# Palliative Care Needs Round 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 ongoing 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 (e.g. family/friends)?
- □ Provide case-based education (e.g. recognising deterioration and dying, bowel management, pain assessment, talking to GPs)

## Actions

- □ Change medication?
- □ Organise current or anticipatory medications?
- □ 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?