



Practice nurses and palliative care

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Approximately 30,000 people die every year in Ireland.¹ Between 25-26 per cent of these deaths occur at home.² This equates to approximately 7,500 people who will be interacting with GP practices and who may die at home on a yearly basis. Heretofore, palliative care was associated with caring for those with cancer. However, people are living longer with more complex needs and illnesses such as chronic obstructive pulmonary disease (COPD), heart failure and dementia. These illnesses are now widely acknowledged as being long-term,

life-limiting illnesses where palliative care is acknowledged as being applicable throughout the course of each.³ In Ireland, 80 per cent of patients who visit general practice have a chronic illness.⁴

Palliative care is an approach to care that improves the quality-of-life of people with life-threatening illnesses through the prevention and relief of suffering by means of early identification, impeccable assessment and treatment of pain and other problems, which include physical, psychosocial, and spiritual needs. Palliative care is inclusive of bereavement care and is applicable early in the course of

illness.⁵ This article explores and highlights the role of practice nurses delivering palliative care.

The delivery of primary palliative care

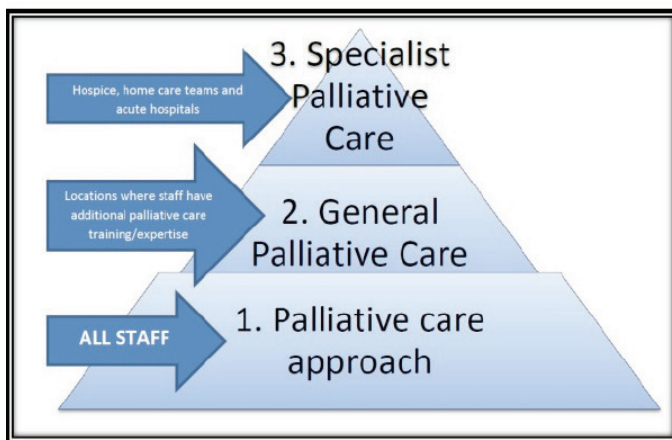
Internationally, the applicability of palliative care within primary care is increasingly receiving attention. Earlier this year *The Lancet* proposed a new definition of primary palliative care and describes it as: "Palliative care practised by primary healthcare workers, who are the principal providers of integrated healthcare for people in local communities throughout their life. It includes early identification and triggering of palliative care as part of integrated and holistic chronic disease management, collaborating specialist palliative care services where they exist, and strengthening underlying professional capabilities in primary care."⁶

Within Ireland, palliative care is delivered at three levels:

Level one: palliative care approach, where palliative principles are appropriately applied by all healthcare professionals.

Level two: general palliative care, delivered by healthcare professionals who, although are not engaged in full time palliative care have some additional training and experience in palliative care.

Level three: specialist palliative care, delivered by those whose core activity is limited to the provision palliative care.⁷



(IHF, 2016)

Primary care-based health and social care professionals in Ireland deliver palliative care at levels 1 and 2 and are supported to do so by utilising the Palliative Care Competence Framework, which provides core competencies that can be applied regardless of setting.⁸

However, little is known about the implementation of this framework or how practice nurses view their role in the delivery of palliative care. More recently the Adult Palliative Care Services Model of Care for Ireland provides a framework that outlines best practice in patient care delivery that includes guidance for those working in the community.⁹ The Dignity Care Intervention Ireland project (2015), found that community-based nurses (mostly public health nurses and community registered general nurses), were not confident in talking about death and dying with patients and families and were cautious to engage in emotive discussions because of the perceived impact on family reactions.¹⁰

An Irish case study outlines the role of Community Intervention Teams in providing palliative care and concludes that the delivery of palliative care by community-based nurses requires collaboration

and communication.⁹ The same work also identifies that there is a need for an increased emphasis to highlight the role of community-based nurses in providing palliative care.¹¹ Other research suggests that nurses develop strong nurse-patient (therapeutic) relationships and have a vast knowledge of services that are available in the community and as a result contribute to the delivery of palliative care.¹²

Although not widely documented, practice nurses play a pivotal role in the delivery of primary palliative care. It is an element of care that often goes unrecognised as the provision of integrated and holistic care can be undefined and underestimated.

