



Death Education For Palliative Psychology

Palliative Care: Where, When and How

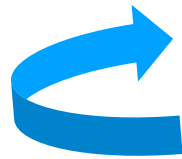
Concept

This second module will address the definition of Palliative Care (PC), how, where and when it may occur as well as the psychologists' role in palliative care. History of PC and the current context, objectives and ethical fundamentals will be discussed.

Competences to be acquired

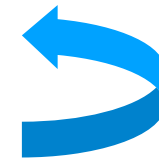
- Knowing basic psychological aspects of the patient-centered care plan VS an illness-centered care plan, in Palliative Care field.
- Knowing definitions and fundamental principles of Palliative Care
- Knowing the different settings in Palliative Care (hospice, hospital, home-care etc.)
- Knowing the role of the psychologist in the palliative care team (Palliative Psychology)

What's happening?



GLOBAL POPULATION IS INCREASINGLY AGING

**INCREASED PREVALENCE OF NON-COMMUNICABLE
DISEASES AND THE PERSISTENCE OF OTHER CHRONIC
AND INFECTIOUS DISEASES**



The EAPC Atlas estimates that over 4,4 million people who died in Europe experienced serious health-related suffering and need Palliative Care. Over 139.000 children who die every year need palliative care.

The population in need of palliative care is estimated to rise significantly in the future at the global level.



effective and sustainable palliative care plans

Palliative Care

WHAT



What is Palliative Care ?

*...Its origin is in the Latin word **pallium**, meaning a cloak.*

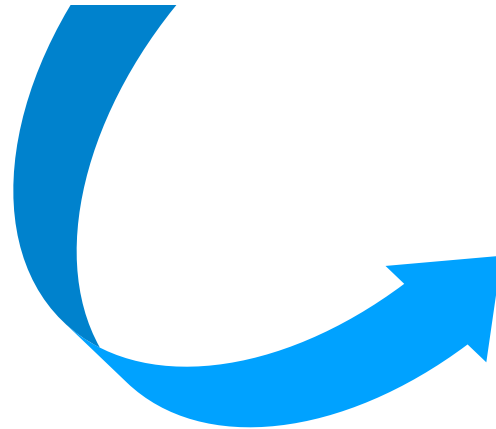
Palliative care is an approach that improves the quality of life of patients and their families. It faces the problem associated with life-threatening illness, through the prevention and relief of suffering by an early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.
(World Health Organization – WHO)



The integration of PC into the National Health Systems across Europe

The majority of **European countries** (76%) have adapted their **general health laws with decrees relating PC** as a right of the patient, or even as a **human right**

Eight countries in Europe have a **National Law specific to PC.**



COUNTRIES WITH NATIONAL LAWS

COUNTRY	YEAR	LAW OR ACT
France	1999	Law n° 99-477 aiming to guarantee the right to access to palliative care
Belgium	2002 (2016)	[S-C-2002/22868] The Palliative Care Act, [C-2016/24163] An Act to amend the Act of June 14, 2002 on palliative care with a view to broadening the definition of palliative care
Luxembourg	2009	Law on palliative care, advance instructions and end-of-life accompaniment
Italy	2010	Law 38/2010 to guarantee access to palliative care and pain therapy
Portugal	2012	Law n.º 52/2012, Law of Bases of Palliative Care
Albania	2014	Law Nr. 138/2014 For Palliative Care in Republic of Albania
Germany	2015	The Act to Improve Hospice and Palliative Care in Germany (Hospice and Palliative Care Act - HPG)
Armenia	2017	Law N 45-N on Palliative Medical Assistance and Service Providing

Palliative Care

WHERE



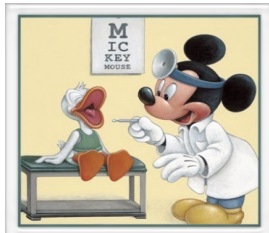
Home

Health Palliative Care Teams work in patients' homes, in collaboration with the basic health teams or nursing homes' staff.



Hospital

Where Palliative Care Teams supports **chronic patients**. There may be specific Palliative Care Units in highly specialized hospitals.



