45th Biennial Convention (16-20 November 2019)

A Quality Project to Improve the Palliative Care Services and Utilization in Pakistan

Rabia Muhammad Iqbal, BScN, RN, RM

Home Health Care, Aga Khan University, Karachi, Pakistan

Introduction:

Home-based palliative services are at the initial stage in Pakistan. Palliative care is a multidisciplinary approach that is based on prevention and relieving suffering as well as promoting the optimal wellbeing of patients and their families. Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. In Pakistan, the concept of palliative care is like a newborn baby who needs a lot of ethical attention in terms of patient's autonomous decision, family members' care for the patient and the medical team's professional obligations.

Objectives:

- To explore the knowledge and utilization of palliative care services.
- To improve the quality and utilization of palliative care services based on the identified needs and challenges.

Methodology:

The project was done into two phases.

A need assessment was performed by interviewing 80 patients or their families who have utilized home health care services and experienced palliative care. Based on the identified needs, we employed several interventions to improve the utilization of palliative care services. Results:

The findings of need assessment revealed that 46% of the families were not well aware about palliative care and comfort care. Regarding the reasons for not utilizing services, 21% verbalized about financial issues and 33% family reported about socio-cultural issues. Like one of the participants expressed that "death is a natural process and we don't see any reason to call a doctor". Based on the findings extracted from this survey, we introduced palliative doctor and nurses' round in inpatient areas due to which many of the patients were referred to avail home health care services.

We also observed the ratio of patients requiring palliative care in emergency department gradually decreased. Most of the patients were managed for end of life care in home setting, which eventually influenced upon family's economic burden. For finance issues, families were asked to consult welfare department. Furthermore, patient's families were taught about the skills like: Stoma care, NG feeding and PEG feeding.

Conclusion:

In Pakistan, the concept of palliative care is very new and is associated with ethical, moral and socio-cultural aspects of patients and their families. Nurses can significantly contribute an important role for the promotion of home health care services.

References:

• Arthur, A., Wilson, E., James, M., Stanton, W. & Seymour, J. (2011) *Bereavement care services:* a synthesis of the literature. The University of Nottingham.

- Becker, G., Xander, C., Blum, H. Lutterback, J., Momm, F., Gysels, M. & Higginson, I. (2007) Do religious or spiritual beliefs influence bereavement? A systematic review'. Palliative Medicine, 21, p. 207 - 217.
- Mulji N (2017) Palliative Care: An Alien Concept in Pakistan. J Clin Res Bioeth 8:301.
- Remedios, C., Thomas, K., Hudson, P. (2011) Psychosocial and bereavement support for family caregivers of palliative care patients: A review of the empirical literature, Centre for Palliative Care, St Vincent's Hospital and Collaborative Centre of the University of Melbourne.

Title:

A Quality Project to Improve the Palliative Care Services and Utilization in Pakistan

Introduction:

Home-based palliative services are at the initial stage in Pakistan. Palliative care is a multidisciplinary approach that is based on prevention and relieving suffering as well as promoting the optimal wellbeing of patients and their families. Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with lifethreatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. In Pakistan, the concept of palliative care is like a newborn baby who needs a lot of ethical attention in terms of patient's autonomous decision, family members' care for the patient and the medical team's professional obligations.

Objectives:

- To explore the knowledge and utilization of palliative care services.
- To improve the quality and utilization of palliative care services based on the identified needs and challenges. The project was done into two phases.
- Results: We also observed the ratio of patients requiring palliative care in emergency department gradually decreased. Most of the patients were managed for end of life care in home setting, which eventually influenced upon family's economic burden. For finance issues, families were asked to consult welfare department. Furthermore, patient's families were taught about the skills like: Stoma care, NG feeding and PEG feeding.
- Conclusion:
- References:
- In Pakistan, the concept of palliative care is very new and is associated with ethical, moral and socio-cultural aspects of patients and their families. Nurses can significantly contribute an important role for the promotion of home health care services.

