Last January 2013 I had the chance to perform my clinical visit at St. Christopher's Hospice granted by the European Oncology Nursing Society (EONS) through the Clinical Travel Grant. St. Christopher's Hospice is the world-famous hospice that Dame Cicely Saunders founded in the 1960s and the birthplace of the modern hospice movement.

As at the time of the visit I was attending a PhD course at the University of Genoa in Italy, the purpose of my visit was focused not only on clinical issues but also mainly on research in palliative care.

Dion Bachmann, the education business manager of the centre, planned a one-week programme for me including clinical and research topics. I had the great opportunity to share the objective and contents of my PhD programme that is focused on developing and testing an intervention focused on quality of life assessment in palliative care practice. Thus, I was interested in capture all the elements on the ground of such intervention as performed at this site.

Individual meetings with Dr Nigel Sykes – the Medical Director –, Jane Manns and Rosanna Heal – Advanced Practice Nurses (APNs) –, Liz Bryan – Lecturer Practitioner at King’s College London –, and Julie Kinley – Care Home Research Nurse – empowered me to become more knowledgeable about quality of life assessment issues in palliative care practice and research.

My placement started at the Nuffield Ward one out of four inpatient wards at St Christopher's Hospice and attended the multi-professional team meeting leaded by the nurse managers Julie and Esther. The team met to discuss patients' healthcare conditions and priorities assessed through the St Christopher's Index of Patient Priorities (SKIPP).
I also attended ward round with the nurse manager and physicians and I was impressed by the comprehensive assessment they performed at the bedside of the patient. Furthermore, I found interesting how accurately information collected during the round was at the same time entered through a laptop in an electronic database. This approach helped them reviewing the care they provided to make sure it was of the highest standard and addressed all patient’s needs. At the end of such experience I realized that professionals objectified palliative care because they had a thorough awareness of patients’ quality of life.

As I mentioned before, St. Christopher’s Hospice teams use the SKIPP tool. It is a quality of life questionnaire developed by the APNs at St Christopher’s and a professor of end of life care at Southampton University - Mrs Julia Addington-Hall. It consists of a short (11 questions) validated questionnaire administered by trained nursing assistants or staff nurses. As I was interested in gaining insight more about the SKIPP I had the chance to meet Mrs Rosanna Heal - APN and Quality Manager of the centre - to discuss all the issues they had considered in developing and implementing the SKIPP tool in daily practical use. Mrs Heal showed me the tool and explained to me how they developed this outcome measure that, importantly, takes account of response shift phenomena. It enables hospices/palliative care providers to assess the impact on patients of the care they deliver and show changes in symptoms over time.

During my stay I visited the Halley Stewart Library situated in the Education Centre building. Here, I met Mrs Denise Brady and I shared with her my interest in quality of life assessment and we discussed about biomedical database consultation strategy. As it can imagine, the library contains lots of books and journals about palliative care, research and social topics.

St Christopher’s has also a home care service that delivers care to patient at home and in clinic-based appointments. I had the chance to see how patients cared for at home by the St Christopher home care service who were well enough saw their clinical nurse specialist and other healthcare professionals in the consultation and therapy rooms and attended activities at the Anniversary Centre located at the first floor of the St. Christopher’s. The Anniversary Centre incorporates a café and social area where patients, families and visitors can relax. Patients can join in the creative activities organised in the day unit such as painting, pottery, photography or participate in group programme, for example, during my stay I attended both a painting session and a practical information group about managing fatigue and dyspnoea – something not commonly practiced in Italy.

I spent my last day meeting the head of allied health professional team Mrs Helena Talbot-Rice – physiotherapist. For the first time ever, I observed a patient during a workout session playing at the Nintendo balance board aiming at assessing and improving patient’s postural stability. Later I had a visit with Mrs Sally Hood – Senior Complementary Therapist - and her staff. They showed me the main activities that complementary therapists deliver to patients at St Christopher’s. Patients generally referred by nurses enjoy complementary therapy service having the purpose of reducing symptoms associated with their illness, including anxiety, stress and pain, and having a positive impact on their quality of life.

As a results of my clinical visit I observed in palliative care practice and learned more about which elements I will consider before implementing an intervention focused on quality of life assessment, for example starting with identifying the appropriate QoL tool, training staff about using the tool, identifying a responsible for the process, defining the QoL
assessment timetable (e.g. day three and day ten after admission), defining threshold scores and trigger point area, and then discussing results. Between the features that I have observed, especially I was struck by the availability of interventions targeting patients with needs related to the physical dimension but also to the social, psychological and spiritual dimension, as such this is an important element to think of before starting assessing patient's needs.

At St. Christopher’s I met lot of professionals from different disciplines caring for patients and disseminating their standards and values across countries.

I wish to thank the EONS for selecting my application and all professionals who welcomed me at St. Christopher’s for providing me with their valued and best practice advices and also a greater understanding of palliative care.