



Association for
Palliative Medicine
Of Great Britain and Ireland

APM Trainees' NEWSLETTER

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Hello all,

Welcome to the May issue of our trainee newsletter. We have some exciting things to highlight this month. Our post in focus is looking at all things research – find details on a new resource list to help you meeting your research competencies, and a new palliative care research directory to help you identify places you can get involved in research. Members of this committee and also academic leads nationwide are also looking at whether there is appetite for an APM Special Interest Forum for academic trainees in palliative care. Please fill in the questionnaire to register your interest.

Our articles in focus this month look at the use of subcutaneous furosemide in heart failure and iatrogenic suffering at the end of life – both interesting and thought-provoking articles.

We have also highlighted on our knowledge hub a new RCP initiative called Driving Change. The RCP are trying to develop a multi-specialty resource which the APM will be contributing too. This looks like it will be a really useful resource so do check it out.

Finally, there is a vacancy to join our amazing team so if you are interested, please see the advert below and do email me at l.ison@nhs.net if you have any questions about the role.

We'd love to hear from you and welcome your contributions to the APMT and upcoming newsletters:
apmtraineescommittee@gmail.com

Best wishes

Lucy
Chair APM trainees committee

Trainees' Committee Update

APMT Facebook Group and Twitter

If you are a new palliative medicine trainee or not yet in our Facebook group, please join to share educational events, discuss topics and for latest APMT news.

Follow us on Twitter **@APM_trainees**

OOP Trainees Facebook Group

The Facebook group that was formerly set up to help support APM shielding trainees has evolved into a support group for trainees going OOP (parental leave, OOPE/T, sick leave) – <https://www.facebook.com/groups/apmto>

If you would like to join, please request to join via Facebook and drop us a message with your name and region.

Website update – Wellbeing Resource List

Our website has been updated throughout this year. You'll find links to the curriculum including the Covid-amended curriculum.

The most recent addition is our Wellbeing Resource List compiled by our SAC team.

Find it here – <https://apmonline.org/trainees-committee/>

Committee Vacancy

We are looking for a Research and Ethics Representative to join the APM trainees committee. This role is an opportunity to represent trainees nationally and develop management and leadership experience.

If you would like to apply, please download the nomination form from the apm website: <https://apmonline.org/vacancies> and return to the APM Secretariat "Office",

office@compleat-online.co.uk, with a short statement of no more than 300 words. Your statement should describe what skills, experience and interest you would bring to the role. You can also ask for further information about the role if desired. Please send any queries to l.ison@nhs.net.

The trainee rep will:

- Represent the views of trainees to the newly formed Science and Ethics Committee.
- Attend Research and Ethics Committee meetings
- Actively contribute to group's work
- involvement with discussions at meetings
- e-mail correspondence regarding issues arising from, and between, meetings
- contribute to draft written responses to publications and to position statements

- Assist, with support from the committee, on the planning and delivery of the annual 2-day Ethics Study Event.

- Produce a report of activity sent to Trainees' Committee when requested/ prior to each meeting of the Trainees' Committee.

At present, reports of committee meeting or activity are not circulated to the wider membership but this may change.

- Attendance at Trainees' Committee meetings four times a year (three of which are conference calls).

Upcoming Events

The APM & PCRS Research Course (Autumn 2023)

Understanding and Applying Research Methods in Practice 28 September and 12 October

28 September and 12 October 2023

A joint APM and PCRS course on Understanding and Applying Research Methods in Practice, has been developed by the APM Research & Ethics Committee and the PCRS Executive Committee. The course will be facilitated by national leaders in Palliative and End of Life Care Research, and be held over 3 weeks, with pre-work being issued in Week 1, a virtual day held in Week 2 and an in-person day to finish the course.

Programme Overview

Week 1 Pre-work is issued 21 September

Week 2 Research Methodology and Appraising the Literature 28 September Virtual, MS Teams

Week 3 Research – Getting Started 12 October In-person, Leeds

Fees – Full Course

APM/PCRS Member Early Bird £150

Non-Member Early Bird £210

[The APM & PCRS Research Course \(Autumn 2023\) | APM Education Hub](#)

The new Palliative Medicine curriculum – preparing for ARCP

Date: 23 May 2023 Time: 13:00 - 14:00 Platform: Microsoft Teams

[Event Calendar | APM Education Hub](#)

Virtual Ethics

An APM Ethics & Research Committee Virtual Course
Virtual, over 4 weeks.

Fees

APM Member Early Bird £120

Non-Member Early Bird £145

**Early Bird Closes on 28 July 2023*

[Event Calendar | APM Education Hub](#)

Post in focus: Research resources

Meeting Your Research Competencies Resource List

The aim of this document is to highlight some of the research opportunities and resources available, though it is not exhaustive.

