

Best Practices

Best Practice One:

1. Title of the practice

Training Programme on Palliative Care for Social Workers

2. The context that required the initiation of the practice (100 – 120 words)

Palliative care is an approach that improves quality of life for patients and their families facing the problems associated with life-limiting illness. This is accomplished through the prevention and relief of suffering by means of early identification and comprehensive assessment and treatment of pain and other physical, psychosocial, and spiritual problems (WHO, 2003). Palliative comes from the Greek word “Pallium” which means Cloak (to cover)

The framework of social work training and practice gives the ideal scope to social work professionals to involve in palliative care. According to the Maharashtra Palliative care policy it has been estimated that 6 million people need palliative care every year and less than 3 percent have access. In India it is estimated that the prevalence of patients who require Palliative Care are 10 million which would work out to approximately 1 million patients for Maharashtra (Maharashtra Palliative Care Policy, Jan 2013).

The WHO guidelines developed by the National Consensus Project for Quality Palliative Care in 2004, suggest eight domains for the effective provision of Palliative Care at every Centre and also recognize Palliative Care as a Fundamental Human Right.

NASW Standards for Social Work Practice in Palliative and End of Life Care

The National Association of Social Workers, 2004 (NASW) has developed Standards for Social Work Practice in Palliative and End of Life Care, a useful practice tool for social workers. These standards are designed to enhance social workers' awareness of the skills, knowledge, values, methods, and sensitivities needed to work effectively with clients, families, health care providers, and the community when working in end of life situations. According to the NASW Standards for Social Work Practice in Palliative and End of Life Care. The following standards are

Standard 1. Ethics and Values - Guide in practice

Standard 2. Knowledge - Theory in practice and skill

Standard 3. Assessment - Comprehensive Need Based Assessment

Standard 4. Intervention/Treatment Planning - Care Plans/Goals of Care

Standard 5. Attitude/Self-Awareness - ones own emotions, feelings, values

Standard 6. Empowerment and Advocacy - advocate for the needs, decisions, and rights of clients in palliative

Standard 7. Documentation - record all communication, co-ordination

Standard 8. Interdisciplinary Teamwork - co-ordinate with other professionals

Standard 9. Cultural Competence - understanding diverse groups

Standard 10. Continuing Education - professional development

Standard 11. Supervision, Leadership and Training – Research / Policy

3. Objectives of the practice (50 – 60 words)

The rationale behind conducting this training programme for the Social work students were as follows.

- There is a need to develop skills in palliative care and develop their expertise in the assessment and intervention with patients having terminal illness
- To take a leadership role within professional social work towards the development of research, education, training and administration.

From the above purported objectives it is imperative that Social Work is a profession that can meet the needs of individuals and families affected by life-limiting illness and end of life issues. The Social worker can be involved in the following processes

- Need based assessment & evaluation Demographic/ Socio Economic status Begin where the patient is – explore patients needs, strengths, resources and available support systems, assessing the social, psychosocial systems, culture and identify barriers in that affect quality of care giving
- Address psychosocial issues - Help patients and families to cope in crisis, grief, pain, suffering and death
- Educate patient and families by providing information about resources, advance care planning, care giving, supportive and rehabilitative care
- Integral part of Multi – Disciplinary team of professionals - in co-ordinating with the patients family and the in planning intervention care plans, goals of care, resource mobilization
- Advocacy for changes in health care policies by ensuring accessibility, availability and affordable palliative care services, development of education, training, administration, research and policy

4. The Practice (250 – 300 words)

The Tata Memorial Hospital as a part of their comprehensive care for cancer patients have been conducting "**Training Programme in Palliative Care**" for **Social Workers / Volunteers..** The rationale behind the training programme is to enhance the Quality of Care provided to the terminally ill persons, where “quality of life” is the main aim. Caring for these patients is a team approach with doctors, nurses, social workers, psychologists, occupational therapists, stoma care, volunteers and home care services net worked for maximum benefit. In this context the Training session was conducted for the post graduate second year students pursuing their degree in Social work and for faculty members of the college. The course was attended by approximately fifty five students. The details of the Training session are as follows

DETAILS OF THE TRAINING SESSION

Duration of Training: 5 Days (ie. 5 Saturdays)

Training Modules: A Total 10 lectures (2 modules ie. 2 Lectures every Saturday)

Pre & Post Test questionnaire will be given to students

Dates of Training:

- 25th July, 2015
- 1st August, 2015
- 8th August, 2015
- 15th August, 2015 - Holiday
- 22nd August, 2015
- 29th August, 2015
- 5th September, 2015

MODULES COVERED DURING THE TRAINING SESSION

The different modules covered during the Training session are as follows

- Module 1: Introduction to Palliative Care Introduction/ WHO Definition/ Components
- Module 2: Communication Skills reaking Bad News/ Stages of Grief/ 10 Steps Role Plays
- Module 3: Maintaining “Quality of life” for Patients and Families Care for Caregivers/ Burnout and Coping Skills
- Module 4: Symptom Assessment Symptom Assessment & Management/ Terminal Phase
- Module 5 & Module 6: Ethics & End of Life Care in Palliative Care Ethics in Palliative Care/ Principles Spirituality / Bereavement
- Module 7: Role of Home Care Services Hospital/ Hospice/ Home Visit
- Module 8: Role of Social Worker in Palliative Care Knowledge, Attitudes and Skills
- Working with Patient and Families Working with a multi – disciplinary team
- Supportive Care services/ Support Groups/ Volunteers
- Module 10: Pediatric Palliative Care Communication with Children/ Adolescents
- Diversion Therapies with children

Pre / Post – Test Questionnaire/ Role - plays

FIELD VISIT TO SHANTI AVEDNA:

The students also had a Field visit to Shanti Avedna a Hospice Centre .The Shanti Avedna Sadan is India’s first Hospice, an institution that takes care of the advanced terminally ill Cancer patients.

