



**COMPLEMENTARY THERAPY**

**“TOUCH THERAPEUTICS” SERVICE**

**OPERATIONAL POLICY**



Time for Hands-on therapy given with Empathy, promoting Relaxation easily Achievable,  
Pleasurable and Enjoyable, Using Touch Intuitively and Creatively enhancing the Sensory experience.

1. Purpose of the policy

- To offer service user's a core programme of touch therapies appropriately, in a safe, competent and professional way
- To maintain the service user's safety, dignity and well-being when accessing Touch Therapeutics
- To formalise the delivery of the touch therapies service both as an outpatient clinic and inpatient
- To ensure consistency with practice and approach
- To provide a baseline for the provision, management and continuing development of the touch therapies service

2. Philosophy behind T.T.

Emphasis has changed around the world from treating Palliative care patients with complementary therapy as an intervention for symptom control to one of compassionate and caring touch to positively influence stress release and promote relaxation only.

The focus is on a more Humanistic and Empathetic approach with the goal being one of Distraction therapy to aid the Psychological/Emotional and Spiritual well-being of the patient.

The therapy is touch based and utilises the research from around the world into how touch affects human beings from birth to death including the excellent studies of Dr Tiffany Field Psychologist at the Touch Research Institute in USA, and the work of Dr Ashley Montague Psychology researcher.

## Our vision

Lindsey Lodge Hospice provides specialist palliative care to individuals with life-limiting condition's and supports their family and carers during illness and into the bereavement period.

We aim to further develop the highest quality of care in North Lincolnshire, meet individual needs and facilitate choice.

We aspire to be a responsive and innovative organisation and become a centre of excellence with our service users at the heart of all we do.

## Our mission

We will ensure income generated from the local area is focused on our priorities of providing a safe and welcoming environment along with offering physical, emotional, social and spiritual support to patients, their families and carers.

We will invest in our workforce, nurture creativity and support empowerment in order to generate ideas that will deliver high standards and good practices.

Partnerships and collaborations will be encouraged, forming trusting relationships in the interests of our patients and staff.

