



East Suffolk and
North Essex
NHS Foundation Trust

The Role of the INT in End-of-Life Care



What is an INT?

The Integrated Neighbourhood Team (INT) is a multi-agency team, committed to understanding the needs of local people ensuring that services are well co-ordinated around their needs. The INT will include a core range of generalist services from **community health, adult social care, primary care and mental health.**

District and Community Nurses

Occupational Therapists and Physiotherapists

Healthcare support workers

Social Workers

Independence and Well-being Practitioners

Social Prescribers



There is often a perception that providing end of life care is the role of specialist nurses or palliative care teams however this is not always the case.

Whilst the majority of end of life care is delivered by Nurses they are, of course, part of a team and they do not work in isolation in providing end of life care.



Skills

Communication skills – the ability to initiate or take part in conversations about death and dying

Assessment – the ability to assess people's needs, in partnership with the individual and those who are part of their lives, discuss them with everyone involved and make sure this is written down and shared

Coordination – All the care and treatment needs and wishes of the person who is dying are shared with everyone who might have contact with them. If possible one person. This is often the District Nurse.

Competence – all nurses should be competent to provide compassionate and sensitive end of life care with the support of the wider multi-disciplinary team. This is a fundamental nursing skill.



What we offer

- **Initial Support** – on receipt of referral, telephone or face to face introduction to patient and family
- **Follow up support** – increased frequency of contact as per patient/family needs. Telephone or face to face
- **Equipment provision** – same day or 4 hour delivery available if needed
- **Symptom control and management**
- **Fast Track assessment**
- **Onward referral** to CHC, Hospice, Marie Curie, REACT (OOHs care)



Best Practice in End of Life Care

- Early referral via CCC
- Early My Care Wishes discussion and plan in place
- Timely pre-emptive medication in home
- S1 Community administration charts in place
- All necessary equipment within the home
- Appropriate referrals to other agencies made

The Goal – people die in their preferred place, symptom free and with dignity surrounded by those closest to them

How Can you help

- The 4 E's
- Early referral to INT
- Early discussion with patient and family about wishes
- Early prescribing of end of life medication
- Early generation of administration chart on S1

