

Advice on Palliative Care



FOUR SEASONS
H E A L T H C A R E

Caring
for **YOU**... personally, practically and professionally

What is palliative care?

Palliative care is one aspect of the care of people with serious illness from which recovery is not expected.

Dealing with pain and other symptoms is important, but it also looks at the person as a whole, including their overall sense of wellbeing.

The goal of palliative care is to achieve the best quality of life for patients and their families, even if that life is likely to be short. Palliative care isn't only given once people are thought to be dying; much of it also helps earlier on, alongside other treatments.

Palliative care, which includes end of life care, is a positive approach to making death as acceptable as possible both for the person themselves and their loved ones.

What does palliative care involve?

Palliative care can be described as action to meet four main types of need:

- Physical – managing symptoms such as pain, sickness, tiredness or loss of appetite.

- Psychological – emotional support to the resident and those who care about them, giving time to listen to them and understand their concerns.
- Social – support and advice on practical matters.
- Spiritual – a need to explore thoughts about the meaning of life or concerns about what happens after death. All people are likely to have spiritual requirements and some may also have practical and diverse religious needs.

Issues for relatives

Knowing that you are likely to lose someone you care about can be very difficult and it is completely normal to feel a whole range of conflicting emotions.

If you find it difficult to cope before or after a death, talk to someone you feel comfortable with, in the family, in the care home or wherever seems right to you.

If you need more help, contact your GP for referral to emotional support or bereavement support services.

There are also likely to be local charities running services or support groups in your area. Ask your GP or the care home staff for suggestions.

Planning for palliative and end of life care

Care at the end of life is likely to be better if someone's wishes are known in advance, especially if the conversations can take place before these decisions are actually needed. For example, if someone's health deteriorates, do they think they would prefer to go to a care home or similar? Who would they wish to have with them at the end of life?

Having these advanced wishes recorded can help families and staff faced with a crisis situation, especially if this arises when the people who know the person best are not available.



What services are there to help?

Most palliative and end of life care needs can be met by people's usual carers, as long as they feel confident and competent. In fact, through visits from families and friends and the direct care from all kinds of care home staff, a great deal of palliative care will be provided.

Occasionally though, where the needs are particularly complicated, there may be a need to call on other experts to offer advice or training. These are increasingly available regardless of diagnosis or of where care is being provided.



This leaflet was compiled with information from The National Council for Palliative Care, the umbrella body for all involved in palliative care services in England, Wales & Northern Ireland.

For more information call 020 7697 1520 or visit their website at www.ncpc.org.uk.

**THE
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