## Our values

**'Always there to care'**

Caring, compassionate, facilitating choice

Acting with professionalism and respect

Responsive to the needs of our patients, families and carers

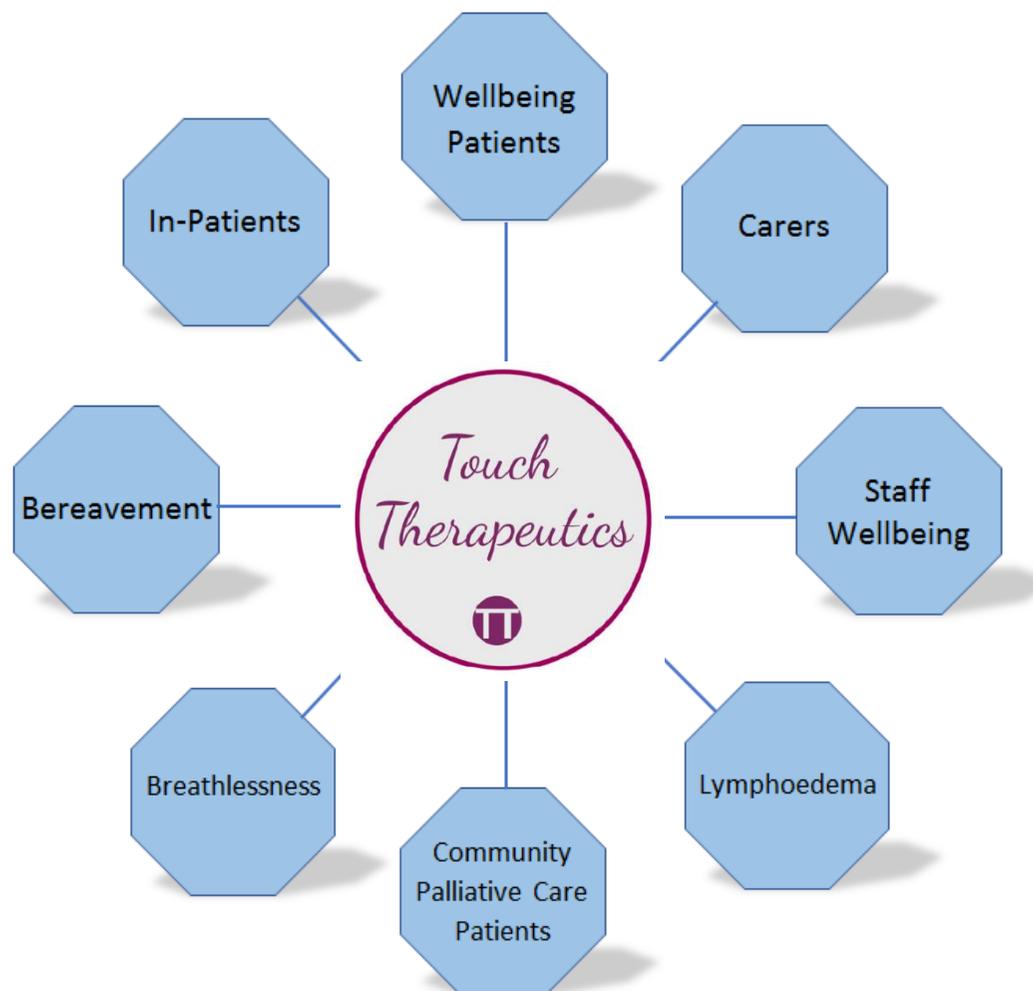
Excellence in all that we do

### 3. Model of care

The service offers a holistic approach to caring for those with specialist palliative needs providing complementary and adjunctive therapy integrated into Hospice services mainly as an outpatient clinic. The service will be provided for 'patients' (those who access the hospice in-patient unit and wellbeing centre day care) and 'service users' (those deemed external to the hospice, for example, the public).

Emphasis of Touch Therapeutics is to be more inclusive for all patients' needs, underpinning the more psychological and emotional needs of the service user, helping them to release stress and return to more positive levels of coping with their own journey. Relief of any physical symptoms is not the primary purpose and where symptoms are relieved due to stress release is an added bonus.

Figure 1.



#### 4. Definitions

Touch Therapeutics (TT) is the combining of safe and appropriate touch therapy with relaxation and visualisation techniques. These methods are taken from the use of holistic complementary therapies which are used in a supporting role to specialised holistic palliative care settings both medical and nursing.

The core programme of TT consists of the following methods; Slow stroke (over the clothes) massage, hand and or foot massage, relaxation/visualisation therapy, Reiki and the use of essential oils, breathing techniques to promote relaxation and relieve stressful feelings.

All other complementary therapies are defined as extensions to the core programme.

All other modalities of complementary therapies must be delivered by suitably qualified, registered personnel in that particular therapy. They will have independent insurance and/or be covered by Lindsey Lodge Hospice indemnity policy.

#### 5. Scope

This operational policy refers to;

- TT at Lindsey Lodge Hospice, being provided for patients known to the hospice alongside staff, volunteers and the wider public - particular focus on those individuals diagnosed with a life limiting condition (as highlighted in Figure 1).
- The roles and responsibilities of different individuals, for example, therapies Co-ordinator, health professionals and employed or voluntary staff who wish to help deliver the skills of TT as a part of or as an extension of their role.
- Paid and voluntary staff who are already qualified complementary therapists, who are registered with a professional body and appropriately insured to help deliver TT.
- Non-qualified staff both paid and voluntary and are trained in-house to a safe and appropriate level to deliver TT. These staff are covered by hospice indemnity and trained and supervised by the therapies co-ordinator.

#### 6. Structure

The complementary therapy co-ordinator has designed and implemented TT specifically for us within Lindsey Lodge Hospice. The complementary therapy co-ordinator is a qualified therapist in more than one therapy modality and is responsible for the delivery and daily management of the TT programme and overseer of all other therapy modalities.

There are 3 key practitioner roles that are able to deliver the TT programme, these include:

#### Accountable Practitioner

In the practice of complementary therapy;

- Relevant complementary therapy and /or health care qualifications and experience in their field of practice
- Has successfully completed a recognised course or training in their field to at least diploma level
- Is registered with a suitable professional organisation/body that issues a code of conduct and professional ethics.
- Is self-insured
- If Reiki, has successfully completed Practitioner level 1 or level 2 minimum
- Is prepared to maintain and develop knowledge and improve skills through practice and appropriate postgraduate study

#### Associate Practitioner

Staff members (paid or voluntary) who have a specific interest in complementary therapy. They will receive in-house training and administer TT under supervision, and guidance of the therapies co-ordinator. Clinical/conventional staff who wish to use the skills of TT as an extension of their role have permission to practise from their line manager and agreement of the complementary therapy co-ordinator.

