



Education Newsletter



March 2024

Training

Paediatric Palliative Care Education Project

Delivery of these modules continues throughout March at for Derian staff as per the schedule emailed out. All of these modules are available to the care team and non-clinical staff can access the ones relevant to their role. Please email clinical.education@derianhouse.co.uk for more information and dates

The Education team have been continuing to train local trainers and lots of health and social care staff across Lancashire, South Cumbria and Manchester training at venues in Barrow, Lancaster, Blackpool, Preston, Chorley, Blackburn and here at Derian House. We also hosted a paediatric palliative care training day created especially for play specialists from Wigan, Blackburn and Morecambe Bay, which received excellent feedback.



LSC Paediatric Palliative Care E-Learning now LIVE

Exciting news! The Paediatric Palliative Elearning is now available and ready to be completed online at your own pace. You can email the education team for priority access to the learning platform

Elearning and competencies

Thank you for completing elearning and sending us your reports. Compliance for Elearning is currently 91% and competencies are at 91%. We have emailed care team staff with individual Training compliance information to let you know where you're up to and what is left to be completed for 2024. Remember it is your responsibility to ensure you keep your competencies up to date so please book some time with the champions, ACPs, team leaders or clinical educators to get yours signed off for the year.

ACP awareness Training

In February, the education team presented an Advanced Care Plan awareness training session via MStems with over 160 attendees! The next date is April 8th at 13:30pm for Derian care team staff to access with other professionals across the UK. Please email clinical.education@derianhouse.co.uk if you would like to attend and for the teams link



Professionals Day

The next professional's day will be on the 12th March where we are expecting 18 health and social care professionals across the region who want to find out more about Derian house, the services we provide and the referral process.

Mouthcare Matters Training

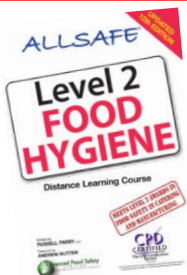
Lesley Redman from PIS Healthcare in came in to Derian on Friday 9th February to deliver Oral Care Training for staff.

This training highlighted the importance of mouth care at all times and in particular, at the end of life and supporting people to maintain a clean and comfortable mouth is essential component to personal care.

The next training date is April 2nd at 10am and will be held in the Clinical Skills Lab. Please try to attend and contact the education team if you are interested joining the mouth care clinical champion team. Use the QR code to access a great training video resource



Food Allergen and Food Hygiene Training



For the staff who work in house that may on occasion serve, cook or bake any foods for cyps and families including nurses, csw's, wellbeing and play and some of the family support team- you will need to complete Food allergen training (see your emails for the specific modules) and Food hygiene level 2. If you are required to complete this training you will have been emailed your individual login, instructions on how to complete the training and what evidence we will need for your records.

Students

Sam and Sian continue their placements with us and will be here until April. We will meet two new Learning disability students on 18th March who are joining us from Edge Hill called Adele and Matilda. Please give them a warm Derian welcome.

We hosted our second student day in February, where we met 16 students from UCLAN, Edgehill, Cumbria and Bolton and taught them about Palliative and hospice care. Thank you to our speakers, the students really appreciated listening to the work you do and the different services offered at Derian House.

The next Student day will be on the 12th April! We would love it if you can come along!

Student Nursing Times Awards



FINALIST

This is great recognition for all staff who support, teach and rolemodel the Derian House values to the students that come to us for placements. Tanya & Alison will be heading to London on the 18th March to present why they believe Derian should win. The award ceremony is on April 26th. Good luck!

Congratulations everyone! Derian House has been shortlisted for the Student Nursing Times awards for the community Placement of the year category.





Education Newsletter



Focus of the Month: Medicated Transdermal Patches

Transdermal medication patches offer a non-invasive and convenient method for administration of medication. Once the patch is applied to the skin, they deliver a consistent amount of medication, which is absorbed through the skin through natural diffusion. The patches continue to release medication until fully absorbed or the patch is removed and the time this takes varies from patch to patch therefore Manufacturer's instructions should **always** be followed.



How to apply medicinal patches

Choose an appropriate area to apply the patch; a hairless area or the body such as the outer part of the arm or upper part of the chest or back is best. The selected area must not have any cuts, rashes or scars. Always ensure the area is clean, free from moisturisers or creams and completely dry before applying the patch. Always ensure old patches are removed before applying a new one and alternate areas for each application to prevent skin breakdown.

How to document patches

Staff have a responsibility to make themselves aware of the location of any patches on a child they are looking by checking the body map in the care plan and discussing the location and when it needs changing on handover. You should check the patch position regularly to ensure proper placement for appropriate administration of the medication and to check that the patch has not moved or come off.

Use the body map to mark and document the location, name of the patch and the date it was administered (see image)

Personal Budgets	
Care Allocations	
Short Notice Preferences	
Bed Types	

Marks	
Acne	Red mark
Acne	Red mark
Acne	Gastrostomy site
Acne	red mark from previous fentanyl patch
Patch	Fentanyl patch - 22/02/24



Examples of patches

- **Hormonal:** HRT, oestrogen, testosterone, contraception
- **Smoking Cessation:** nicotine
- **Pain relief:** fentanyl, morphine
- **Angina relief:** Nitroglycerine
- **Vitamin patches:** Vitamin C
- **Antiemetic:** Hyoscine Hydrobromide
- **Antipsychotic:** Asenapine
- **ADHD:** Methylphenidate

Hyoscine Hydrobromide

Transdermal Patches

Why is it Used?

Hyoscine hydrobromide is a medicine commonly used as an antiemetic (antisickness) to prevent and treat symptoms of motion sickness such as nausea, vomiting and dizziness.

It is an antimuscarinic with smooth muscle relaxant and antisecretory properties which means it can also be used to help treat excessive salivation, sweating, upper airway secretions and bowel colic pain.

We most commonly see it used in the hospice for babies, children and young people to manage excessive respiratory secretions. The medication works by thickening up secretions and can be used in conjunction with non-pharmalogical approaches to secretion management such as suctioning, percussion and postural drainage- always read and follow the child or young person's care plan.

Dosage

By Transdermal application;

Excessive respiratory secretions;

- Child 1 month–2 years - 250 micrograms every 72 hours, dose equates to a quarter patch.
- Child 3–9 years - 500 micrograms every 72 hours, dose equates to a half patch.
- Child 10–17 years - 1 mg every 72 hours, dose equates to one patch.

Motion sickness

- Child 10–17 years - Apply 1 patch, apply behind ear 5–6 hours before journey, then apply 1 patch after 72 hours if required, remove old patch and site replacement patch behind the other ear.



Contraindications Angle-closure glaucoma; gastro-intestinal obstruction; intestinal atony; myasthenia gravis; paralytic ileus; pyloric stenosis; severe ulcerative colitis; significant bladder outflow obstruction; toxic mega colon; urinary retention

Side effects Common side effects - Eye disorders; eyelid irritation. Rare side effects include - concentration impaired; glaucoma; hallucinations; memory impairment; restlessness. Frequency not known - Balance impaired; delirium; hyperthermia; respiratory paralysis; seizure.

Interactions Both Baclofen and Hyoscine can cause antimuscarinic effects. Both Hyoscine and Chlorphenamine can cause antimuscarinic effects.

Caution Transdermal patches contain metal in the backing and must be removed before MRI scanning to avoid burns.

References:

Association for Paediatric Palliative Medicine Formulary: 6th Edition 2024 (Hyoscine Hydrobromide) page 109

NICE (2024) BNFC. Hyoscine Hydrobromide [Hyoscine hydrobromide](#) | Drugs | BNFC | NICE