Outpatient

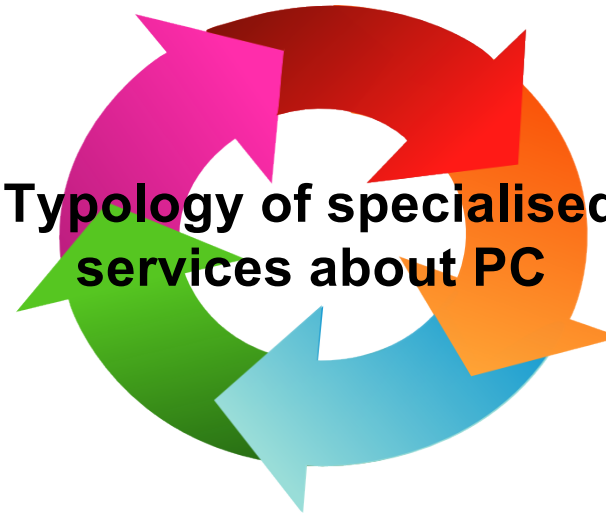
Public or standalone points to guarantee suitable services for self-sufficient patients who require specialized multidimensional assessment for optimal control of symptoms, including pain and family support.



Hospice

PC is provided in standalone facilities called Hospice. The concept almost always designates an intermediate care resource between the hospital and the home.

Typology of specialised services about PC



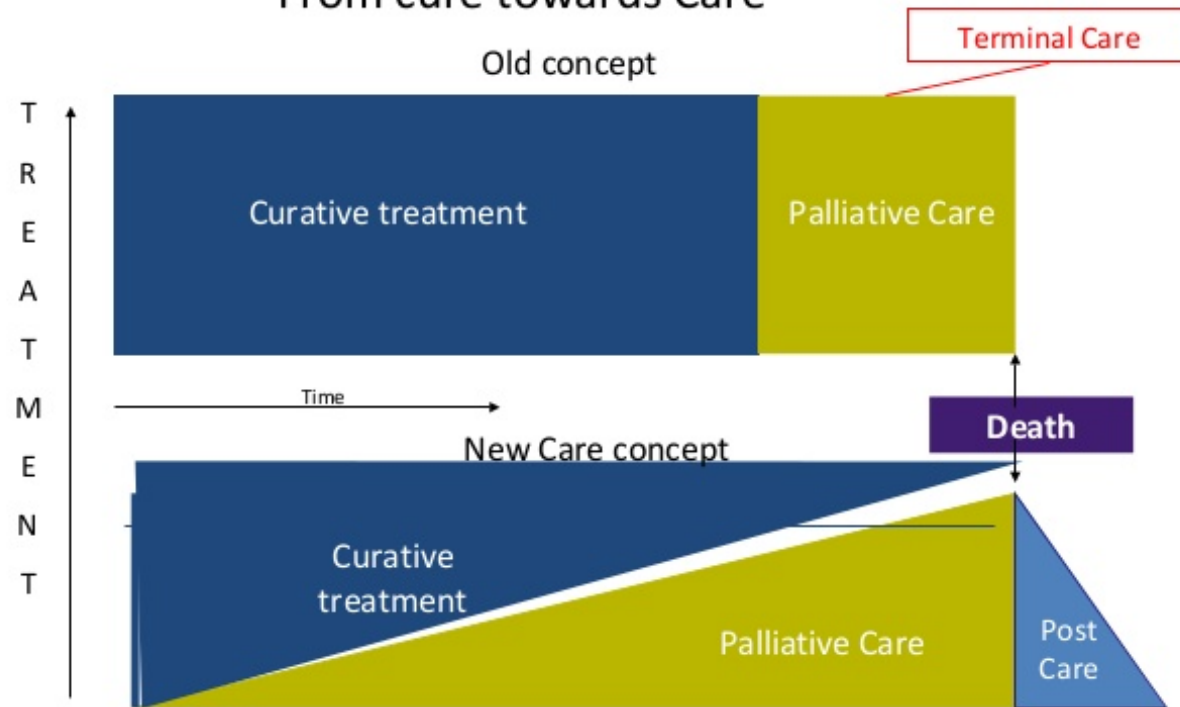
Palliative Care

WHEN

WHEN?

Figure illustrates how the idea that palliative care is relevant only to the last few weeks of life is being replaced with the concept that the **palliative care** approach should be offered **increasingly alongside curative treatment**, to support people with chronic progressive illnesses over many years.

From a traditional towards a new care model:
From cure towards Care



5

Lynn and Adamson, 2003

5

Surprise question:

“Would I be surprised if this patient died in the next 12 months?”

