

Planning and implementing palliative care services:

a guide for programme managers



**World Health
Organization**

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Contents

List of tables	v
List of figures	v
List of acronyms and abbreviations	vi
Foreword	1
Acknowledgements	2
1: Introduction – the need for palliative care	5
1.1 What is palliative care?	5
Who needs palliative care?	5
1.2 Government commitments to provide palliative care	6
1.3 Purpose and scope of this guide	7
2: Palliative care services – overview	9
2.1 Identifying who can benefit from palliative care	9
Assessing the needs of patients and their families	9
2.2 Relief of pain and other symptoms	10
Common symptoms	10
General principles	10
2.3 Addressing psychosocial and spiritual needs	12
2.4 Caring for families and caregivers	13
3: Establishing palliative care services	17
3.1 Deciding where to start	17
3.2 Setting up a home-based palliative care service	18
What is home-based palliative care?	18
Essential requirements for a home-based palliative care service	18
How to set up a home-based palliative care service	20
3.3 Setting up a community-based palliative care service	21
What is community-based palliative care?	21
How to set up a community-based palliative care service	22
3.4 Setting up a hospital-based palliative care service	26
Options for a hospital-based palliative care service	26
How to set up a hospital-based palliative care service	27
Staffing the hospital-based palliative care service	28
3.5 Setting up a palliative care service for children	29
Minimum staffing requirements	30
Requirements for a palliative care service for children	31
Process for developing a palliative care service for children	32
3.6 Setting up a stand-alone palliative care centre or hospice	33
Scope of services and support provided	33
Target group of patients	35
Human resources	36

Reliable availability of essential medications -----	37
Funding -----	37
3.7 Establishing an integrated approach in a district -----	38
What makes for successful integration? -----	39
Stages of integration -----	39
4: Components of a comprehensive approach to palliative care-----	47
4.1 What is a comprehensive approach? -----	47
4.2 Developing a palliative care policy -----	47
Situation assessment -----	49
4.2 Scaling up and integrating palliative care into the health-care system-----	50
4.3 Improving access to medicines for pain relief and palliative care -----	53
Barriers to pain management in palliative care -----	53
Strategies to improve access to medicines for palliative care -----	54
4.4 Strengthening human resources for palliative care -----	59
Who are palliative care providers? -----	59
Defining core tasks and skills -----	60
Task-shifting -----	62
Strengthening palliative care in the primary care workforce -----	63
Developing skills and training-----	63
4.5 Setting standards and evaluating palliative care services-----	65
Evaluating overall progress in palliative care development-----	65
Measuring palliative care quality -----	66
Other dimensions to consider -----	67
Setting standards for palliative care-----	67
4.6 Costing palliative care services-----	69
Cost impact of palliative care -----	69
Costing palliative care-----	69
5: Other WHO tools and resources -----	73
Clinical management in palliative care-----	73
Policy and programme design -----	73
Monitoring palliative care-----	73
Advocacy and communications -----	74
References -----	75
Annex 1: WHO Model List of Essential Medicines for palliative care -----	79
Annex 2: WHO Model List of Essential Palliative Care Medicines for Children-----	81
Annex 3: Sample basic equipment and medicines for a palliative care home-care kit-----	83
Annex 4: Sample curriculum for a 16-hour training programme in palliative care for community volunteers-----	85
Annex 5: Sample curriculum in basic palliative care for doctors and clinical officers -----	86
Annex 6: World Health Assembly resolution WHA67.19 "Strengthening of palliative care as a component of comprehensive care throughout the life course" -----	89

List of tables

Table 1.	Essential practices for primary palliative care -----	9
Table 2.	Categories of palliative care services -----	17
Table 3.	Suggested minimum training standards for the home-care team -----	20
Table 4.	Key human resources required for a community-based palliative care service -----	22
Table 5.	Minimum staffing required for a hospital-based palliative care service -----	29
Table 6.	Ideal health workforce for a paediatric palliative care service -----	30
Table 7.	Different roles and functions of a stand-alone palliative care centre or hospice -----	34
Table 8.	Example of a step-wise approach to introducing a palliative care programme -----	51
Table 9.	Key factors for successful implementation of an essential medicines list -----	55
Table 10.	Trained health workers able to perform palliative care tasks safely and effectively -----	62
Table 11.	Sample indicators for assessing overall palliative care development -----	66