#### Student Practitioner

Students may seek to advance their skills within Lindsey Lodge Hospice as a part of a therapy training programme. Safety to deliver TT following this is to the discretion of the complementary therapy co-ordinator and student mentor. Each session delivered by the student will be supervised by an accountable practitioner and/or complementary therapy co-ordinator.

#### 7. Access

Service users and patients can be referred for complementary therapy and/or be referred by a member of the clinical team through completion of a referral form. All referrals are triaged by the complementary therapy co-ordinator and/or a key worker. The service user and/or patient will be offered a course of treatment and a follow up review will be completed by the complementary therapy co-ordinator and/or key worker. Written information about TT will be provided for the service user/patient and their carer about the TT programme, including information around after care. In the event of increased demand, service users who access the hospice for symptom management will be prioritised for appointments.

## 8. Service user management

TT is offered to service users (inclusive of staff and volunteers) as an 'outpatient' clinic by appointment and is charged at an hourly rate per initial assessment and follow up therapy. Patients who access the inpatient unit or wellbeing centre day care will not be charged and are able to access complementary therapy during their attendance (as capacity allows).

All service users (inclusive of staff and volunteers)/patients will be assessed at first appointment, and when possible a taster session of therapy to be included. Therapy will be specifically and individually prescribed for the individual by the attending assessor. All therapy will be documented in the patients' system notes which are regularly audited - in the case of staff; a paper record will be maintained and kept confidential.

As necessary, consultation with hospice physicians or named nurses will be made to ensure therapy does not contra-indicate medical treatment. Regular review and evaluation of patient/service user satisfaction will be implemented to ensure efficacy and that guidelines are being met.

## 9. Staff Accountability and Responsibility

All staff are expected to adhere to their own professional body regulators alongside Lindsey Lodge Hospice policy and guidelines in relation to the delivery of the TT programme. If already accessing services within Lindsey Lodge Hospice (inpatient unit and the wellbeing centre day care unit), it is essential the individuals named nurse is aware the patient is accessing complementary therapy. It is anticipated that staff will work autonomously, however it is essential support is accessed by the complementary therapy co-ordinator and/or key worker if required to reduce risk of harm.

A register of accountable and associate practitioners and their qualifications is held by the volunteer services manager, complementary therapy co-ordinator and the clinical trainer for reference. Indemnity insurance is held by the hospice for co-operating staff and Private Indemnity Insurance will be held by those self-employed.

It is essential volunteers attend regular in-house training and refresher training relevant to their role in delivering complementary therapy, inclusive of regular supervision/monitoring. Failure to attend these sessions will result in cease of practice.

## 10. Documentation

It is essential service users understand the nature of complementary therapy and the impact sessions can have on their physical and psychological wellbeing. Consent must be obtained by the service user and/or their carer prior to completion of therapy. If there is any doubt with regard to the service users' mental capacity, the appropriate two stage capacity assessment must be considered to be completed prior to any therapy delivery.

In relation record keeping, it is advised that;

- All therapies should be clearly written in black ink on the patient's paper notes
- All practitioners will be responsible for documenting clearly the care given, and evaluating outcomes of the therapy, marking in red any adverse reactions and signing for this on the patient's record form
- All practitioners are responsible for reporting issues of concern to the complementary therapy co-ordinator, wellbeing manager, nursing and medical staff as appropriate
- All therapists are responsible for documenting therapy sessions on patients' notes via systmone

## 10. Confidentiality

All staff administering complementary therapy, inclusive of the TT programme, should adhere to the Lindsey Lodge Hospice policy on patient confidentiality in order to maintain service user privacy and dignity.

## 11. Resources

In collaboration with the Lindsey Lodge Hospice clinical trainer, the TT programme will be delivered to both paid and voluntary staff as required. Time will be allocated by the complementary therapy co-ordinator to support regular recorded supervision of practitioners who are delivering complementary therapy, inclusive of the TT core programme.

The complementary therapy co-ordinator is responsible for the replenishment and storage of Essential Oils - this is in line with COSHH guidance; and ensuring staff have access to appropriate equipment to deliver TT.

Please note: Essential oil mixes and blends are to be prescribed by a qualified aromatherapist for those being used on a service user's skin. Associate practitioners may have access to an aroma stone with a few drops of fragrance as required when practising TT to aid relaxation.

## 12. References

Russo, H (2006) Shining Lights, A practical guide to integrating health practice

NMC The Code 2015

Tavares, M (2003) National Guidelines for the use of Complementary Therapies in Supportive and Palliative Care

Tavares, M (2004) Guide for Writing Policies, Procedures and Protocols

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