

Introduction to Palliative Care

HHHPC

Jefferson Healthcare Palliative Care (JHPC) provides palliative care services in accordance with professional state and federal laws, regulations, and current accepted standards of care and professional practice. JHPC will meet the needs of patients and families/caregivers by coordinating care and collaborating with community resources to ensure continuity of care. JHPC services are being provided to the patient and family to the extent that their preferences and needs can be met in their physical environment and consistent with patient/family needs and goals.

Who Does JHHPC provide services to?

Patients with a serious illness

Patients who live north of Highway 104

Patients who need assistance with advance care planning

Patients who may need to discuss goals of care

Patients who have need for symptom management, including:

- Management of nausea, vomiting and weight loss
- Constipation, diarrhea
- Anxiety/depression
- Fatigue/insomnia



Examples of patients that might benefit from JHPC services, include:

- Cancer
- CHF
- COPD
- Fractures that are non-surgical candidates
- Dementia (Alzheimers and Parkinsons)
- Failure to thrive, slow decline
- Liver failure that are not transplant appropriate
- Kidney failure that are not transplant appropriate
- AIDS
- MS
- MI - initial
- CVA – initial

Exclusions to
Palliative Care
include:

Chronic Pain

Substance Abuse

Behavioral Health

Pediatric

Goals of care:



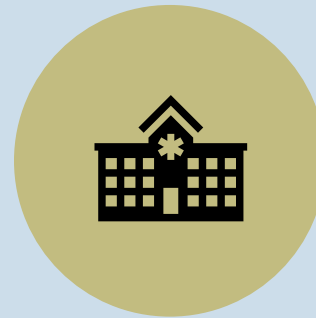
Help facilitate an understanding of the scope of illness and likely progression



Identify relevant values and goals



Define “acceptable” and “unacceptable” quality of life



Encourage consideration of goals of treatment in context of non-illness related priorities. “What matters most?”

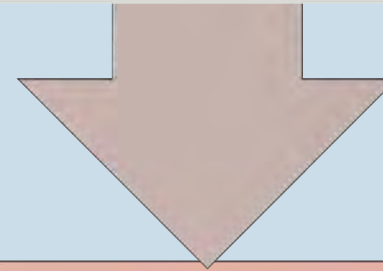
JHPC
provides 2
types of care:

Consultative Method of PC – Specific request about a specific problem

No prescribing responsibility

No on-call responsibility

PC team makes recommendations to referring provider



Co-Management Method of PC

Collaborate with referring provider

PC team may be responsible for scripts for symptoms

No on-call responsibility

The palliative care team works with other clinicians and community service providers supporting continuity of care throughout the illness trajectory and across all settings, especially during transitions of care.

Those services that are not provided directly will be referred as appropriate.