

PALLIATIVE care

An overview

Presentation to the Health Service System Board

September 8th, 2016

Palliative Care in a nutshell

**“
The focus of PC is not browbeating patients into accepting hospice and avoiding resuscitation or hospitalization, as some might assume. Palliative care is at its heart a relationship-centered profession. Palliative care clinicians build strong relationships with patients and families in the hopes of finding a way through the symptoms and distress, a way to cope with the illness experience, and a way to make each day as good as it can be.”**

Smith, AK. JAMA Feb 25, 2013

Palliative Care

- Appropriate at any age and at any stage in a serious life-limiting illness and can be provided along with curative treatment.
- It may be provided in a hospital, clinic, nursing home or home.
- PC is a values-neutral, transdisciplinary **medical specialty**. Physicians are Board Certified, Fellowship-trained, or both. The other clinicians on the team, such as Nurses and Social Workers, are also specialists.

The primary objectives are:

- 1) to help patients articulate their values and goals of care with an understanding of the disease process and treatment options
 - 2) to treat symptoms and distress associated with serious life-limiting illness.
- Palliative Care is life-affirming; it supports patients and their families to live the best they can with their illness.

What is the difference between Hospice and Palliative Care?

Hospice is a Medicare sponsored program that:

- Is limited to patients with less than a six month prognosis who do not want life prolonging or aggressive treatment
- Employs a standardized multidisciplinary team
- Supports patients and families through the natural dying process, neither attempting to shorten nor prolong life

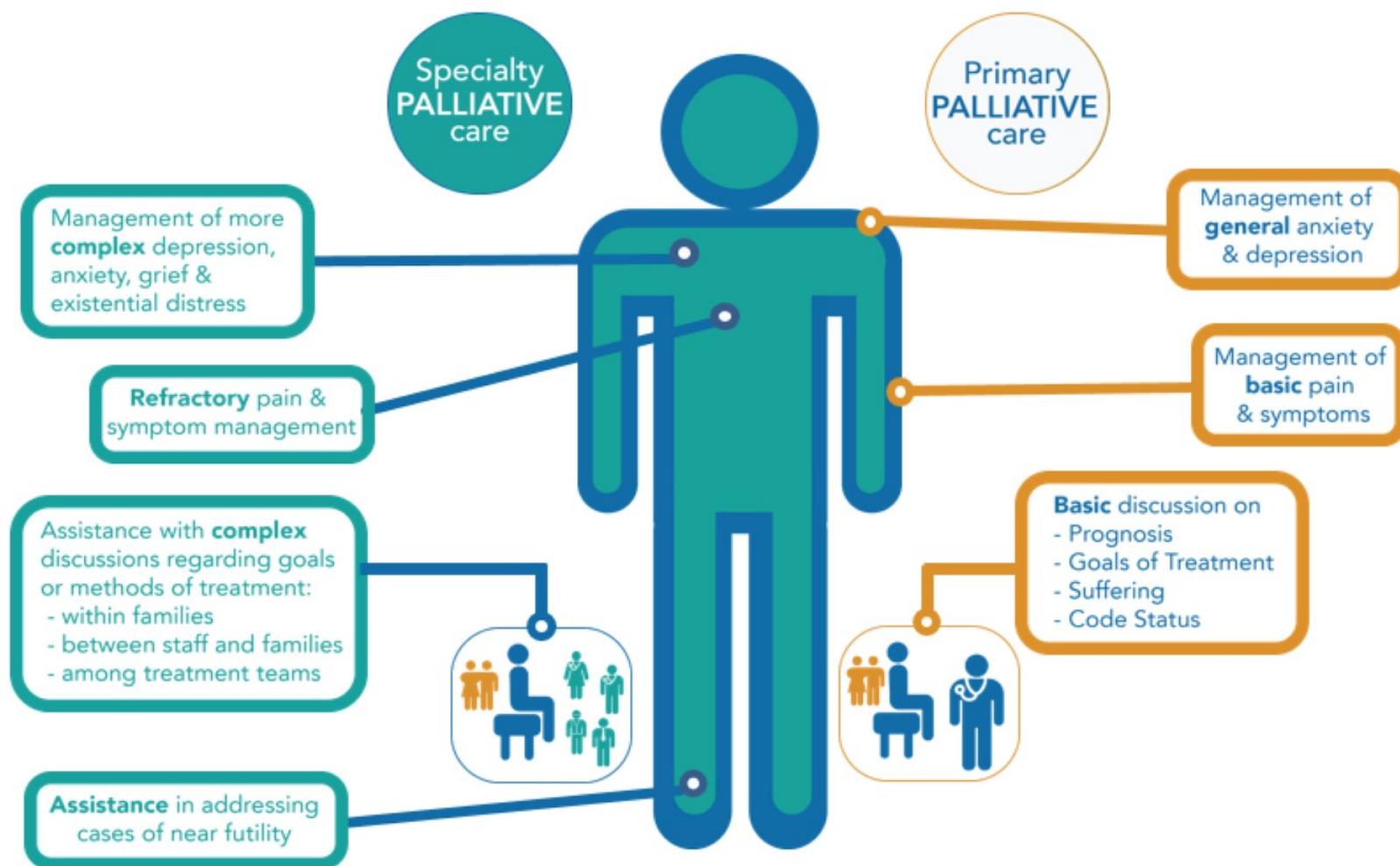
Palliative Care is a consultative service that:

- Treats any patient with a serious advanced illness regardless of their prognosis
- May employ expertise from various disciplines
- Helps patients and families contemplate and articulate their goals, whether they be life prolonging or not
- Helps manage various forms of distress, such as physical, psychosocial, or existential

Specialty Palliative Care is Transdisciplinary

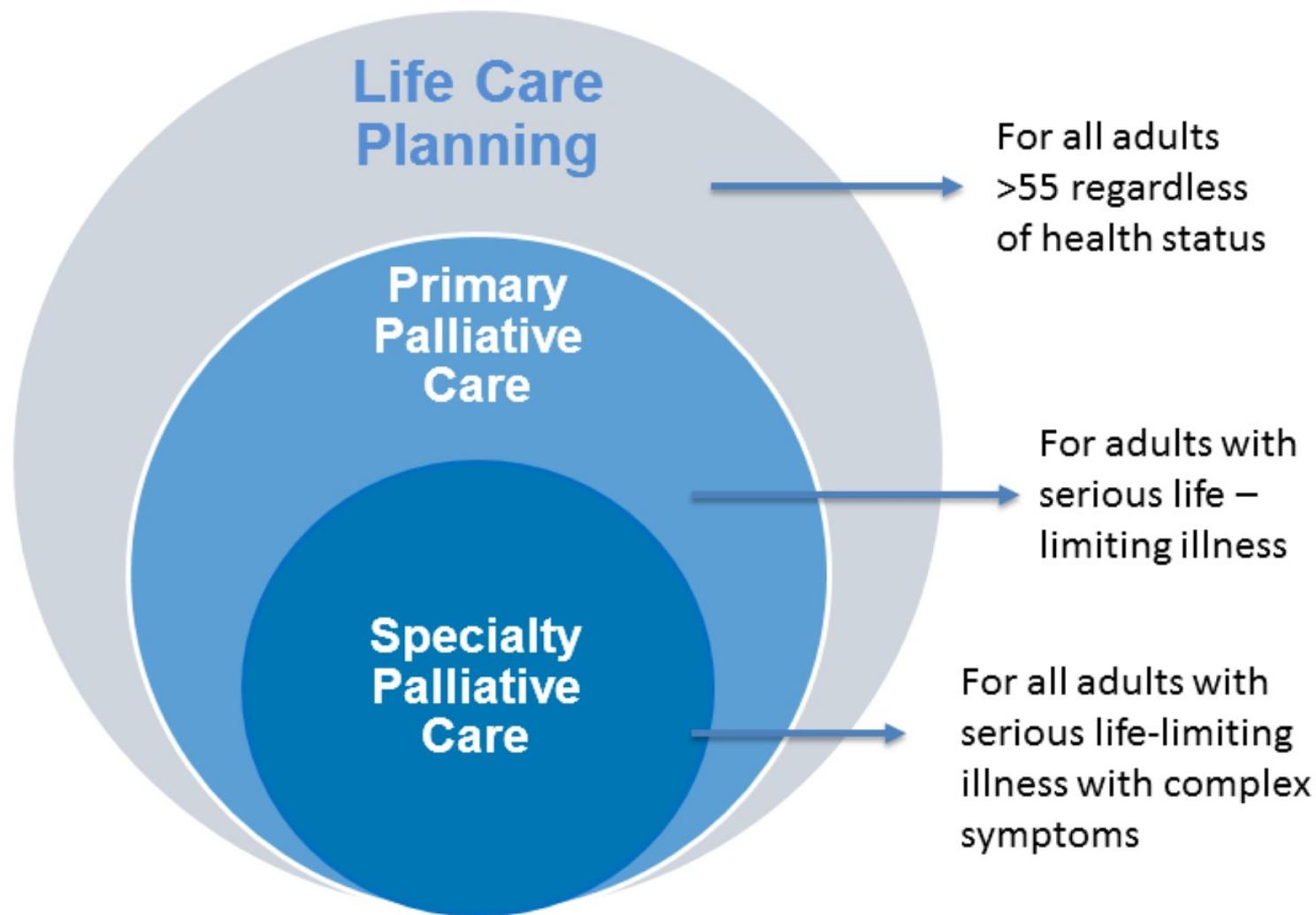


Primary Versus Specialty Palliative Care



Adapted from Quill & Abernathy

Supportive Care Services at Kaiser Permanente Northern California



How do KP Members access Palliative Care?

- 1** By referral: one of the member's physicians makes a referral to the Palliative Care team at their local medical center. The referring physician can be the member's Primary Care Doctor, or a Hospital Doctor assigned during an inpatient stay, or a specialist such as a Cardiologist or Oncologist.
- 2** By Member request: any KP member with a serious, life-limiting illness may request the support of a Palliative Care Team.