In terms of curriculum requirements, a flexible approach is needed. Collaboration is vital in research, and it might not be realistic for an individual trainee to do their own research projects from start to finish. The new curriculum (2022) has more emphasis on managing evidence and less emphasis on doing research.

This document covers: 1. Palliative care MSc 2. Recurring courses (some focusing on palliative care research, others more generic) 3. Societies/networks you can join (see Research Directory below also) 4. Other ways to evidence your research competencies 5. People you can approach 6. Further reading

A special thanks to SAC Academic Lead Consultant Dr Amy Gadoud, UKPRC Chair Dr Sarah Bowers and especially Dr Theresa Tran for their work on this.

Palliative Care Research Directory

The field of palliative care research has grown considerably in the last few decades with many networks and collaboratives. The APM and PCRS have collated a research directory with contact details of palliative care research institutions and representatives across the UK in order to improve access for clinicians and students in accessing information about local palliative care research centres. Collaboration is crucial in research, so we hope this resource will facilitate this.

If you spot any details that are incorrect, please do let us know via apmtraineescommittee@gmail.com.

A huge thanks to Dr Alice Rogers for her hard work on this.

Palliative Medicine Clinical Academics in Training Special Interest Forum (SIF)

The Association for Palliative Medicine (APM) Trainees' Committee and Academic Lead on the Specialty Advisory Committee are considering the creation of an APM Special Interest Forum (SIF) for academic trainees.

This SIF would be a resource for academic trainees in Palliative Medicine for example Academic Clinical Fellows, Clinical Lecturers or equivalent and for those undertaking PhDs in the UK. Potentially membership would extend to other pre-specialty academic trainees or GP trainees undertaking research in palliative care. ACF or equivalent posts would include doctors currently in internal medicine training in run-through palliative medicine ACF or equivalent posts.

It would be a forum for peer support, networking, sharing of work and any other ideas members would find beneficial. Please complete the following form if you feel this would be helpful.

[https://docs.google.com/forms/d/e/1FAIpQLSdKmeDZYc0Htem_nY-RXEM2SdfCUSZPJ6EqM7Xvo7IZuLM8bg/viewform?usp=share link](https://docs.google.com/forms/d/e/1FAIpQLSdKmeDZYc0Htem_nY-RXEM2SdfCUSZPJ6EqM7Xvo7IZuLM8bg/viewform?usp=share_link)

Journal Articles: In Focus

Subcutaneous furosemide in advanced heart failure: service improvement project

Birch F, Boam E, Parsons S, et al., *BMJ Supportive & Palliative Care* 2023;13:112-116.

Background:

Severe heart disease can result in poor quality of life and parenteral administration of loop diuretic is often needed.

Objective:

To assess clinical outcomes from episodes of care using subcutaneous continuous subcutaneous infusion of furosemide (CSCI-furosemide).

Methods:

Retrospective review of consecutive patients receiving CSCI-furosemide in community and hospice settings. Data included: New York Heart Association (NYHA) class, preferred place of care, goal of treatment, infusion-site reactions, and signs and symptoms of fluid retention (including weight and self-reported breathlessness).

Results:

116 people (men 86 (66%); mean age 79 years, range 49–97; NYHA class 3 (36/116, 31%) or 4 (80/116, 69%)) received 130 episodes of CSCI-furosemide (average duration 10 days, 1–49), over half in the patient's own home/care home (80/129, 61%) aiming to prevent hospital admission. 40/129 (31%) were managed in the hospice, and 9 (7.0%) in a community hospital.

Average daily furosemide dose was 125 mg (40–300 mg).

Nearly all patient episodes achieved the goal of care and supported home, care home or hospice care (119/130, 91.5%).

On average 4 kg in weight was lost over an average 10 days of infusion. Self-reported breathlessness reduced from 8.2 (± 1.9) to 5.2 (± 1.8). Adverse events: mainly mild skin reactions in 31/130 (24%) episodes, with 4/130 (3%) having localised skin infection.

Conclusions:

These preliminary data indicate that CSCI-furosemide is safe and effective for people with severe heart failure and is a promising alternative to intravenous infusion for those wishing to avoid otherwise unnecessary hospital admissions. An adequately powered RCT is indicated.

Iatrogenic suffering at the end of life: An ethnographic study

Green L, Capstick A, Oyebode J., Palliative Medicine. 2023;0(0).
doi:10.1177/02692163231170656

Background:

Across the developed West, a significant proportion of older people die in hospital. Failing to identify the EOL can inhibit the provision of compassionate palliative care. Further it has been argued that acute hospital settings are not well equipped to support dying well. A palliative approach involves recognising and alleviating suffering, but suffering is an intangible and contested phenomenon and little is known about people's actual experiences of suffering in this clinical setting.