Early Palliative Care

Patients may be able to receive palliative care much earlier. This approach, which is known as early palliative care, begins at the time of - or shortly after - the diagnosis of an advanced illness.

Often, early palliative care is combined with curative treatments such as chemotherapy or radiotherapy.

Early palliative care, whether provided by the attending oncologist or by specialist teams, involves **empathetic communication** with patients about their prognosis, **advance care planning**, and **symptom assessment and control**.



Palliative Care

WHY

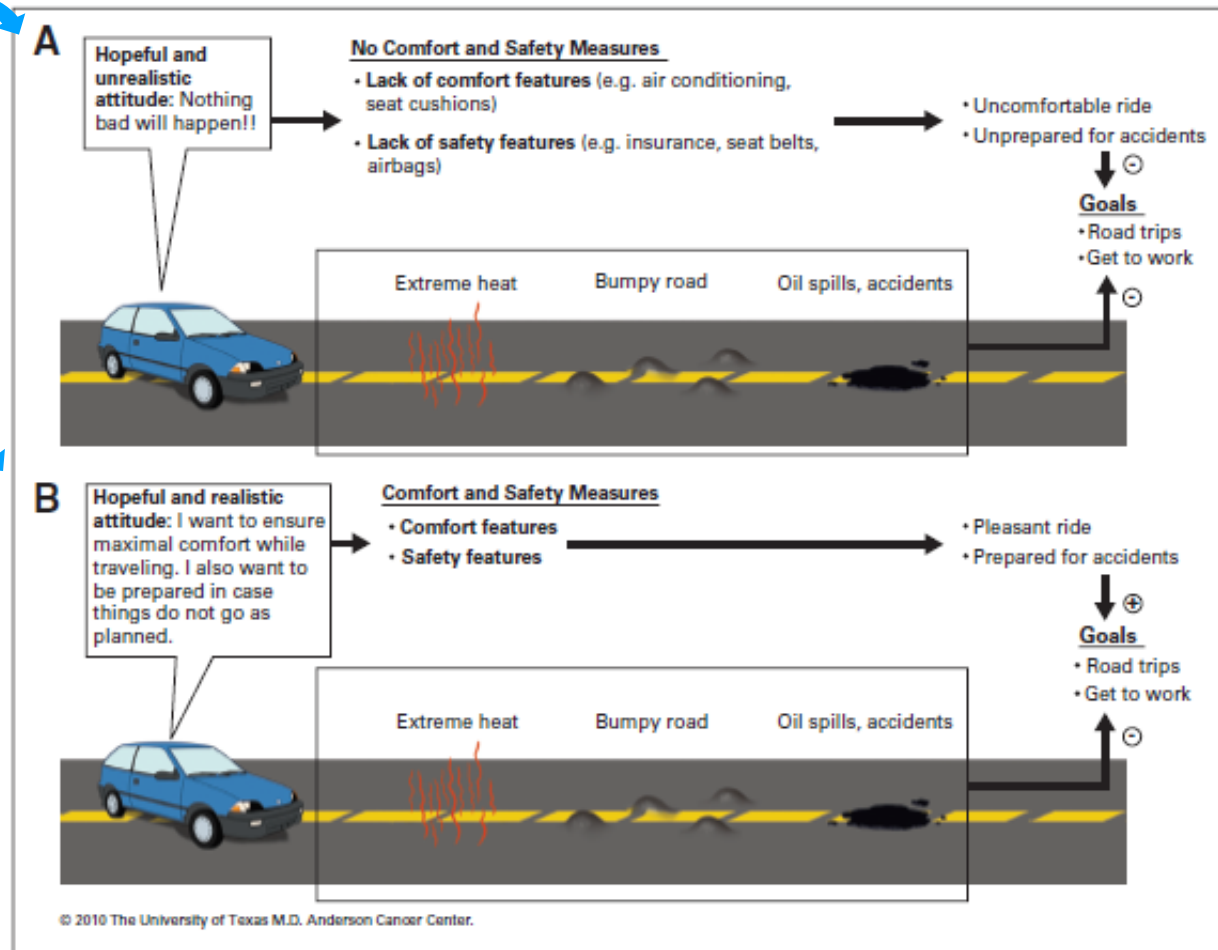
WHY?

(A) A hopeful unrealistic driver believes that there will be no troubles ahead in her journey.