The aims of the Institution are:

- To care for the advanced and terminally ill Cancer patients and those cancer patients suffering from AIDs also.
- To offer this care to all who need it, irrespective of community caste or creed.
- To give preference to the poor and needy

- To give this care totally free of cost.
- To conduct research for palliation in advanced Cancer.

The students visited the Hospice centre and they also submitted an assignment reflecting their observations of the visit.

5. Obstacles faced if any and strategies adopted to overcome them.

The practice did not face any obstacles.

6. Impact of the practice.

Students and faculty members got an in-depth idea about the very specialized component of palliative care.

7. Resources required.

Resource Persons involved in the Training Programme

The Tata Memorial Hospital follows a Multi Disciplinary Approach and the Resource Persons were invited from the Respective Areas of Expertise. The Resource persons involved in the Training programme included Doctors, Psychiatrist, Social Workers, Nurses, and Volunteers.

Best Practice: TWO

Title of the Practice: Disaster Intervention - Damunagar, Kandivali - East, Mumbai

Objectives: To initiate intervention after the major fire following cylinder blasts in a slum community in North Mumbai.

Context: Damunagar is a slum community in North Mumbai inhabiting more than 5000 families, where cylinder blasts caused a big fire gutting most houses and belongings of the residents.

The Practice:

On 14th December 2015, about a week after the tragedy of cylinder blasts in Kandivali, all the MSW-II students went for need assessment to Damunagar. In this visit three students visited Anudatt School to check if the children had resumed attending classes. But it was found that children had lost everything from books to uniforms and bags. So far no help had reached the children in terms of providing educational material. The area was supplied with basic necessities such as clothes, vessels and food.

Later in a discussion with faculty members it was decided that the children were definitely in a state of trauma which they could not express. Hence it was decided that initially, attempts would be made to alleviate their stress/trauma and later to help them get the materials needed for school.

On 16th December, students conducted sessions including action songs and story-telling with children. The fantasy element of these activities was used to minimize painful thoughts.

The students also helped another donor collect data regarding the needs of the 215 children.

The next day the students were pleasantly surprised to see the children already gathered at the meeting point where the local youth had also voluntarily set up a microphone and speakers. This session included action songs, story-telling and craft and post-lunch, drawing and coloring.

The students also visited schools in the area: the Akurli Municipal School and Anudatt School. The students visited the Principals of the three sections of the school. The Marathi medium had 89

students affected by the tragedy, the Gujarati medium 59 and Hindi medium 17. The students then worked to raise funds for basic educational supports.

Work with Youth

A group was formed with ten youth of the community. Group sessions were also conducted with 25-30 youths and their individual profiles noted. A signature campaign was carried out on sanitation, security and health-related concerns. Group media like street plays and group songs were used to promote unity.

The major concerns faced by the youth included loss of income, negative impact on education - especially for those in Std. X or XII, lack of safety - especially for women, sanitation, and lack of food and legal documents.

The major achievement for the students of this group was linking the affected youth to the NSS Unit of Thakur College and Bombay Catholic Sabha.

Work with Women

The main concerns of the women in the community were lack of shelter and places for safekeeping important documents, robbery, trafficking, lack of uniforms and financial aid for children's books, commuting, loss of documents, and lack of water and sanitation. There was also an increase in domestic violence, liquor consumption, and health problems related to water.

The chawls visited were Khoppe, Bhimnagar and Anand Utsav Chawl.

Work with the Elderly

The needs of the affected elderly included medicines (for blood pressure, epilepsy, arthritis, eye problems, asthma, body ache, joint pain, cold, cough, fever, diabetes, gastronomical diseases, dengue, jaundice, swelling of feet, injuries due to fire), blankets, cotton sarees and assistance in making various documents.

The students contacted Silver Innings Foundation for needs assessment and for distribution of relief materials.

Additionally, the students also interacted with the government agencies on behalf of the slum dwellers after need assessment and to retrieve all government documents for all families from the respective offices.

The students distributed responsibilities among community members such as drafting letters to various government agencies and meeting the Collector, Mumbai Suburban and Bandra region.

Problems encountered:

This was a good learning experience for the students who took up the initiative on their own. They did not encounter any problems but were able to glean information about the ways in which such crisis situations affect communities.

Resources needed: The students raised the funds to initiate the intervention. Resources needed were play equipment, educational supports, lamps, supports for elderly, etc.

Contact details:

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