Aim:

To examine the context of EOLC for older people in an acute hospital setting, particularly focusing on the experience of suffering.

Design:

Observational study, using an ethnographic approach. Over a period of 3 months in 2016, 186 hours of observations of clinical care were carried out. Data analysis was inductive and iterative. Reflexive analysis included observations and inferences from a participant-observer perspective.

Results:

Setting: 30-bedded acute older peoples' hospital ward in the UK. Participants included 11 patients and 33 members of staff and visitors.

Patient suffering was much broader than that related to their physical disease, as conveyed by several illustrative excerpts. Suffering also related to the ways in which patients interacted with others and their environment.

Delays in recognising and acknowledging dying (sometimes just hours or minutes before death) often led to treatments that were burdensome or futile, exacerbating patient suffering. Environmental factors in the clinical setting such as noise, smell and eating, defaecating and sleeping taking place in the same location, also exacerbated suffering, though staff appeared desensitised to such conditions. Finally, aspects of interpersonal interactions, such as ineffective or patronising communication, transactional interactions that lacked personalisation and meaningfulness, affected patient experience, particularly those with cognitive impairment.

Conclusion:

Acute care for older people in hospital was shaped by an overarching ideology of "rescue" which predicted and dictated the process of care. Suffering was not restricted to the direct experiences of the life-limiting illness but was also associated with the experience of receiving care in an acute hospital setting. Suffering needs to be viewed as a broader aspect of patient experience, and avoiding or minimising iatrogenic suffering is an essential component of compassionate care.

Knowledge Hub

Pay Protection for trainees on 2002 contract

Pay protection was due to come to an end in March 2023, however it has now been extended to

August 2025. It is expected this will make sure all trainees pay protection will then last until they CCT.

If you think you won't CCT by August 2025, and you are currently pay protected under the old contract, please get in touch with our BMA Rep, Dr Sarah Foot:

foot.sarah@gmail.com

Instructions for Accessing PCF CSCI Compatibility Database (via APM membership) as of February 2023

Compatibility charts have now moved to the PCF subscription which is available via APM membership.

There are several options available for use:

- The **PCF** (both hard copy and online versions) contains some basic compatibility charts <https://www.medicinescomplete.com/>
- **Palliative Care Adult Network Guidelines Plus** is the suggested reference in the PCF – <http://book.pallcare.info/> This does not require a login or password.
- The **PallCare Matters mobile app** – which is available for use on a desktop or phone — does require registration but is free and easy to use. This interactive resource explains the CSCI compatibilities in more detail and allows for submission of reports – <http://m.pallcare.info>
- A **compatibility book** on the ward, if available. However, this is only as current as the day of publication.

Please see the attached document below for a step-by-step guide –

[**PCF CSCI Compatibility Database Guide - Feb 2023.docx**](#)

Palliative Care Formulary Online

As of 2020, full APM members (including reduced subscription) have access to the PCF Online through MedicinesComplete.

Access is via the APM website – <https://apmonline.org/>

Log in and click PCF via the Learning and Information tab.

Journal Access

The following journals can be accessed by members via the APM website:

- Palliative Medicine Journal
- BMJ Supportive & Palliative Care Journal
- EAPC Journal (at a reduced subscription rate)

Publications may also be available through the BMA website, for those with membership.

A list of these can be found at: <https://www.bma.org.uk/library/e-resources/e-journals>

COVID-19 Guidance

The APM has issued guidance regarding COVID-19 and Palliative, End of Life and Bereavement Care.

The latest guidance can be found on the website at the bottom of the homepage

<https://apmonline.org/>

RCP Medical Care – Driving Change

The new RCP [Medical Care - Driving Change](#) website is a multidisciplinary resource which features a wealth of engaging, multimedia content that aims to support education and sustainable improvements in healthcare and patient outcomes.

Its cross-speciality nature means it is of value for all, and they are hoping to put a spotlight on palliative and EOLC in the coming months.

Contact the Committee

We're here to support trainees and our development.

Contact us:

- Via your regional APM Trainees' Rep
- On Twitter @apm_trainees
- On our Facebook page 'APM Trainees'
- Email us directly via apmtraineescommittee@gmail.com



The APM is the world's largest representative body for doctors practicing or interested in palliative medicine. If you are not already a member join today! <https://apmonline.org/join-pages/join/>

Please remember to upgrade your membership to 'full membership' on commencement of your first consultant post. This can be done by emailing the APM at office@compleat-online.co.uk

This newsletter is for trainees by trainees. We want to hear from you, allow trainees to connect nationally and have a platform to feature your contributions in the upcoming newsletters.

Please contact us at apmtraineescommittee@gmail.com to contribute with a feature article, a journal summary or trainee reflection.