

REGIONAL PALLIATIVE CARE PROGRAM CRITERIA FOR ADMISSION

Palliative Care Is:

Active total care offered to a patient with progressive disease and their family when it is recognized that the illness is no longer curable, in order to concentrate on the quality of life and the alleviation of distressing symptoms in the framework of a coordinated service. Palliative Care neither hastens nor postpones death. It provides relief from pain and other distressing symptoms and integrates the psychological and spiritual aspects of care. In addition, it offers a support system to help relatives and friends cope during the patient's illness and bereavement.

(Medical/Nursing/Midwifery Advisory Committee-United Kingdom)

Based upon this definition, all people admitted to the program will:

- be experiencing progressive disease where the focus of care is on comfort, not cure, and improving their quality of life
- require active care to alleviate distressing symptoms related to physical, psychosocial and spiritual needs

Approximately 85-90% of these people will have a cancer diagnosis.

Admission Criteria to Specific Areas:

Home

- above criteria
- expected length of stay on the program of approximately 3-4 months
- do not require acute/tertiary care
- the ability to provide services within financial resources
- desire for the person/family to be cared for at home

Palliative Hospice

- above criteria
- cannot be managed at home
- do not require acute/tertiary care
- expected length of stay of approximately 2 months
- over 18 years
- accepting of no code status

Acute Care

- for management of acute medical problems (i.e. pathological fracture, bleed, acute respiratory distress)
- anticipated short stay

Tertiary Palliative Care Unit

- severe symptom problems for which management has not been successful in any of the other settings, and requiring intensive management
- expected length of stay of approximately 2 weeks
- over 18 years
- accepting of no code status