

Physical: support mapping for care teams

Palliative and end of life care inevitably involves supporting the person diagnosed with a life-limiting condition to cope with the physical implications of their illness. The person may require support to cope with distressing symptoms, get relief from pain, and manage physical changes in themselves as a result of their illness. It involves working very closely with healthcare professionals to ensure the individual is as comfortable and pain free as possible in end of life.

How can we support the person to remain in their home?

Support required	
Any adaptations required	Aids and equipment required

Advice can be sought from Hospice UK, an occupational therapist, your GP and community palliative care team.

Do the care team feel informed and prepared regarding the physical symptoms and support required?

Marie Curie and Macmillan's **'End of Life: a guide'** could be helpful

What can we do to help? (key strategies)

Area of support

What are the challenges in identifying and communicating symptoms of illness for the person you support?

The DisDAT (Disability Distress Assessment Tool) could be helpful

What can we do to help? (key strategies)

What can we do to help? (key strategies)	Area of support	Area of support	What can we do to help? (key strategies)
	Area of support	Area of support	

Who are the key health professionals involved?

Name	Role

Consider the capacity of the person you support to consent to medical treatment and interventions? Have you discussed any identified issues with individuals, families, staff, friends and health teams?

The Mental Welfare Commission's **'Right to Treat'** could be helpful

Care planning

What are the particular support issues and challenges to managing the physical and healthcare needs of the person you are supporting? What strategies and supports can be put in place to overcome any barriers?

Where an individual is considered to lack capacity to make certain decisions regarding their care and treatment...

Who should be involved in decisions regarding the person's care and treatment?	What support measures can we put in place to enable the person to take a more active role in decision making?

Consider protocols and communication systems that will strengthen joint working with health teams.