The findings of need assessment revealed that 46% of the families were not well aware about palliative care and comfort care. Regarding the reasons for not utilizing services, 21% verbalized about financial issues and 33% family reported about socio-cultural issues. Like one of the participants expressed that "death is a natural process and we don't see any reason to call a doctor". Based on the findings extracted from this survey, we introduced palliative doctor and nurses' round in inpatient areas due to which many of the patients were referred to avail home health care services.

- A need assessment was performed by interviewing 80 patients or their families who have utilized home health care services and experienced palliative care. Based on the identified needs, we employed several interventions to improve the utilization of palliative care services.
- Methodology:
- Arthur, A., Wilson, E., James, M., Stanton, W. & Seymour, J. (2011) Bereavement care services: a synthesis of the literature. The University of Nottingham.
- Becker, G., Xander, C., Blum, H. Lutterback, J., Momm, F., Gysels, M. & Higginson, I. (2007) Do religious or spiritual beliefs influence bereavement? A systematic review'. Palliative Medicine, 21, p. 207 – 217.
- Mulji N (2017) Palliative Care: An Alien Concept in Pakistan. J Clin Res Bioeth 8:301.
- Remedios, C., Thomas, K., Hudson, P. (2011) Psychosocial and bereavement support for family caregivers of palliative care patients: A review of the empirical literature, Centre for Palliative Care, St Vincent's Hospital and Collaborative Centre of the University of Melbourne.

Abstract Summary:

Home-based palliative services are at the initial stage in Pakistan. Palliative care is a multidisciplinary approach that is based on prevention and relieving suffering as well as promoting the optimal wellbeing of patients and their families. if abstract has selected then I will present through multimedia

Content Outline:

Introduction:

Home-based palliative services are at the initial stage in Pakistan. Palliative care is a multidisciplinary approach that is based on prevention and relieving suffering as well as promoting the optimal wellbeing of patients and their families. Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with lifethreatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. In Pakistan, the concept of palliative care is like a newborn baby who needs a lot of ethical attention in terms of patient's autonomous decision, family members' care for the patient and the medical team's professional obligations. Objectives:

- To explore the knowledge and utilization of palliative care services.
- To improve the quality and utilization of palliative care services based on the identified needs and challenges. The project was done into two phases.
- Results: We also observed the ratio of patients requiring palliative care in emergency department gradually decreased. Most of the patients were managed for end of life care in home setting, which eventually influenced upon family's economic burden. For finance issues, families were asked to consult welfare department. Furthermore, patient's families were taught about the skills like: Stoma care, NG feeding and PEG feeding.
- Conclusion:
- In Pakistan, the concept of palliative care is very new and is associated with ethical, moral and socio-cultural aspects of patients and their families. Nurses can significantly contribute an important role for the promotion of home health care services.

- The findings of need assessment revealed that 46% of the families were not well aware about palliative care and comfort care. Regarding the reasons for not utilizing services, 21% verbalized about financial issues and 33% family reported about socio-cultural issues. Like one of the participants expressed that "death is a natural process and we don't see any reason to call a doctor". Based on the findings extracted from this survey, we introduced palliative doctor and nurses' round in inpatient areas due to which many of the patients were referred to avail home health care services.
- A need assessment was performed by interviewing 80 patients or their families who have utilized home health care services and experienced palliative care. Based on the identified needs, we employed several interventions to improve the utilization of palliative care services.
- Methodology:

First Primary Presenting Author

Primary Presenting Author
Rabia Muhammad Iqbal, BScN, RN, RM
Aga Khan University
Home Health Care
Head Nurse
Karachi
Pakistan

Author Summary: My name is Rabia Muhammad Iqbal and I am a nurse by profession and currently working as an Head Nurse at Aga Khan University and have clinical experience of nine years. I am a member of Rho delta chapter.