



Hospice at Home

Carlisle and North Lakeland



High Quality Care
and Support





The area we cover



The area in which our Clinical Service operates is 1,500 square miles and is a mix of urban and rural communities.

About Hospice at Home

Established in 1997, Hospice at Home Carlisle and North Lakeland, (Hospice at Home) is a registered charity providing high quality, palliative care and support to patients, family members and carers affected by life limiting illness.



Hospice at Home's core and largest service is its nursing team which consists of Registered Nurses and Healthcare Assistants who are skilled in providing nursing care and support in the last year of life and at the end of life.

Hospice at Home also has additional clinical services. Care and support may be provided by one or a combination of the services so that a person's needs may be more fully met. Services are free of charge to those who need them.

Care and support is individualised and aims to improve quality of life, facilitate a peaceful and dignified death and to support those who are bereaved. Hospice at Home's clinicians work closely with other health, social care and voluntary organisations who may also be involved in a person's care.

Hospice at Home's clinical services operate in rural and urban communities across North and East Cumbria, covering an area of 1,500 miles.





“You were the first to offer help at a time when we were struggling to cope, giving us the opportunity to enjoy for longer our time together. Knowing now how short that time would be, your help and support was our lifeline. ”

Nursing Care

Hospice at Home's nursing service provides high quality, individualised nursing care for adults aged eighteen years and over who have a life limiting illness.



Many people express the wish to die at home but difficult circumstances can sometimes lead to admission to hospital or other places of care. This can cause distress to both patients and their family members/carers. Hospice at Home endeavours to provide as much nursing care as possible, especially in the last few days of a patient's life, to support them in their wish to be cared for at home and prevent unwanted admission.

Nursing care can be provided over a period of hours, days, weeks or months and is based upon individual need. Members of the nursing team have expertise in providing palliative care, which includes physical, psychological, spiritual and emotional support, in the following ways;

- By supporting family members/carers to continue to care for the patient.
- By providing periods of time to enable family members and carers to have time to themselves. This might be during the day, overnight or a combination of the two.
- By providing nursing care at end of life.

Nursing care is delivered by Registered Nurses, Healthcare Assistants and trained volunteers.

When an individual is referred to the nursing service a member of the nursing team will visit them to introduce the service. In situations where this is not practical, a member of the team will contact the patient or family member/carer to agree a plan of care.

Hospice at Home nursing care complements the care provided by other services and is not a replacement for it. Whilst Hospice at Home always attempts to provide as much care as possible, there may be occasions when it is not entirely possible to provide all that is desired. In these instances, patients and family members/carers are informed of this as early as possible.

Referrals to the service may be made by patients, relatives, carers, friends and professionals **Contact telephone number 01228 608942**





“ Mum stayed in the home she loved and never wanted to leave, surrounded by pictures of her grandsons and supported by the love and care of those who were looking after her - it was exactly how she wanted it to be. ”



Occupational Therapy

Living independently is often very important to people. It may mean different things to different people; however for most, it is about being able to do the things that matter to them.



Occupational therapy aims to help patients live a productive and enjoyable life. This is achieved by maximising their ability to be as independent as possible, for as long as possible, in activities that are meaningful to them. Being active can have a positive effect on mood, well-being and quality of life.

When someone has a life-limiting illness, the illness, or sometimes the treatments for it, can affect the way in which they would usually complete activities of daily living. Occupational therapists work with people to identify their priorities. Following assessment, an agreed treatment plan which incorporates achievable goals is designed to promote continued independence in areas of life that are important to them.

As a result of their illness, people may experience symptoms, for example breathlessness or anxiety. Symptoms can also affect their ability to carry out daily tasks. The occupational therapist may teach techniques to enable the person to manage these symptoms more effectively. Learning techniques to manage symptoms can often enable people to be more active.

In some circumstances, equipment may also be useful; if this is the case the occupational therapist can advise and sometimes supply these items free of charge.

Referrals to the service may be made by patients, relatives, carers, friends and professionals **Contact telephone number 01228 608942**





“I was feeling tense and so welcomed having therapy. I had my arms massaged with a scented oil. It made me feel calm and relaxed.”



Complementary Therapy

Complementary therapies are offered by a team of qualified, experienced therapists using an holistic approach. Treatment and support are provided for patients, carers and those who are bereaved. Therapies can be used alongside medical treatment.



Using gentle touch and relaxation techniques calming responses and a sense of well-being are achieved. This may help people cope with their unique situation. Up to six sessions of therapy are usually offered at home or another agreed venue but if more are required this is discussed between the individual and the therapist.

