

Nursing Practice of Palliative Care with Critically Ill Older Adults

Joan E. Dacher, PhD, MS, BS, GNP

KEYWORDS

- Palliative care • Critically ill older adults
- Clinical practice guidelines for quality palliative care
- Palliative care nursing practice with critically ill older adults

KEY POINTS

- The goal of palliative care is to prevent and relieve suffering, regardless of the stage of the disease or the need for other therapies.
- The National Consensus Project Clinical Practice Guidelines for Quality Palliative Care set the standard for palliative care in all settings, across all ages.
- Nurses can take a leadership role in pain and symptom management, identifying patient preference for goals of care, enhancing communication, and facilitating the family meeting.

INTRODUCTION

An unintended consequence of longevity and the aging of the population is an increase in the numbers of older adults experiencing critical illness, high disease burden, and the increased likelihood of hospitalization, specifically a patient on a critical care unit. By 2030, 9 million Americans will be older than 85 years and will experience disability and chronic illness, an increase from 4.2 million in 2000. Medicare beneficiaries with 5 or more chronic conditions are the fastest growing segment of the Medicare population.¹ Questions emerge within the literature as to the appropriateness of intensive medical intervention for many elders, particularly in light of the poor survival rates and diminished functional outcome experienced by many.² Evidence indicates that physicians are inaccurate and overly optimistic in the prognosis of terminally ill patients.³ Once admitted to the critical care unit, elderly patients may enter into a trajectory of technologically intensive care, and in the absence of clearly articulated choices (made available at the point of care within the critical care unit), patients and families may default to the medically intensive care at hand.

Research supports the view that most Americans are not aware of the availability of any options for advanced care.¹ However, options do exist. Palliative care is emerging

Department of Nursing, The Sage Colleges, 65 First Street, Troy, NY 12180, USA
E-mail address: dachej@sage.edu

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as an alternative care paradigm for critically ill older adult patients in the critical care setting, one that may radically alter prevailing assumptions about the care delivered and received in the critical care unit. Critical care nurses are well positioned to take on a leadership role in reconceptualizing care in the critical care unit, and creating the space and opportunity for palliative care. The purpose of this article is to provide critical care nurses with information on the practice of palliative care with critically ill older adults in addition to evidence-based content and resources, allowing them to advocate for palliative care in their own work environments accompanied by the necessary resources that will support efficient implementation.

National Consensus Project for Quality Palliative Care

A conceptual framework for implementing palliative care into health care settings can be found within the Clinical Practice Guidelines for Quality Palliative Care (CPG) released by the National Consensus Project for Quality Palliative Care. Clinical practice guidelines for quality palliative care, third edition, 2013. Available at: http://www.nationalconsensusproject.org/Guidelines_Download2.aspx. Accessed May 1, 2013. By making these quality guidelines available, the likelihood that evidenced based palliative care will be provided in all settings, including critical care, is enhanced. The Guidelines embody the highest standard for palliative care practice across the continuum of care. Endorsed by The National Quality Forum this affiliation assures measurable quality indicators for practice and an important element of legitimacy in light of the evidence that supports the application of these standards across health care. With its emphasis on the interdisciplinary team and the inclusion of the need to include age-specific disciplines and specialties with the plan of care, these CPG are appropriate for application for care of critically ill older adults within the critical care unit.

DEFINITION OF PALLIATIVE CARE

For the purposes of this article the definition of palliative care put forth by the National Consensus Project is used. This definition is contemporary and makes explicit the scope of support and services that are the necessary for the delivery of quality palliative care. Among other definitions of palliative care that are frequently encountered is that of the World Health Organization which is similar in spirit and intent. According to the National Consensus Project:

The goal of palliative care is to prevent and relieve suffering and to support the best possible quality of life for patients and their families, regardless of the stage of the disease or the need for other therapies. Palliative care is both a philosophy of care and an organized, highly structured system for delivering care. Palliative care expands traditional disease-model medical treatments to include the goals of enhancing quality of life for patient and family, optimizing function, and helping with decision making, and providing opportunities for personal growth. As such, it can be delivered concurrently with life-prolonging care or as the main focus of care.^{4(p6)}

It is worth noting that palliative care is often thought to be a proxy term for hospice, and that the differences between the two are not well recognized or understood. Though different, there is a relationship between them. In understanding the two terms relative to each other, palliative care can be understood as the umbrella concept, the overarching philosophy that addresses care for individuals with severe and life-threatening illness, over the entire course of that illness, regardless of prognosis and expected length of life. Hospice refers to an organization that provides care for individuals at the end of life. The hospice insurance benefit sets the parameters for

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