

# Conference report

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## Urgency :

Need for palliative care: WHO 40.000.000 people

Huge increase in coststo be expected

## Advantages palliative care

Matches treatment goals

Higher quality of care

Less costly

## Patient perspective

Focus on social environment rather than single patient

Roles: not only patient but also dad, citizen etc

Needs: care and basic human needs and respect as a citizen

Stop, look, listen

Changes required from care that is centered around nurses to patient centered care

## Requirements palliative care

Increase knowledge in all professionals

Focus on needs of patients and family

Communication skills most important

Change in culture of death and dying

Skillful palliative care providers

## Focus in palliative care on

- Communication including the challenge of shared decision making
- Care plans to individualised care
- Consider that families do most of the work
- Timing, be were the patient is

## **Integration palliative care into the public health system**

- Need for models of integration and learn which models work effectively
- Integrate palliative care into the healthcare system
- Access, monitor and evaluate
- Apply healthcare tools to palliative care (registers)
- Reduce admissions just before dying

## Modeling palliative care and evidence

- Models in which QIs can be embedded
- Emphasis on continued learning including learning in practice.
- Focus on where the people are: home care services and nursing homes
- Specialisation and deskilling generalists
  
- Quality indicators: in some countries no accredited training.



## **Monitoring as a mean to improve quality of care**

Routine assesment

Need better evidence base

We need to measure progress (Connor)

Assessment base for personalised palliative care

**Quality Indicators**

**Implementation**

## **Discrepancy between needs in palliative care and evidence**

Need for access to palliative care and multi-disciplinary collaboration

Need for research funding

QI access: 24 hours services is a challenge for most services (Radbruch)

QI 6 electronic patient file not accessible 24/7

Budget:0.2% of NHI for palliative care

## **What is specific about palliative care compared to adequate person centered care?**

WHO definition not patient centered

Discussion on palliative care contraproductive

Don't change name, confusing for politicians and public, content should be adapted

Goes beyond conventional care and cure in healthcare

Palliative care can help to use resources better by reducing excessive use of available facilities (e.g. MRI)

Palliative care includes the principles of good care

## **European perspective:**

Encourage collaboration between states

Reduce inequality

EU expecting suggestions from research

Try to influence to include palliative care into disease specific guidelines

Use positive experiences from other countries

Now Momentum because programme is just starting