

Delivering Palliative Care Through COVID-19





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World Health Organization (2002) define palliative care as "an approach that improves the quality of life of patients" and their families facing the problems associated with life threatening illnesses, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychological and spiritual."

COVID-19



On 11th March 2020, the infection caused by the news SARS-CoV-2 coronavirus became an international pandemic (WHO, 2020).

The number of COVID cases soared in the following months and the impact reached all levels of healthcare – palliative care was no exception (Chapman et al, 2020).

"Don" PPE





<u>P</u> - Patient and Family Impact



- Isolation and restricted family support
- Increased anxiety and fears
- Altered relationship between healthcare professionals and patient / family
- Clouded decision making
- Communication barriers
- Complicated grief



- Fears
- Isolation and emotional impact
- Communication barriers
- Increased demand for palliative and hospice care services
- Changes to our working pattern
- Procedure and protocol changes

<u>E</u> – Embracing Change



- Advanced Care Planning discussions
- Anticipatory prescribing RPMG guidelines updated
- Verification of Life Extinct
- Communication
- Resilience
- Collaborative working
- Emergent IT changes

'Doff' PPE

- Patient / family at the core
- Collaborative working
- Recognition for healthcare professionals

The NHS is ever changing. There is always something going on. We need to keep that momentum, keep communication up, off-load to colleagues, and always be there for each other. That's the lesson (Oxtoby, 2021).



What does it make you value?





References



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