TRFT NHS Library and Knowledge Service

Palliative Care bulletin

Summer 2013

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NICE guidance: supporting people to live well with dementia

This quality standard covers the care and support of people with dementia. It applies to all social care set-settings and services working with and caring for people with dementia.

It should be read alongside the NICE Dementia quality standard which covers care provided by health and social care staff in direct contact with people with dementia in hospital, community, home-based, group care, residential or specialist care settings.

This guidance has been incorporated into the following dementia NICE Pathways, along with other related guidance and products.

Supporting people with dementia

Full guideline

QS30

Guidelines for the public

Overview of the dementia pathways

Systematic review:
Does palliative care improve outcomes for patients with incurable illness? A review of the evidence.

Patients with incurable illness experience considerable physical and psychological distress, which negatively impacts their quality of life. Palliative care clinicians primarily seek to alleviate suffering, enhance coping with symptoms, and enable informed decision making. In this article, we review the efficacy of various palliative care interventions to improve patients' quality of life, physical and psychological symptoms, satisfaction with care, family caregiver outcomes, health-service utilization, and quality of end-of-life care. We conclude the review by discussing the major obstacles and future directions in evaluating and implementing standardized palliative care interventions.

El-Jawahri A, Greer J A, Temel J S. Does palliative care improve outcomes for patients with incurable illness? A review of the evidence. Journal of Supportive Oncology. 2011 May-Jun;9(3):87-94.

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Other systematic reviews

Patients' psychosocial experiences of attending Specialist Palliative Day Care: a systematic review.

The objective of this review was to systematically evaluate literature on patient-perceived psychosocial experiences of attendance at SPDC. Evidence showed that patients value a person-centred approach that reduces isolation, increases social support, encourages communication and provides activities. Future research could focus on investigating why patients value the psychosocial experiences reported and how these experiences can be defined in a way that would be meaningful to clinical service commissioners. Once this has been done, clinicians can start to measure more effectively clinical effectiveness and devise justifiable interventions to help this patient group.

Palliative Medicine, Apr 2011, 25(3), 210-28

Palliative sedation in end-of-life care and survival: a systematic review: a systematic review.

Palliative sedation is a clinical procedure aimed at relieving refractory symptoms in patients with advanced cancer. It has been suggested that sedative drugs may shorten life, but few studies exist comparing the survival of sedated and non-sedated patients. We present a systematic review of literature on the clinical practice of palliative sedation to assess the effect, if any, on survival.

Journal of Clinical Oncology, Apr 2012, 30(12), 1378-83

Physical activity in patients with advanced-stage cancer: a systematic review of the literature.

The purpose of this article is to examine the state of the science for physical activity in the advanced-stage disease subset of the cancer population. Exercise in a variety of intensities and forms, including yoga, walking, biking, and swimming, has many health benefits for people, including those diagnosed with cancer. Research has shown that, for people with cancer (including advanced-stage cancer), exercise can decrease anxiety, stress, and depression while improving levels of pain, fatigue, shortness of breath, constipation, and insomnia. *Clinical Journal of Oncology Nursing, Jun 2012 , 16(3), 293-300*

NICE Guidance on your mobile

You can now get new guidance on your mobile phone. Download the new NICE Guidance app to your phone for instant and mobile access to all NICE Guidance

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Rotherham Hospice staff can make use of a range of library and knowledge services, including:

- Enquiry service
- Group and 1-to-1 training
- Literature searching
- Current awareness information service
- Inter-library loans
- Journal Clubs

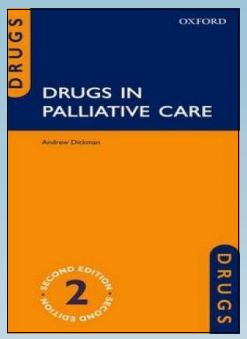
Knowledge.service@rothgen.nhs.uk

Do community specialist palliative care services that provide home nursing increase rates of home death for people with life-limiting illnesses? A systematic review and meta-analysis of comparative studies.

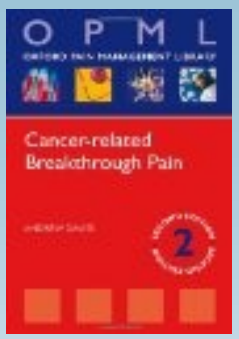
Systematic reviews and meta-analyses suggest that community specialist palliative care services (SPCSs) can avoid hospitalizations and enable home deaths. But more information is needed regarding the relative efficacies of different models. Family caregivers highlight home nursing as the most important service, but it is also likely the most costly. This meta-analysis found evidence to be inconclusive that community SPCSs that offer home nursing increase home deaths without compromising symptoms or increasing costs. But a compelling trend warrants further confirmatory studies. Future trials should compare the relative efficacy of different models and intensities of SPCSs.

Journal of Pain Symptom Management, Feb 2013, 45(2), 293-300.