List of figures

Figure 1.	Examples of scenarios with different levels of care to meet palliative care needs -----	18
Figure 2.	Minimum requirements for a home-based palliative care service -----	19
Figure 3.	Steps for establishing a home-based palliative care service -----	20
Figure 4.	Process for starting a new community palliative care service -----	25
Figure 5.	Steps for establishing a hospital-based palliative care service -----	28
Figure 6.	Children in need of palliative care by disease group -----	30
Figure 7.	Steps for establishing a pediatric palliative care service -----	32
Figure 8.	An example of integration between different levels of palliative care services -----	39
Figure 9.	Steps required in integration of palliative care -----	40
Figure 10.	Integrating palliative care into district health services -----	41
Figure 11.	Identifying gaps in palliative care in district health services -----	41
Figure 12.	The 11 Ps of successful palliative care integration -----	42
Figure 13.	Example of a stepwise process for developing palliative care -----	48
Figure 14.	Where palliative care is provided -----	59



List of acronyms and abbreviations

APCA	African Palliative Care Association
CHC	Community health centre
CHEW	Community health extension workers
CNPC	Community Network in Palliative Care (Jakarta)
CoHSASA	Council for Health Services Accreditation of Southern Africa
CVW	Community volunteer workers
EAPC	European Association of Palliative Care
ESAS	Edmonton Symptom Assessment Scale
HIV/AIDS	Human immunodeficiency virus infection and acquired immune deficiency syndrome
HPCA	Hospice Palliative Care Association (HPCA) of South Africa
IAHPC	International Association for Hospice and Palliative Care
ICHC	Integrated community-based home care
INCB	International Narcotics Control Board
IPPF	International Pain Policy Fellowship
MTRH	Moi Teaching and Referral Hospital
NCDs	Noncommunicable diseases
NGOs	Non-governmental Organizations
NNPC	Neighbourhood Network in Palliative Care (Kerala)
NSAIDs	Non-steroidal anti-inflammatory medicines
PHO	Public Health Officer
POS	Palliative Outcome Score
PPSG	Pain and Policy Studies Group, University of Wisconsin, WHO Collaborating Centre for Pain Policy and Palliative Care
THET	Tropical Health and Education Trust
WHO	World Health Organization

Foreword

In 2014, the first ever global resolution on palliative care, WHA 67.19, called upon WHO and Member States to improve access to palliative care as a core component of health systems, with an emphasis on primary health care and community/home-based care. In the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013-2020, palliative care is explicitly recognized as part of the comprehensive services required for the noncommunicable diseases. Member States have requested WHO to develop evidence-based tools on integrating palliative care into national health systems, across disease groups and levels of care. High-quality palliative care is an explicit element of the WHO Framework on integrated people-centred services, approved at the 69th World Health Assembly in 2016.

This is a practical manual on how to plan and implement palliative care services, integrated into existing health-care services, at national or subnational level. It has been designed primarily for health programme managers at national, provincial, or district level, whether they are responsible for noncommunicable diseases, infectious disease programmes, health services, or other technical areas where palliative care is important.

It aims to describe a range of options and starting points for building and strengthening palliative care services. A step-wise approach is outlined in each section as much as possible, with an emphasis on approaches that are feasible for low- and middle-income settings. This manual should contribute to providing equitable access to good palliative care in the context of Universal Health Coverage; it should help countries to strengthen palliative care programmes especially at primary health care level and across disease groups. The approach is based on people-centredness with an aim to address the patients' needs and expectations. To do so, health services need to involve health-care workers as well as the patients and their communities in a proactive way, taking into account the social and cultural specificities.

This manual does not cover clinical guidelines or protocols for patient care – existing WHO guidance for pain and symptom management and a range of further tools and resources that users may find helpful are listed at the end. In the future this manual should be complemented with a series of publications addressing more specific aspects of palliative care and additional measurement tools to monitor the quality of palliative care at country level.

Access to palliative care has been identified as a fundamental right. With this manual WHO reaffirms its commitment to work with Member States in order to ensure that this becomes a reality for everyone: adults, older people and children.

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