

HOSPICE PALLIATIVE CARE: PRINCIPLES & CONCEPTS

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HOSPICE PALLIATIVE CARE

CHPCA Definition:

“Hospice palliative care is whole-person health care that aims to relieve suffering and improve the quality of living and dying”

- HPC strives to help patients and families:
 - address physical, psychological, social, spiritual and practical issues, and their associated expectations, needs, hopes and fears
 - prepare for and manage self-determined life closure and the dying process
 - cope with loss and grief during the illness and bereavement

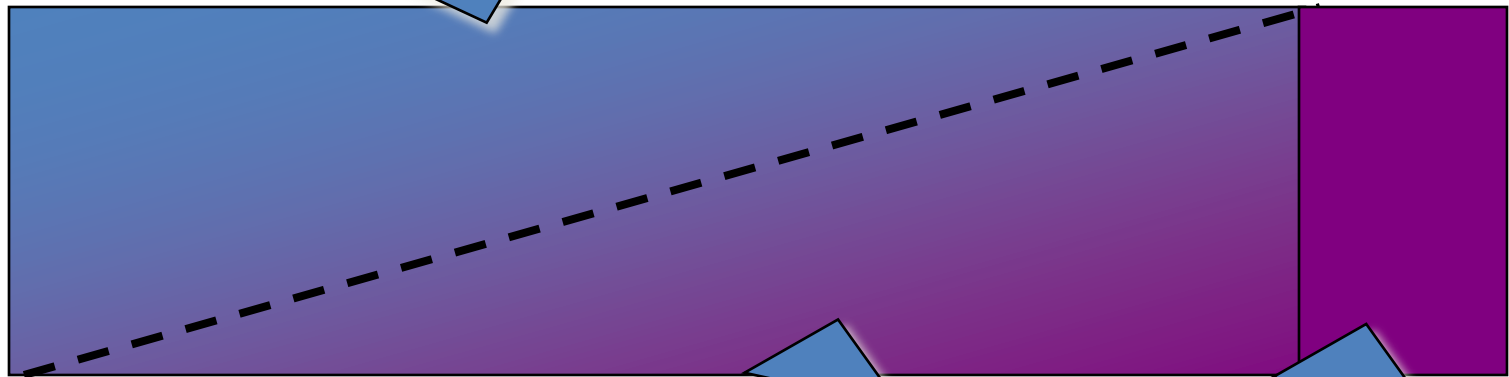
HPC: HISTORY

- 1960s: Dame Cicely Saunders first conceived of the modern hospice movement in the UK to improve care for the dying
- 1975: Balfour Mount coined the term “palliative care” so that one term would be acceptable in both English and French
- Palliative care programs developed primarily within larger healthcare institutions
- In Canada, hospice care developed within the community as free-standing, primarily volunteer programs

HPC: HISTORY

- To recognize the convergence of hospice and palliative care into one movement, and their common norms of practice, the term “hospice palliative care” was coined
- HPC is the nationally accepted term to describe care aimed at relieving suffering and improving quality of life
- Individual organizations may continue to use “hospice”, “palliative care”, or another similarly acceptable term to describe their organization and the services they are providing

Curative / remissive therapy



Presentation

Death

Palliative care

Hospice

HPC

For whom is HPC appropriate?

- Any patient and/or family living with, or at risk of developing, a life-threatening illness due to any diagnosis, with any prognosis, regardless of age, and at any time they have unmet expectations and/or needs, and are prepared to accept care
- HPC may complement and enhance disease-modifying therapy or it may become the total focus/goal of care
- HPC is most effectively delivered by an interprofessional team of healthcare providers

HOW ARE WE DOING IN CANADA?

- When asked, most people have indicated that they would prefer to die at home in the presence of loved ones, yet almost 70% of Canadian deaths occur in a hospital.
- 2005 Senate Report *Still Not There: Quality End-of-Life Care: A Progress Report*, approximately 15% of Canadians who require hospice palliative care services have access to these specialized services

THE FUTURE OF HPC IN CANADA

- Integrate hospice palliative and end-of-life care principles and practices into all health settings
- Educate health care providers in all health settings
- Promote evidence-informed policy
- Build strong partnerships to improve hospice, palliative and end-of-life care
- Raise awareness about hospice palliative end-of-life care

RESOURCE OPPORTUNITIES

CCS AS AN EXAMPLE

- Website:
 - “Support Services”
 - “Coping With Cancer”
 - “Living With Cancer”, “Nutrition During Treatment”, “Managing Stress”, “Sexuality”, “Life After Cancer”, “End-of-Life”
 - “About Cancer”
 - “Coping With Cancer”
 - “Advanced Cancer”
 - “About Cancer”
 - “Treatment”
 - “Relieving Pain”
 - Search “Palliative Care”