This is in contrasts to B) a hopeful realistic driver who understands the importance of comfort measures and the need to prepare for the trip ahead.

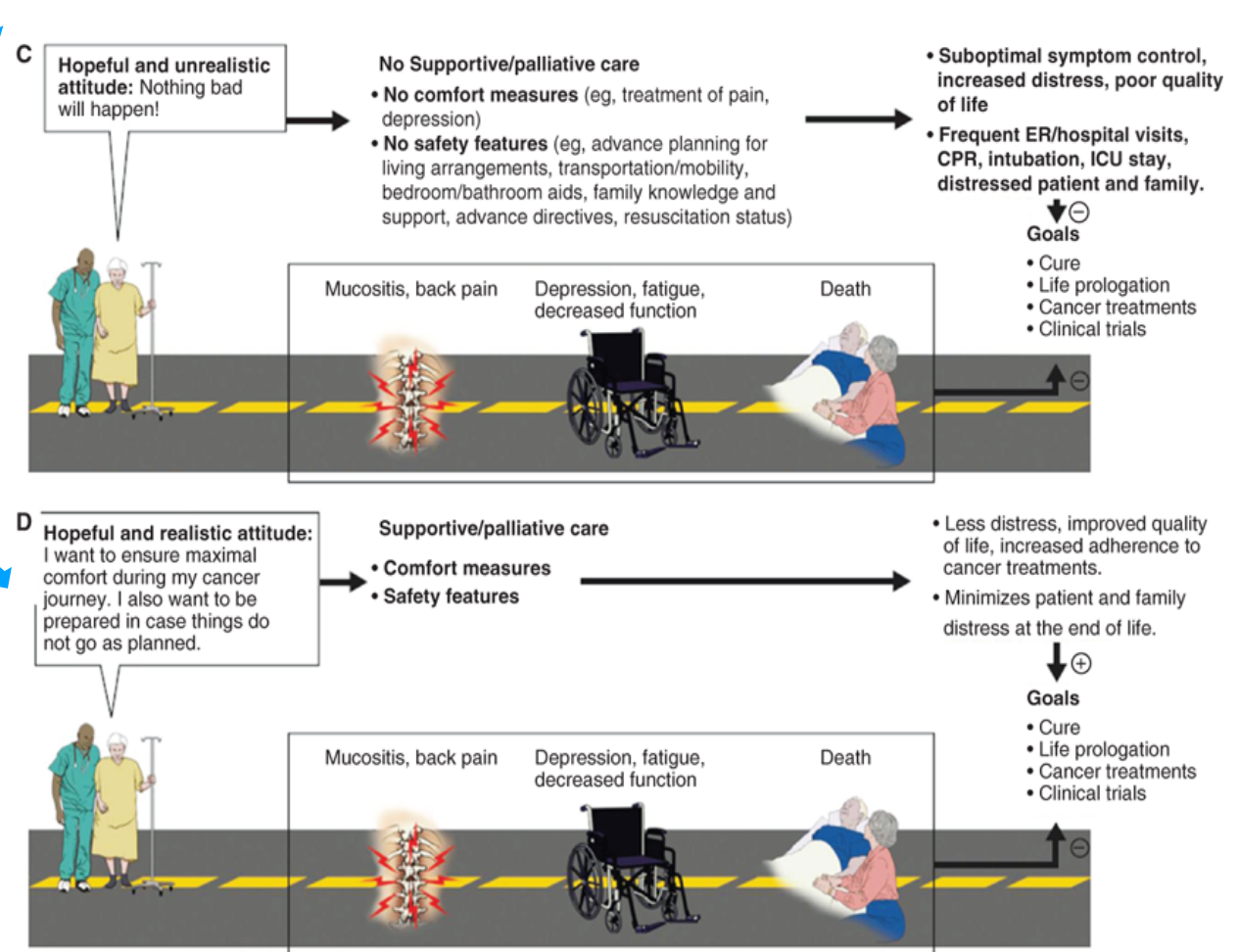
Conceptual model for Goals of Car(e).

A car is used here as an analogy for establishing goals of care.



(C) A hopeful unrealistic patient who focuses on cancer treatments without attention to her symptoms and advance care needs may experience unnecessary distress.

(D) In contrast, a hopeful and realistic patient who receives concurrent oncologic and supportive/palliative care would be better prepared for the symptoms and care needs ahead.