The following therapies are offered and are supported by research evidence:

- **Massage** – Using a light touch (known as the “M” technique) and a progressive relaxation therapy (known as “HEARTS”).
- **Aromatherapy** – Carefully selected essential oils are blended to respond to individual symptoms, either softly massaged or inhaled to gain beneficial effects.
- **Reflextherapy** – Gentle massage and pressure working on specific points on the feet and sometimes hands.
- **Reiki** – A hands on or off the body therapy that is conducted without removing any clothing. The effects are nurturing and calming inducing a sense of deep relaxation.
- **Yoga** – A therapy that involves body breath and voice work tailored to the abilities and needs of the individual. This can be given on a one to one basis or in groups.

Referrals to the service may be made by patients, relatives, carers, friends and professionals **Contact telephone number 01228 608942**





“My right leg was very swollen but thanks to the Lymphoedema treatment it is now so much better. I can even wear my shoes when I go out and not a pair of slippers. The treatment made a significant difference to my mobility and lifestyle.”

Lymphoedema

Lymphoedema is a condition which causes chronic swelling, usually of the arm or leg. It is caused when the drainage systems from the tissues of the body fail in some way.



There are many causes of chronic swelling and initially, they need to be investigated by a doctor or other specialist to identify the cause and best treatment options. If it is felt that Lymphoedema treatments are appropriate a referral can then be made to the Lymphoedema Team.

Clinics are held in Dalston, Penrith and Wigton. Home visits are arranged for those who are housebound. During an initial consultation, a full assessment is undertaken to determine the impact the swelling has on the individual's day to day life. A treatment plan is then developed which may include some or all of the following:

- **Skin Care** – This helps to reduce the risk of complications such as infection.
- **Compression therapy** – This will be in the form of either compression bandaging or supportive hosiery (stockings, sleeves or wraps).
- **Advice regarding exercise and positioning of the limb** – To make the patient more comfortable.
- **Massage** – This may be daily self-massage or Manual Lymph Drainage (MLD) which is performed by us.
- **Lymph taping** – This uses a special kind of therapeutic tape that encourages movement of the fluid under the skin.
- **Physiotouch** – This works by using negative pressure (suction) over the tissues to help stimulate the lymphatic system to drain more effectively.

A lot of lymphoedema treatment is based around self-care and we will help patients to manage their condition with help from their carers if necessary.

Referrals can be made by GPs and other professionals.
Contact phone number: 01228 608942





“ We built a really good, trustful relationship. They made it so much easier and I can't thank them enough. ”

Family Support

Following the diagnosis of a life-limiting illness or following bereavement, the aim of the family support service is to provide those involved with an opportunity to explore their feelings in a safe and supportive way.



Our aim is to help people to find personal answers and to assist in any re-adjustment to enable them to move forward with life. Most support is provided on a one to one basis.

All our family support team members are fully trained and work within the National Bereavement Care Service Standards 2014. They receive support and ongoing training on a regular basis. Our service is for adults of 18 years and over but we can offer advice to younger people about suitable specialist services. Usually our support is based on hourly sessions within the home but alternative venues can be offered. We can also help to find services out of Cumbria for those people who live in other areas.

Family support is available to anyone, regardless of whether Hospice at Home is, or was, involved in the care. Perhaps the family support service can help through a difficult time – it is never too late to contact us.

Referrals to the service may be made by patients, relatives, carers, friends and professionals **Contact telephone number 01228 608942**





“The Befriending Service Volunteer’s presence in my home was so reassuring.”

Befriending Service

The Befriending Service is a complementary addition to Hospice at Home's clinical services. Befrienders are trained volunteers who are co-ordinated and managed via Hospice at Home's Nursing Service.



The Befriending Service supports;

- Individuals who are at least eighteen years of age who have a life limiting illness.
- Family members/carers who are at least eighteen years of age and are providing care/support for an adult who has a life limiting illness.

Befrienders work in the patient's home and also in the community undertaking a range of practical tasks with, or on behalf of, the patient and/or a family member/carer.

The length of time a Befriender supports someone is determined by their individual need. It may be as short as a couple of weeks or over a more extensive period of time.

Befriender duties may include;

- Providing periods of companionship for a patient within their home.
- Providing light meals/drinks during a period of companionship/respite.
- Shopping and other small errands.
- Providing transport/accompanying someone to an appointment.
- Accompanying and supporting an individual to access social and leisure activities.
- Dog walking.
- Spending time with a patient while a family member/carer has time to themselves.

The Befriending Service is designed to reduce isolation and loneliness, increase confidence and independence, thus promoting psychological, emotional and social well-being.

Anyone can make a referral to the Befriending Service
Contact phone number: 01228 608942





Did you know that patients are able to use a variety of Hospice at Home's clinical services?

Mary, an 85-year-old lady who had heart problems, was referred to the nursing service. During a visit to her home, Mary said that she wanted to stay at home for as long as possible but didn't want to die there. At the time of the visit, Mary was feeling quite well and didn't have any specific nursing needs, however, anxiety was preventing her from enjoying life. Mary agreed that a referral to the Complementary Therapy and Befriending Services might help her.

