

Resources Page

Glasgow University Deep End Work

Useful information and resources about improving relationships with patients living in socio-economically deprived areas are available at [University of Glasgow - Schools - School of Health & Wellbeing - Research - General Practice and Primary Care - The Scottish Deep End Project - Resources for practices](#)

For learning disability

Diabetes UK. Improving care for people with diabetes and a learning disability. Available at: <https://www.diabetes.org.uk/for-professionals/improving-care/good-practice/for-people-with-learning-disability>

Information for patients, relatives and carers on Learning Disabilities and Dementia
[Learning disabilities and dementia - Dementia UK](#)

Training for Healthcare Professionals of caring for people with Learning Disabilities
Essentials of Learning Disability NES Training available at: <https://learn.nes.nhs.scot/75162>

Palliative care for homeless people

A useful link: Caring for people experiencing homelessness in palliative care - <https://www.mariecurie.org.uk/professionals/palliative-care-knowledge-zone/homelessness>

Mitigating Health Inequalities in Generalist Palliative Care

Reducing health inequalities in generalist palliative care requires a comprehensive approach that goes beyond traditional clinical interventions to address the social determinants of health influencing outcomes. Primary care teams should shift from reactive to proactive care models, identifying and addressing the specific needs and barriers faced by diverse populations. Clinicians must develop skills in community engagement, trauma-informed care, sensitive communication about financial hardship, and parallel planning that respects patient autonomy while managing uncertainty.

Proactive Identification of Patients

SPICT: [Supportive and Palliative Care Indicators Tool](#) enables clinicians to systematically identify patients who may benefit from palliative care and not waiting for a terminal illness diagnosis.

The development of [SPICT4ALL-2025](#), written in plain language, makes this process more accessible to non-clinicians.

The "Surprise Question" is a widely used screening tool in palliative care designed to help healthcare professionals identify patients who may benefit from palliative care services. The Surprise Question (SQ) is phrased as: "Would I be surprised if this patient died within 12 months?" A "No" response suggests high risk of mortality and prompts:

Advance care planning discussions

Referrals to palliative care services

Consideration of end-of-life care needs

The SQ emphasizes clinical judgment and provides a practical, intuitive method for identifying patients needing additional support.

Addressing Financial Challenges

Discussing financial hardship can be difficult for both professionals and individuals. Conversations about money may feel intrusive, while stigma can make patients reluctant to share their struggles, causing embarrassment or shame. Open, non-stigmatizing discussions about finances can relieve stress and improve quality of life for people approaching the end of life.

The **Dying in the Margins** initiative developed resources to guide professionals in addressing financial hardship sensitively.

Framework for Financial Conversations: *Money Matters At The End of Life* - <https://eprints.gla.ac.uk/331620/2/331620.pdf> provides practical guidance for supporting conversations about financial challenges.

Future Care Planning

Implementing systematic future care planning processes enables patients to express their preferences and values while maintaining hope and agency. This approach is particularly valuable for vulnerable populations who may have limited experience with healthcare decision-making or who may distrust healthcare systems.

Activity Worksheet – Consider using this worksheet. This activity sheet aims to help you to explore the benefits of palliative care input - <https://www.homelesspalliativecare.com/wp-content/uploads/2018/09/Exploring-the-benefits-of-palliative-care.pdf>

Parallel Planning; A Different Approach

Traditional palliative care models often focus primarily on end-of-life planning, which can create barriers for patients who are not ready to confront mortality or whose prognosis remains uncertain. The concept of parallel planning offers an alternative approach that acknowledges uncertainty while promoting well-being, dignity, and choice.

Parallel Planning Framework

This approach involves simultaneously planning for multiple potential outcomes - hoping for the best while planning for various possibilities. Rather than focusing conversations exclusively on death and dying, parallel planning shifts attention towards present needs and future possibilities, making discussions more accessible and less threatening for patients.

Trauma Informed Person – Centred Care

Addressing health inequalities requires recognition that many patients from disadvantaged backgrounds may have experienced trauma or discrimination within healthcare systems. This necessitates a trauma-informed approach that prioritises safety, trustworthiness, and cultural humility.