Facilitating conversations

Many people engage with practice nurses throughout the course of an illness. Each contact provides an opportunity for discussion about wishes and preferences for care, once a person has been diagnosed with a long-term life-limiting illness. People are seeking more open and transparent discussion with health and social care professionals. The practice nurse is ideally placed to take part in and lead these conversations. Key to this is identifying opportunities and conversational cues. These can include comments such as "I'm not getting better" or "I'm finding it more difficult." By being aware of these prompts and acting upon them, the practice nurse can start a conversation about what is important to the person and their family.¹³ Providing people with information and time to express their thoughts, feelings, fears and worries is a key element to the provision of palliative care. Resources are available from the Irish Hospice Foundation to assist practice nurses to initiate or engage in these conversations. These include the Think Ahead form that supports and enables individuals and families to initiate conversations about planning care and to subsequently document their wishes. Other resources include information materials about planning for the future if living with dementia, heart failure, COPD or an advancing neurological illness. Education and training for practice nurses is required to facilitate purposeful conversations with regard to identifying palliative care needs of people and their families. It is also pivotal in the delivery of holistic person-centred care as the conversations may provide opportunities to inform decision making and facilitate integration of care and services in the community.

Bereavement

Often an unrecognised element of palliative care is the provision of bereavement support which practice nurses may provide. Due to the longevity of the relationship with those with long term health conditions, practice nurses can encourage communication between families and carers prior to death. Being aware that people need different levels of support at different times is key. In addition, practice nurses often provide a compassionate space and response to those who are bereaved. By empathising that somebody's journey with grief is individual and is a normal reaction to the death of a loved one or family member can provide comfort.

It is therefore necessary that practice nurses keep up to date with details of local and national bereavement services that are available to support people experiencing grief and loss. The website, www.bereaved.ie provides information and resources that are beneficial to practice nurses in providing support and for onward referral for those who are bereaved.

Self-care

Most healthcare professionals, including practice nurses, are highly motivated to care for others. The very nature of caring means that attention to the self is needed to avoid compassion fatigue and burnout. A good way to attend to self-care is to acknowledge that we are all multi-dimensional (physical, emotional, spiritual and mental) beings. Self-care is best practised when it is applied across all these dimensions.

Suggestions for self-care that practice nurses could utilise include the following:

- Don't go without food or fluids.
- Use your hand hygiene routine as a meditative ritual or "time-out".
- Reach out and talk to your colleagues about the rewards and challenges of your day-to-day work.
- Deliberately establish a role-shedding ritual for the end of the day. For example, change out of work clothes, use the drive home to sing, take five minutes to breathe in some fresh air and/or listen to music or an audiobook¹⁴

Identifying what works best for you as a practice nurse in your day-to-day work is key to self-care and is an essential element of the delivery of primary palliative care.

Key Points

- Practice nurses are key members of the healthcare team that deliver palliative care within primary care.
- Identifying people with palliative care needs is core to the role of practice nurses. However, education and training is required.
- Acknowledging and responding to bereavement reactions is part of the provision of palliative care within primary care.
- Practice nurses need to pay attention to self-care.

Future developments

More research is required to identify how practice nurses deliver primary palliative care in Ireland. Of significant relevance is the process by which practice nurses identify people requiring palliative care within this healthcare setting and provide an appropriate service as promoted by the World Health Organisation.¹⁵

Conclusion

Practice nurses are key members of the healthcare team that often support several generations of families. This article addresses the need for practice nurses to be familiar with the services for those living with long term life limiting illnesses who require primary palliative care. The use of documents such as the Think Ahead tool enables conversations between families and carers to facilitate patient preferences during end stage care and loss. Some of the skills required as highlighted above include facilitating planning conversations and delivering bereavement support. Core to the

provision of primary palliative care is the development of good communication skills, showing compassion, providing time and a listening ear to those who are bereaved and collaborating with community-based healthcare professionals in integrating care. Specific education would equip practice nurses with the relevant expertise and confidence to address the needs of patients and families. These are all essential skills that practice nurses display in their day-to-day work and indicate that practice nurses are delivering palliative care, often without recognising or acknowledging it.

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