## Health Promoting Palliative Care

## Nurturing roots to bring new growth.

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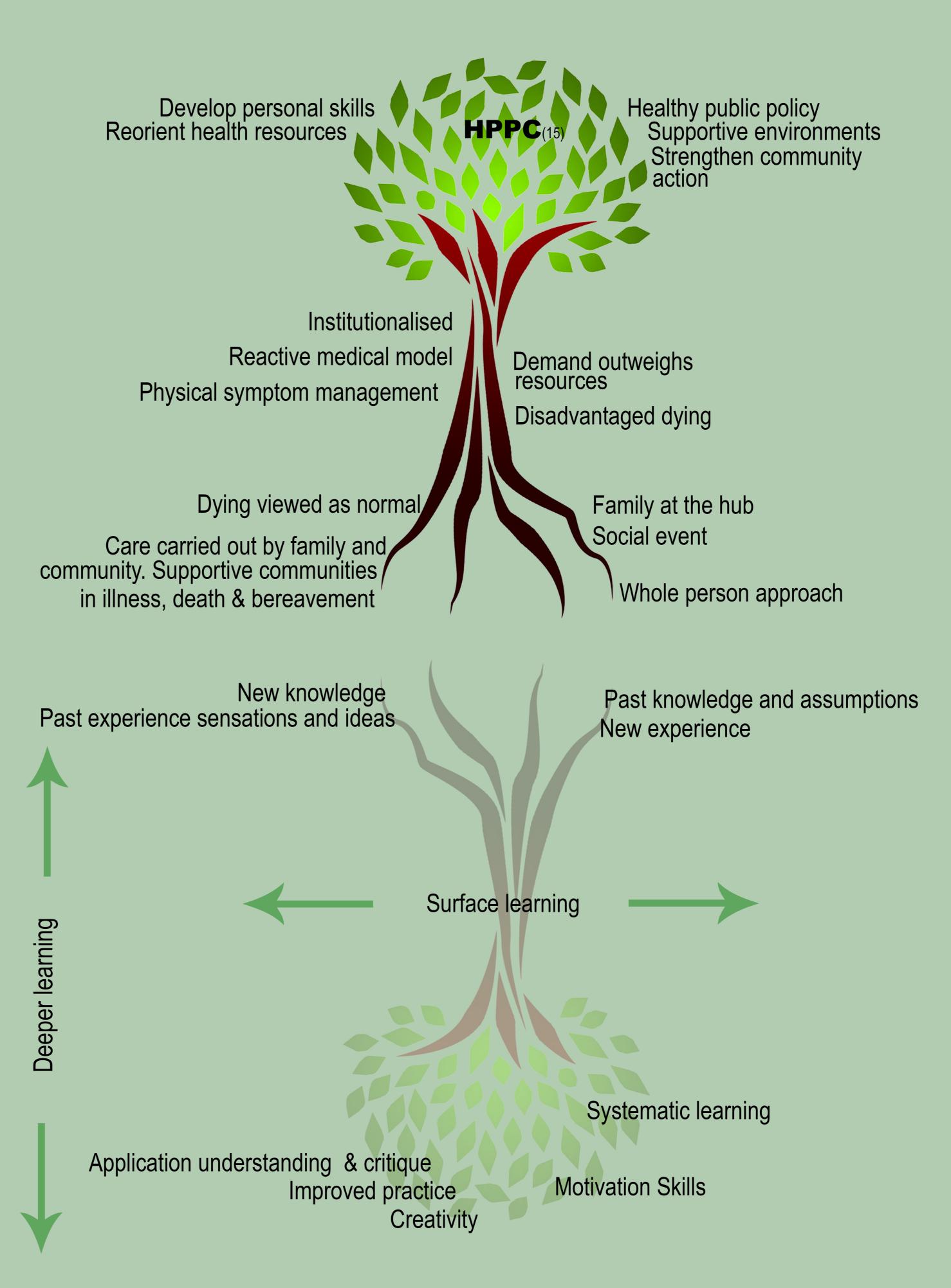


World Health Organisations philosophy of palliative care is to improve the life of individuals and their families facing the problems associated with life limiting disease by means of early identification through the impeccable assessment and treatment of problems, physical, psychological and spiritual (1). Throughout history palliative care has its roots in Health promotion ethos. From the road side hospices in the middle ages for pilgrims to the community care carried out by friends and families when illness, infirmity, death and bereavement struck to the advent of the National Health service (2).