Source: Hagop M. Kantarjian, Robert A. Wolff: The MD Anderson Manual of Medical Oncology, 3rd Edition
www.accessmedicine.com
Copyright © McGraw-Hill Education. All rights reserved.

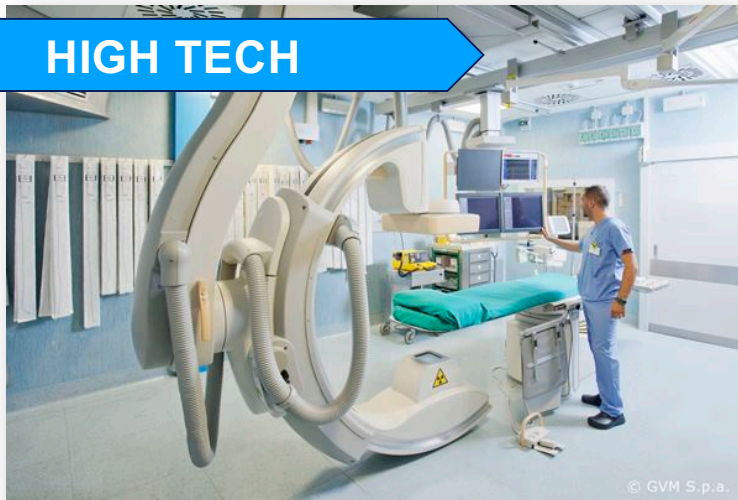
Palliative Care

HOW

Palliative care should be provided **at all levels of care**. Early detection of PC patients should be carried out in **primary care services** in the community and should be provided to a majority of patients by primary care professionals



HIGH TECH



...HIGH TOUCH



References

- *Arias-Casais N, Garralda E, Rhee JY, Lima L de, Pons JJ, Clark D, Hasselaar J, Ling J, Mosoiu D, Centeno C. (2019) EAPC Atlas of Palliative Care in Europe 2019. Vilvoorde, EAPC Press.*
- *Paal P, Brandstötter C, Lorenzl S, Larkin P, Elsner F (2019). Postgraduate palliative care education for all healthcare providers in Europe: Results from an EAPC survey. Palliative and Supportive Care 17, 495–506. <https://doi.org/10.1017/S1478951518000986>*
- *Testoni, I., Bottacin, M., Fortuna, B.C., Zamperini, A., Marinoni, G.L., Biasco, G. (2019). Palliative care and psychology education need in nursing courses: A focus group study among Italian undergraduates. Psicologia della Salute, 2019 (2), pp. 80-99, doi: 10.3280/PDS2019-002004*
- *Centeno C, Sitte T, de Lima L, et al. (2018) White Paper for Global Palliative Care Advocacy: Recommendations from a PAL-LIFE Expert Advisory Group of the Pontifical Academy for Life, Vatican City. J Palliat Med. 21(10):1389-1397. doi:10.1089/jpm.2018.0248*
- *Noguera A, Bolognesi D, Garralda E, Beccaro M, Kotlinska-Lemieszek A, Furst CJ, Ellershaw J, Elsner F, Csikos A, Filbet M, Biasco G, and Centeno C. (2018) How Do Experienced Professors Teach Palliative Medicine in European Universities? A Cross-Case Analysis of Eight Undergraduate Educational Programs, Journal of Palliative Medicine.21(11) 1621-1626.*
- *Martoni AA, Varani S, Peghetti B, et al. (2017) Spiritual well-being of Italian advanced cancer patients in the home palliative care setting. Eur J Cancer Care (Engl); 26(4):10.1111/ecc.12677. doi:10.1111/ecc.12677*
- *Casale G., Calvieri A. (2014). Le cure palliative in Italia: inquadramento storico. MeDiC, 22(1): 21-26*
- *Claessen, Susanne & Francke, A. & Echteld, Michael & Schweitzer, Bart & Donker, Gé & Deliens, Luc. (2013). GPs' recognition of death in the foreseeable future and diagnosis of a fatal condition: A national survey. BMC family practice. 14*
- *Bruera, E., & Hui, D. (2012). Conceptual models for integrating palliative care at cancer centers. Journal of palliative medicine, 15(11), 1261–1269. <https://doi.org/10.1089/jpm.2012.0147>*
- *Department of Health, Western Australia. (2008) Palliative Care Model of Care. Perth: WA Cancer & Palliative Care Network, Department of Health, Western Australian.*