

# Common core principles:

## End of life care during the COVID-19 pandemic



### Introduction

People nearing the end of their life often need specialist care and support that is provided by experts working in the field.

During the COVID-19 pandemic, people working in health and social care who may not be specialists in this area are now finding themselves working with people who are dying, or whose condition is deteriorating rapidly.

These principles have been adapted to support all those working with adults at the end of their life and focuses on the underpinning competences, knowledge and values needed.

This does not replace the '[Common core principles for end of life care](#)' developed by [Skills for Health](#) and [Skills for Care](#). It's intended to provide an outline framework to guide and support managers and staff working during exceptional circumstances.

These principles which underpin the way we care for people at the end of life are to be used to compliment the new 'End of life care support' supplement, which can be [downloaded here](#).

## Principle 1

A **person-centred** approach to care and support, with individual priorities - including spiritual, emotional, social and cultural needs - guiding all decisions and actions.

- Practice is based upon a person-centred, social model of health and disability, informed by the principles of respect, dignity, choice and independence. These values mean a shift from professionals knowing best to workers supporting and empowering people to be in control of their own needs and wishes, including the right to change their mind about what they want.
- Recognise people as experts in their own lives.
- Understand the range of formal assessment tools and ways of gathering information, including conversation, and know how to use these appropriately.

## Principle 2

**Clear communication:** appropriate and timely and delivered with sensitivity. Communication takes account of personal circumstances, needs and abilities, as well as cultural, personal and spiritual needs.

- Recognise a range of factors that have an impact, such as dementia, learning disability, illness or emotional state.
- Recognise the changing ability and desires of each person to and adapt communication style accordingly.
- End of life care plans, including advance care plans (ACPs), are clearly understood and shared by everyone involved.

## Principle 3

**Integrated working:** practitioners collaborate with care and support, promoting a needs-led, rather than service-led approach, with workers communicating effectively to respond to changing circumstances.

- Workers have a good understanding of, and respect for, the services provided by their colleagues in other disciplines and work in partnership with them to meet the needs of the person, their family and friends.
- Care and support are delivered in a coordinated way and information is shared in a timely and appropriate manner, recognising the range of communication needs and requirements of people, their families and friends, including children and young people.

## Principle 4

**Good, clear and straightforward information** is provided to people and their carers.

- People understand the range of options and resources available and any potential risks or benefits to support personal choices.
- Information about relevant illness, its prognosis and other related factors is given clearly, sensitively and appropriately.
- Workers share information around end of life care: best interest decisions, advance decisions to refuse treatment and advance care planning appropriately.

## Principle 6

**The needs and rights of carers and families are recognised:** they are offered support both while caring and during bereavement.

- Consider factors that may have an impact on a person's response to grief, loss and bereavement, such as age, culture, religious belief and ability.
- Consider the impact of death and dying on family members and offer appropriate advice, information and support, referring to other networks or organisations as necessary.
- Staff support each other and connect to more structured support where needed.

## Principle 5

**Regular reviews** and effective communication according to people's needs and circumstances: forward planning and including advance care planning leads to coordinated support.

- Provide support both for families and friends who provide care and those who choose not to.
- Work sensitively to resolve conflict between the person, their family and friends about end of life care decisions or advance care plans.
- Recognise and respond to people's fears and anxieties.

## Principle 7

Employers provide appropriate **learning and development:** staff are properly equipped to work with people at the end of their lives and with those important to them.

- Workers develop skills and confidence to work with people who are dying.
- Effective use of supervision and other reflective practice helps teams to meet their end life care learning needs.
- Recognise potential emotional impact of dying and death upon workers, using appropriate systems and resources to provide support: include supervision, debrief sessions and supporting funeral attendance.

For more support around end of life care visit our website

[www.skillsforcare.org.uk/endoflife](http://www.skillsforcare.org.uk/endoflife)

