

SPICT

Supportive & Palliative Care Indicators Tool

CHECK-LIST



General Indicators

Look for any general indicators of poor or deteriorating health.

- Unplanned hospital admission(s).
- Performance status is poor or deteriorating, with limited reversibility. (eg. The person stays in bed or in a chair for more than half the day.)
- Depends on others for care due to increasing physical and/or mental health problems.
- The person's carer needs more help and support..
- Progressive weight loss; remains underweight; low muscle mass.t
- The person (or family) asks for palliative care; chooses to reduce, stop or not have treatment; or wishes to focus on quality of life.

Clinical Indicators

Look for clinical indicators of one or multiple life-limiting conditions.



Cancer

- Functional ability deteriorating due to progressive cancer.
- Too frail for cancer treatment or treatment is for symptom control.



Neurological Disease

- Progressive deterioration in physical and/or cognitive function despite optimal therapy.
- Speech problems with increasing difficulty communicating and/or progressive difficulty with swallowing.



Respiratory Disease

- Severe, chronic lung disease; with breathlessness at rest or on minimal effort between exacerbations.
- Persistent hypoxia needing long term Oxygen therapy.
- Has needed ventilation for respiratory failure or ventilation is contraindicated.



Dementia/ Frailty

- Unable to dress, walk or eat without help.
- Eating and drinking less; difficulty with swallowing.
- Urinary and faecal incontinence.
- Not able to communicate by speaking; little social interaction.
- Frequent falls; fractured femur.
- Recurrent febrile episodes or infections; aspiration pneumonia.



Heart/ Vascular Disease

- Recurrent aspiration pneumonia; breathless or respiratory failure.
- Persistent paralysis after stroke with significant loss of function and ongoing disability.
- Heart failure or extensive, untreatable coronary artery disease; with breathlessness or chest pain at rest or on minimal effort.t
- Severe, inoperable peripheral vascular disease.



Kidney Disease

- Stage 4 or 5 chronic kidney disease (eGFR < 30ml/min) with deteriorating health.
- Kidney failure complicating other life limiting conditions or treatments.
- Stopping or not starting dialysis.t



Liver Disease

- Cirrhosis with one or more complications in the past year:
 - __ diuretic resistant ascites
 - __ hepatic encephalopathy
 - __ hepatorenal syndrome
 - __ bacterial peritonitis
 - __ recurrent variceal bleeds
- Liver transplant is not possible.



Review Current Care and Care Planning

- Review current treatment and medication to ensure the person receives optimal care; minimise polypharmacy.
- Consider referral for specialist assessment if symptoms or problems are complex and difficult to manage.
- Agree a current and future care plan with the person and their family. Support family carers.
- Plan ahead early if loss of decision-making capacity is likely
- Record, communicate and coordinate the care plan.



Other conditions

- Deteriorating and at risk of dying with other conditions or complications that are not reversible; any treatment available will have a poor outcome.

Talking about future care planning:

Ask:

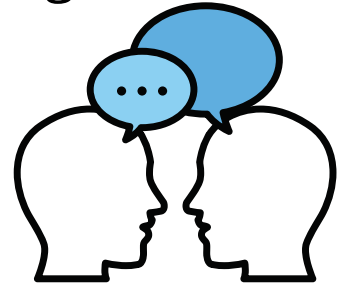
What do you know about your health problems and what might happen in the future?

'What matters' to you?

What are you worried about?

What could help with those things?

Who should be contacted and how urgently if your health deteriorates?



Talk about:

The outcomes of hospital admission and treatments such as: IV antibiotics; surgery; interventions for stroke, vascular or cardiac disease; tube or IV feeding; ventilation.

Treatments that will not work or have a poor outcome for this person. (eg. CPR)

POA or proxy for decision-making in case the person loses capacity in the future.

Help and support for family/ informal caregivers.



Tips on starting conversations about deteriorating health



I wish we had a treatment for..., but could we talk about what we can do if that's not possible?

I am glad you feel better and I hope you will stay well, but I am worried that you could get ill again...

Can we talk about how we might manage with not knowing exactly what will happen and when?

If you were to get less well in the future, what would be important for us to think about?

Some people want to talk about whether to go to hospital or be cared for at home....



HARRINGTON
HEALTH CLINIC

Adapted from SPICT.org.uk