PRACTICE PROFILE



Area		Location		Contact Number
Wellow Unit		Isle of Wight NHS Trust St Marys Hospital Parkhurst Road Newport Isle of Wight PO30 5TG		01983 822099 ext. 3614
Directorate Ur	nplanned		Review of Profile due	March 2026
Professional Lead Sh	Shane Moody		Department Manager	Trish Reeves Ward Sister
Clinical Education Team Link	Lead		Stuart Egan	
Education Lead			Trish Reeves Ward Sister / Sarah Marriott-Hallam Deputy Sister	
HEI Representative			Academic Assessor	
HEI's using this Learning Env	vironment		Open University, Southampton University, Portsmouth University	
HEI's using this Learning Environment Learning Environment Mission Statement		Wellow Unit is a small, designated area currently situated temporarily within Compton Ward, as of August 2023. We care for people within their last hours to week of life and have three designated side rooms plus a family room. We have the potential to flex up to 6 beds depending upon the capacity within Compton Ward. Our focus is very much on person centred care; enabling individuals to die with comfort and dignity supported by those closest to them. We support loved ones with pre-bereavement care and follow up with our families post bereavement at 1 week and then 6 weeks after their loved one has died, making onward referrals to specialist bereavement support where necessary. We provide highly compassionate, holistic care to all individuals regardless of their own personal situations, and our aim is to allow patients to die comfortably within our care with their most important needs met. There is a strong emphasis on providing effective symptom control, administering medication via continuous syringe driver, sometimes with periodic infusions and with 'as required' medications Our Unit has strong links with the IPET, bereavement, chaplaincy and hospice teams, and as a learning environment will provide students with the fundamentals in compassionate and respectful end of life care.		

LEARNING ENVIRONMENT PROFILE

EL/MINING ENVINORMENT FROMEE		
General Information	https://www.iow.nhs.uk/Working-With-Us/learning-zone/student-welcome.htm	
Description of Service and Client Group	Wellow Unit is an End of Life Care Unit to help support people as they approach the end of their lives.	
Description of related services & Client group	IPET, Chaplaincy, Bereavement and Mortuary team, CCOS, Mountbatten Hospice	

LEARNER INFORMATION

Work Patterns	Shift patterns are –	
	Earlies 730am to 330pm	
	Lates 12md to 8pm	
	Long days 730am to 8pm	
	Mid Shift-10am-6pm	
	Nights 730pm to 8am	
	We provide an in-patient service 7 days a week, 24 hours per day	
Dress Code	Trust policy	
	https://www.iow.nhs.uk/Downloads/Policies/Dress%20Code%20and%20Uniform%20policy%20.pdf	
Induction/Orientation	Trust induction provided by the Clinical Education Team. Local induction will be completed on the Unit.	
programme		
Staff / rest room facilities	We do not have changing facilities on Wellow Unit and would ask students to change for their shift in the	
	onsite changing rooms.	

	We also do not have a designated area specifically for staff breaks, but when available meals can be had in our relative's room, if appropriate. If not, available we can use the Compton Ward staff area., or go to the
	canteen.
	We would advise students to bring a packed lunch where possible, we have a fridge and tea / coffee
	making facilities, we also have microwave facilities on the unit.
Expectations during	Learners are expected to engage and be involved with all ward-based activities, depending on their level of
placement	experience, training, and knowledge. Learners are expected to act professionally at all times and adhere to
	professional and organisational standards such as Equality and Diversity. It is expected that the learner
	raises concerns and good practise to the ward sister.

LEARNING OPPORTUNITIES & RESOURCES	S
Recommended reading/Websites	End of life care link on the intranet site Isle of Wight Palliative Care Symptom Control Guidelines – can be downloaded via www.mountbatten.org.uk Wellow Unit SOP Care After Death Policy via St Marys intranet Priorities of Care document NICE guidelines for end-of-life care
Common Abbreviations	EOL – end of life POC – Priorities of Care document which we use on the unit DNACPR – do not attempt cardio pulmonary resuscitation OSC – optimal supportive care PRN – 'as required' medications Sub cut – subcutaneous JIC – Just in Case drugs – usually morphine / opiate for pain or respiratory distress, Midazolam for anxiety / distress, Levomepromazine for nausea or in higher doses for terminal restlessness, Hyoscine for increased upper respiratory secretions or abdominal colic pain, Lorazepam used sub lingually (under the tongue) for anxiety or breathlessness in those people who are still alert enough to take this orally. TTOS – if someone is going home to die, we need to obtain medications for them 'to take out' ACP – anticipatory care plan – often takes into account a person's wishes not to be re- admitted to hospital or to haver active treatment ie 'to be kept comfortable in a place of their choosing' Fast Track – funding for a package of care either at home or in a nursing home for someone considered to be within their last weeks of life CA – cancer COPD – Chronic obstructive pulmonary disease PE – pulmonary embolism RF – renal failure ALD – alcoholic liver disease RIP – rest in peace, which is often written in the notes after someone has died. RGN – registered general nurse HCA – health care assistant CN – consultant nurse CNS – Clinical nurse specialist IPET – Integrated Palliative and End of Life Team CCOS – Critical care outreach service
Specific learning opportunities	Assessing the holistic needs of a dying patient and the people deemed important to them and putting in place a care plan to enable them to meet their needs symptom control Use of syringe drivers, administration of drugs sub-cutaneously Care of the dying person Pre-bereavement care for loved ones Last offices /care after death Mortuary / bereavement team Working with the IPET team Chaplaincy / spiritual care
Specific areas of expertise/clinical skills	Care of the dying

	Symptom control
	Administration of controlled drugs
	Sub- cutaneous route of administration
	Syringe drivers
	Verification of death
	Assessment of Psychosocial needs – patients and visitors
Common Assessments /	Priorities of Care
Interventions/Care pathways	
Models of practice experience e.g. Hub &	Close working with IPET, chaplaincy and mortuary / bereavement team
Spoke, Patient Journeys	

MULTIAGENCY LEARNING OPPORTUNITIES / RESOURCES

Multiprofessional learners accessing the	
environment	
Professionals working in the environment	Consultant nurse, Integrated Palliative & End of Life Team (IPET), Critical Care Outreach
	Service (CCOS), Doctors, Infection Prevention and Control Team, Tissue Viability
Opportunities to meet EU directives	Paediatric: possibly/ occasionally
(Nursing)	Obstetric/maternity: never
	Mental Health: possibly/occasionally
	Learning Disabilities: possibly/occasionally