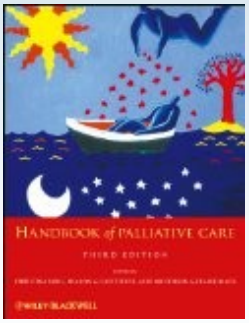
New Books available for loan



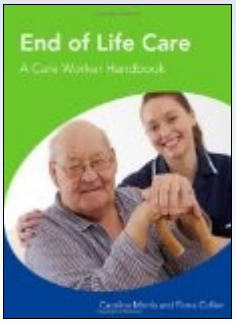
Drugs in palliative care



Cancer-related breakthrough pain



Handbook of palliative care



End of life care

For further details, view our catalogue at http://rotherham.nhslibraries.com/

Establishing a Nurse Led Respite Ward within a Hospice

The project aimed to introduce a nurse led respite ward for people living with progressive and life threatening/ limiting conditions and their carers in North East London. The purpose was to provide planned respite care for patients allowing their regular carers to have a break. It was thought that this support would enable patients to avoid crisis hospital admissions and realise their wish to remain at home. To achieve these aims the objectives of the project were to:

- Engage with key stakeholders to plan the implementation of the nurse led respite ward
- Carry out planned activities as identified by the key stakeholders
- Evaluate the nurse led respite ward, with particular attention to patient and carer choice, self-management opportunities and the maximising of functionality and independence to enable

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Keeping you up to date

We offer a Journal Table of Contents alert service, which is a quick and easy way to keep up to date and informed in your area of interest. Each time a new issue of a journal is published, we will send you the table of contents in an email. If you would like to register to this service, let us know at knowledge.service@rothgen.nhs.uk along with the title of the journal(s) you are interested in.

American Journal of Hospice and Palliative Medicine

BMC Palliative Care

Current Opinion in Supportive and Palliative Care

European Journal of Palliative Care

International Journal of Palliative Nursing

Internet Journal of Pain, Symptom Control and Palliative Care

Journal of Hospice & Palliative Nursing

Journal of Pain and Symptom Management

Journal of Palliative Medicine

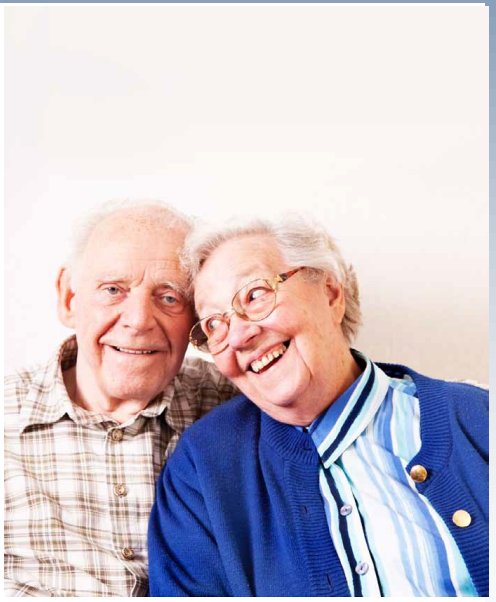
Palliative & Supportive Care

Participate in the #hpm and #hpmglobal tweetchats

The #hpm and #hpmglobal tweetchats (Twitter chats) take place twice a week, and it is easy to take part and communicate with other hospice and palliative care professionals.A slideshow provides a simple introduction to the #hpm tweetchat, and also a guide on how to sign up and join in the conversation in. Simply follow the #hpm and #hpmglobal links at the designated times to watch the tweets update on the page in real time. To contribute, sign into a Twitter account and make sure to add the text #hpm or #hpmglobal to each tweet.

Other papers

'Optimising the role and value of the interdisciplinary team – providing person-centred end of life care'.



The guide aims to support those who are working as part of, or alongside, an interdisciplinary team in end of life care. It describes the benefits of the interdisciplinary approach of integrating and coordinating end of life care, and provides practical suggestions for delivering care.

The guide covers a range of issues that members and managers of interdisciplinary teams may wish to consider when planning and delivering end of life care. It looks at each step of the end of life care pathway, setting out issues and questions for members of the interdisciplinary team to consider, and offering some practical advice in the form of 'top tips'. Case studies, and links to other resources are also included.

The guide can be downloaded from the National End of Life Care Programme website here

Palliative and end of life care for black, Asian and minority ethnic communities in the UK

This report commissioned by Marie Curie Cancer Care and Public Health England highlights that the end of life care needs of BAME communities are varied, growing and despite examples of good practice, overall not adequately met. A systematic review found that lack of knowledge about services, misunderstandings and mistrust, and a lack of cultural sensitivity on the part of service providers are identified as some of the reasons for low uptake of end of life care by BAME communities. The report authors say these issues can in part be addressed by improving communication with the patient and their family.

Home-based dying preference investigated

Heterogeneity and changes in preferences for dying at home: a systematic review.

Home-based models of hospice and palliative care are promoted with the argument that most people prefer to die at home. This paper examines the heterogeneity in preferences for home death and explored, for the first time, changes of preference with illness progression.

Read the full paper here

Core competencies in palliative care: an EAPC White Paper

The purpose of this White Paper is to address the question: 'What competencies for clinical practice in palliative care are important for all practitioners, irrespective of their specific discipline?'. The White Paper aims:

- To provide guidance on the substantive competencies for all health and social care professionals undertaking academic and/or clinical education in palliative care throughout Europe
- To describe core competencies specifically targeted towards practitioners offering a palliative care approach in their work and those working in general palliative care, in order to address the learning needs of the vast majority of healthcare professionals working with patients affected by life threatening illness.

The white paper can be accessed here: part 1 part 2

TRFT Enquiry service

A literature search and enquiry service is available to all Hospice staff in Rotherham.

We aim to find the best available evidence to support patient care, service development, research and continuing professional development.

If you need information simply contact us with details of your enquiry by email to

Knowledge.service@rothgen.nhs.uk

Or fax it to: 01709 302002