 mins | TW training room |
| Symptom Pop up Sessions | Normal signs at the end of life - Changes to the body during normal dying. - Differentiate between physical signs and total symptoms. - Management of 'normal dying'. | 14.30 | 75 mins | KR, AB Training room |
| | Terminal agitation and use of sedation (45 mins) AB | | | |
| Coffee break | Networking opportunity | 15.45 | | |
| Practical symptom management at the end of life – brining things together | Describe how to prepare for managing symptoms at the end of life. (preparation, planning, logistics, equipment, ordering). Be able to translate a symptom management plan into a | 16.00 | 60 mins | JW/KL |



| Closing session | Feedback form reminder | 17.00 | 10 mins | TW |
|-----------------|---|-------|---------|----|
| | Phenobarbitone | | | |
| | CyclizineHyoscine butylbromide | | | |
| | Levomepromazine Gualinia a | | | |
| | O Midazolam | | | |
| | o Morphine | | | |
| | this. | | | |
| | for parenteral use and important considerations when doing | | | |
| | Understand how to combine medications in a syringe driver | | | |
| | eneral/transmucosal and parenteral medications). | | | |
| | nursing colleagues (community and hospital charts including | | | |
| | prescription for administration of medications by junior | | | |