The Complementary Therapist provided a course of massage treatments to promote relaxation and well-being and a Befriending Service volunteer accompanied Mary so that she felt supported and confident going out. This meant that she was able to enjoy visiting a garden centre and having lunch in the café. Because Mary was able to go out her family were also able to have some time for themselves.

As the months passed by Mary became less well. At this point, she benefitted from visits from the nursing team to help her to get up in the morning and to get washed and dressed. She was also referred to the Occupational Therapist who worked with her to maintain her independence in activities that were important to her.

Fortunately, Mary's condition improved and she was well enough to be discharged from the Nursing and Occupational Therapy services. Support from the Befriending Service resumed and Mary was once again able to enjoy going out.

When Mary's condition declined for the final time, she was admitted to an in-patient unit for end of life care as was her wish. Having had the support of Hospice at Home's clinical teams Mary's achieved her goal of staying at home for as long as possible.

Tom, a 71-year-old man who had cancer, lived with his wife Audrey and son Barry. In June when Tom started to struggle to bathe and to get in and out of bed he agreed to a referral to the Occupational Therapist who was able to provide some helpful equipment. Although Tom was increasingly relying on Audrey for help, both were reluctant to accept any other support.

A year passed and Tom was confined to his home and felt isolated. He agreed to a Befriending Service volunteer visiting him once a fortnight for companionship. This also meant that Audrey and Barry could have time to themselves. Tom also agreed to see the Occupational Therapist again to look at ways of maintaining his independence. Leg swelling was affecting Tom's walking and so he also decided to see a member of the Lymphoedema Team who was able to treat the swelling and improve it. This meant he was able to walk more easily and felt more comfortable.

By December Tom's condition had deteriorated further and a course of treatment meant he no longer felt well enough to meet with the Befriending Service volunteer. However, the Occupational Therapist continued to monitor him and in March of the following year when he was less well, Tom agreed to support twice a day from the nursing team to help him to wash and dress. By May, Tom and Audrey felt that the time was right to accept nursing support overnight.

Tom died a few days later with his family and a nurse by his side. He had remained in control throughout his illness and had decided which services to have and when.

Please note: The names of those involved in these case studies have been changed to protect confidentiality





“

We saw at first hand the comfort, wisdom and care the nurses and carers gave, and were determined to do something to raise money for this wonderful cause. With this in mind we organised a fundraising challenge event. ”

How Hospice at Home is Supported



As a Charity, Hospice at Home relies on the kindness and generosity of the local community. Although some funding is received from the NHS, over 80% of running costs needs to be raised in order to ensure that this vital help is available when needed and remains free of charge to patients and their families.

There are many ways that members of the local community support Hospice at Home:

- **Attending an event** - A full and varied events calendar is offered, with occasions organised throughout the Clinical Services area.
- **With a cash gift** - Donations, grants and 'in memory' collections are generously given.
- **Giving unwanted items to the Charity's Shops** - Excellent quality donated goods raise vital funds in the Shops in Carlisle, Penrith, Wigton and Keswick (the Keswick Shop operates in conjunction with Hospice at Home West Cumbria).
- **Organising an event** - Local individuals, businesses and organisations are offered support to organise events in aid of Hospice at Home.
- **Volunteering time** - There are many volunteering opportunities available within the Clinical Services, Shops, Office Reception, Fundraising Office, and at events.
- **Taking part in a Challenge event** - Support is offered to anyone wishing to take on a challenge or sponsored event.
- **Leaving a lasting gift** - Legacy gifts, from those wishing to leave a lasting memory in their will, are much appreciated.
- **Making a regular contribution** - Funds pledged via payroll giving and our 'Sunflower Supporters' regular giving appeal can make a huge difference.
- **Corporate Support** - The Charity has an active Business Partners Scheme and welcome support from charity partnerships.
- **Raising Awareness on Social Media**

The Hospice at Home Facebook, Twitter, Instagram and LinkedIn pages give regular updates.



For further details please call the Fundraising Team on **01768 210719** or visit **www.hospiceathome.co.uk**





Hospice at Home

Carlisle and North Lakeland

Contact Us

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Keswick Shop: 01768 775830 keswickshop@hospiceathome.co.uk

(The Keswick Shop operates in conjunction with Hospice at Home West Cumbria)

Or write to:



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www.hospiceathome.co.uk

We welcome feedback on any of our services. To help us improve, please complete our Friends and Family Test at
www.hospiceathome.co.uk

To contact our care regulator, the Care Quality Commission, please visit their website
www.cqc.org.uk

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**Proud to Support Hospice at Home and help make
a difference in our local community.**

