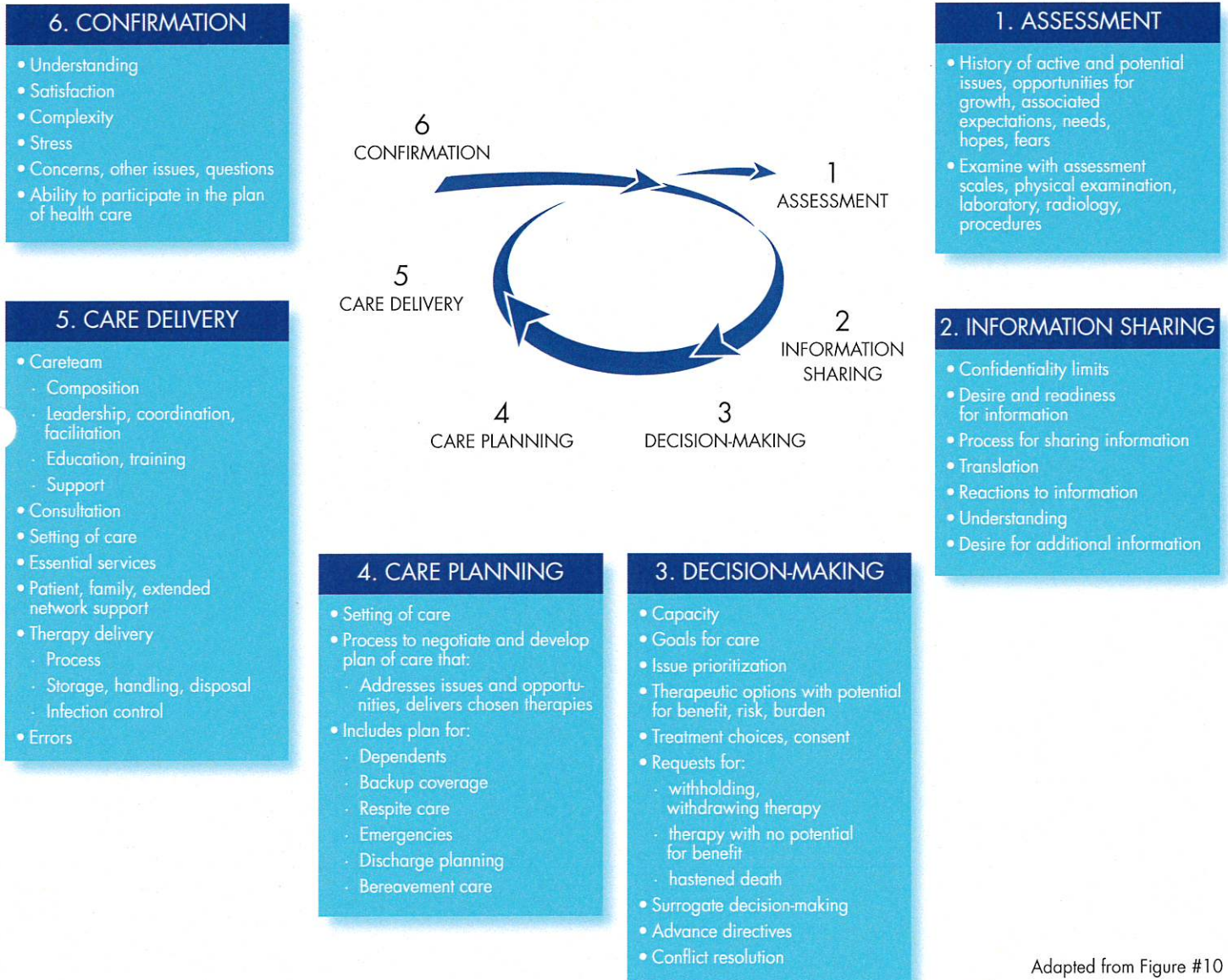


NORMS of PRACTICE

The Process of Providing Care

ESSENTIAL AND BASIC STEPS DURING A THERAPEUTIC ENCOUNTER



Adapted from Figure #10

"While hospice palliative care has grown out of "care for the dying," the concepts can now be used to guide care at any point during an acute, chronic, or life-threatening illness, or bereavement." p.53

Source: A Model to Guide Hospice Palliative Care: Based on National Principles and Norms of Practice.

Canadian Hospice Palliative Care Association (CHPCA). March 2002. 131C — 43 Bruyère Street, Ottawa, Ontario, Canada K1N 5C8.

Visit www.chpca.net to view this document in its entirety.



NSMHPCN
North Simcoe Muskoka Hospice Palliative Care Network

DOMAINS OF ISSUES ASSOCIATED WITH ILLNESS AND BEREAVEMENT



* Other common symptoms include, but are not limited to: **Cardio-respiratory:** breathlessness, cough, edema, hiccups, apnea, agonal breathing patterns. **Gastrointestinal:** nausea, vomiting, constipation, obstipation, bowel obstruction, diarrhea, bloating, dysphagia, dyspepsia. **Oral conditions:** dry mouth, mucositis. **Skin conditions:** dry skin, nodules, pruritus, rashes. **General:** agitation, anorexia, cachexia, fatigue, weakness, bleeding, drowsiness, effusions (pleural, peritoneal), fever/chills, incontinence, insomnia, lymphoedema, myoclonus, odor, prolapse, sweats, syncope, vertigo.

Adapted from Figure #7

Providing a Shared Vision

"so that patients and families can realize their full potential to live even when they are dying." p.87

Hospice palliative care aims to relieve suffering and improve the quality of living and dying. **Hospice palliative care** strives to help patients and families: address physical, psychological, social, spiritual and practical issues, and their associated expectations, needs, hopes and fears; prepare for and manage self-determined life closure and the dying process; cope with loss and grief during the illness and bereavement. **Hospice palliative care** aims to: treat all active issues; prevent new issues from occurring; promote opportunities for meaningful and valuable experiences, personal and spiritual growth, and self-actualization. **Hospice palliative care** is appropriate for any patient and/or family living with, or at risk of developing, a life-threatening illness due to any diagnosis, with any prognosis, regardless of age, and at any time they have unmet expectations and/or needs, and are prepared to accept care. **Hospice palliative care** may complement and enhance disease-modifying therapy or it may become the total focus of care. p. 17

