

Department: _____ Policy #: _____
Manual: _____ Effective date: _____
Distribution: _____ Supercedes #/date: _____

TITLE: Palliative Care Service – Practice Guideline

Definition: Palliative Care:

- Guides patients and families as they transition from cure oriented treatments to care directed toward disease control and symptom management
- Is the comprehensive care and management of the physical, psychosocial, emotional, spiritual and needs of patients
- May be complementary to other therapies that are available and appropriate to the identified goals of care

Purpose: For the Palliative Care Team to work with the existing care team: attending physician, nursing, case management and clinical support staff to provide patient focused family centered care which:

- Defines immediate and long term goals of care and promotes advance care planning
- Optimizes symptom control
- Optimizes functional status when appropriate
- Promotes the highest quality of life for patient and family
- Educates patient and family to promote understanding of the underlying disease process
- Establishes an environment that is comforting and healing
- Plans for discharge to the appropriate level of care in a timely manner
- Assists actively dying patients and their families in preparing for and managing self-determined life closure

Palliative Care Consultation:

- Requires a written order by the patient's physician.

Palliative Care Team – MD, RN, MSW, MDiv

Responsibilities:

- Serve as **educators** and mentors for CBH staff
- Promote timely access to Palliative Care Services
- Collaborates with primary care professionals in developing plan of care
- Provide physical, psychological, social and spiritual support to patient and family

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- Facilitate **care planning** with patient and family to meet multidimensional care needs caused by life-limiting illness
- Facilitate **patient understanding** of diagnosis and prognosis to promote informed choices
- Assist patients in establishing **goals of care** and establishing priorities
- Encourage **advance care planning**

Assessment:

Criteria, which may assist in identifying patients, appropriate for Palliative Care

The patient:

- is not a candidate for curative therapy
- has life-limiting illness and has chosen not to have life-prolonging therapy
- has unacceptable level of pain > 24 hours
- has uncontrolled symptoms (i.e. nausea, vomiting)
- has uncontrolled psychosocial or spiritual issues
- has frequent visits to Emergency Department (>1 x mo for same diagnosis)
- has more than one hospital admission for the same diagnosis in last 30 day
- has prolonged length of stay without evidence of progress
- has prolonged stay in ICU and/or transferred from ICU to ICU setting without evidence of progress
- Is in an ICU setting with documented poor or futile prognosis

Screening tool: (See Appendix A)

Nurse Executive

Date

Chairperson, Patient Care Council

Date

Medical Executive Committee Chair

Date