With the modern hospice movement Dame Cicely Saunders is renowned for stating 'you matter because you are you, and you matter until the last moment of your life. We will do all we can, not only to help you die peacefully but to help you live until you die' (3) As well as 'there is so much more to be done' (3a). With this in mind it becomes clear that palliative care moves beyond the hospital bedside and into the community.

Ottawa Charter (4) outlined health promotion strategies in line with the philosophy of palliative care and due to the global inequalities there is debate about palliative care becoming a basic human right (5). How do we prevent over burgeoning a key service? Many key documents local, national and international (6,7,8,9,10) advocate and give clear evidence base for the promotion of a shift in direction from a medical to a social model of health in palliative care. There are barriers to HPPC (11) and the skills required of the advanced practitioner include the ability to provide education/ facilitation, research participation, change management and leadership (12) as examples and challenges come from political, professional and public domains. Using frameworks (13,14) will help to shape and drive policies and standards, best practice and quality of life criteria and can be used in clinical audit and research (15). They help to develop self awareness, deeper learning, bring about a new understanding and change practice. Since the main aim of palliative care is to help maintain quality of life a HPPC framework can facilitate a change of direction and help to strengthen community actions. Not only education of health but also death education.

Health promotion palliative care (HPPC) framework (13)



## Critical reflection framework (14)

## References:

1. World Health Organisation. 2002. National Cancer Control Programmes, policies and managerial guidelines, 2nd ed. Geneva: World Health Organisation. 2. Kellehear, A. 2005. Compassionate Cities. Oxfordshire: Routledge. 3. Saunders, C. 1978. Forward. In: D. Hanks, G. MacDonald, N. eds. 1998. Oxford Textbook of Palliative Medicine. 2nd ed. Oxford University Press. 3a. St Christophers Hospice 2012. Dame Cicely Saunders- her life and work. Available at: www.stchristophers.org.uk/about/damecicelysaunders

Accessed 12/11/12. 4. World Health Organisation. 1986. The Ottawa Charter for Health Promotion. Available at: www.who.int/healthpromotion/ conferences/previous/ottawa/en/ Accessed 12/11/12. 5. Batise, X. and Paz, G. 2007. Public Palliative Care: a review of key developments and implementation issues. Current Opinion in Supportive and Palliative Care. 1. pp 213-217. 6. Scottish Government. 2008. Living and Dying Well: A National Action Plan for Palliative Care and End of Life Care in Scotland. Edinburgh. 7. Scottish Government. 2011. Living and Dying Well: Building on Progress. Available at: http://www.scotland.gov.uk/publications/2011/01/27090834/0

8. NHS Lotian. 2010. Living and Dying Well in Lothian- Lothian's Palliaitve anad End of Life Care Strategy 2010-15. Available at: http://www.nhslothian.scot.nhs.uk/OurOrganisation/strategies/ladwinlothian/Pages/default.aspx 9. World Health Organisation. 1986. The Ottawa Charter for Health

Promotion. Available at: www.who.int/healthpromotion/conferences/previous/ottawa/en/

10.NHS Scotland.2010. The Healthcare Quality Strategy for NHS Scotland. Edinburgh: Scottish Government. 11. Fook, J. Kellehear, A. 2010. Using critical reflection to support health promotion goals in palliative care. Journal of Palliative Care. 26:4: pp 296-302. 12. Reed, S. 2010. A unitary-caring conceptual model for advanced nursing in palliative care. Holistic Nursing Practice. 24, (1) pp. 23-34. 13/14. Keicher, T. 2012. Health Promoting Palliative Care. Nurturing roots to bring new growth. Poster presentation. 15. Keleher. H, MacDougall. C, and Murphy B. 2007. Understanding health promotion, Oxford University Press Melbourne.