



COLLEGE & ASSOCIATION
OF REGISTERED NURSES
OF ALBERTA

Position Statement on Hospice Palliative Care

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Approved by the Alberta Association of Registered Nurses (AARN) in September 2005 for use when regulations for registered nurses are proclaimed under the *Health Professions Act* (HPA) and the AARN becomes the College and Association of Registered Nurses of Alberta (CARNA).

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POSITION STATEMENT ON HOSPICE PALLIATIVE CARE

Many registered nurses in a wide variety of settings provide care for people living with advanced illness. The purpose of this document is to reflect current beliefs and principles guiding the practice of registered nurses in hospice palliative care.

DEFINITION

Hospice palliative care aims to relieve suffering and improve the quality of life throughout the illness and bereavement experience, so that clients¹ and families can realize their full potential to live even when they are living and dying (Ferris et al., 2002.)

PRINCIPLES RELATED TO HOSPICE PALLIATIVE CARE

Hospice palliative care is health care provided for people and their families who are living with a life-threatening illness that is usually at an advanced stage. The goal is to improve quality of life for the person, provide comfort, maintain the person's dignity and recognize that the person's priorities, values and choices are to be respected and considered in every aspect of the care required. All persons and families with advanced illness should have access to appropriate hospice palliative care services regardless of their age, gender, national and ethnic origin, geographical location, race, color, language, creed, religion, sexual orientation, diagnosis, disability, availability of a primary caregiver, ability to pay, criminal conviction and family status (Canadian Hospice Palliative Care Association Nursing Standards Committee [CHPCA], 2002.)

The College and Association of Registered Nurses of Alberta (CARNA) believes that the following principles are fundamental to palliative care. These principles are grouped in four categories: the person and the family, quality of care, the environment and hospice palliative care nursing.

The Person and the Family

- Nursing care is directed towards meeting the physical, psychological, social and spiritual expectations/needs of the person and their family.
- The person decides who their *family* is.
- Nursing care is provided through evidence-based practice, with sensitivity to personal, cultural and religious values, beliefs and practices (CHPCA, 2002.)
- Every person has the right to participate in informed discussions about options and choices for care that can help optimize quality of life during the course of living with life-threatening illness (CHPCA, 2002.)
- Every person has the right to determine who has access to their personal information and who may participate in care decisions.
- The needs, strengths and resources of the person and family are included in the plan of care.

¹ The term 'client' can refer to patients, residents, families, groups, communities and populations.

Quality of Care

- Hospice palliative care services and access to hospice palliative care expertise needs to be available twenty-four hours a day, seven days a week.
- Hospice palliative care services include grief and bereavement support throughout the illness and following death (CHPCA, 2002.)
- Coordination of hospice palliative care services among care providers and across settings is fundamental.
- A plan of care that minimizes duplication and gaps needs to be clearly communicated and maintained across all care settings (CARNA, 2003.)
- Organizational support and resources are essential to coordinate, organize and ensure accountability in hospice palliative care.
- Collaboration and effective communication among care providers is essential for quality care.
- Quality of life is defined by each person and their family and death is recognized as part of the natural process of life.
- Access to current palliative care information, pain and symptom management, and supportive care is essential.

The Environment

- The setting where care is to be provided and death is to occur is guided whenever possible by the preference of the person and family.
- Effective hospice palliative care requires interdisciplinary teamwork.
- The interdisciplinary team should include the person and family, registered nurses, physicians, other health professionals, para-professionals and volunteers.
- Registered nurses are necessary members of palliative care teams, as they fulfill a number of essential roles with their specialized knowledge, skill and education.
- Workplace cultures that support health professionals need to be developed and maintained so that teams can work well together and identify areas of hospice palliative care that need to be developed or improved.
- The needs of hospice palliative care team members need to be recognized, respected and addressed. Team members need emotional support and assistance from colleagues and their organization to minimize their occupational risk due to psychological and emotional stress. This support reduces their risk of burnout and job turnover, minimizes the risk of errors, and helps them to develop reasonable expectations for prognosis and outcomes for each individual client and family (CHPCA, 2002.)

Hospice Palliative Care Nursing

- All entry-level nursing education programs should have a core hospice palliative care component that includes pain and symptom management, psychosocial support, and grief and bereavement. All registered nurses need education in caring for people and families to live even when they are living and dying.
- All registered nurses should have access to continuing education in hospice palliative care.
- All registered nurses in practice should have access to registered nurses with specialized knowledge in hospice palliative care.
- Registered nurses need to recognize the signs of stress that lead to self-exhaustion and identify strategies for dealing with stress for themselves and their colleagues when caring for people and families living with advanced illness.
- Nursing research in hospice palliative care is fundamental for the enhancement of nursing practice and to help people with advanced illness to live well and die well.
- Registered nurses need to advocate for appropriate resources to improve knowledge of hospice palliative care services and access to hospice palliative care services in all settings.
- Registered nurses have a role in supporting family and volunteer caregivers in providing complex care in a person's home.

The Role of the Registered Nurse

The Registered Nurse...

- aims to improve quality of life through efforts to alleviate physical, emotional, psychological and spiritual suffering
- advocates for and involves the person and family in health care decision-making (CNA, 2002)
- applies a unique body of knowledge, skill and experience to provide individualized and effective hospice palliative care nursing
- uses the nursing process of assessment, planning, implementation and evaluation to provide and improve palliative care (CARNA 2004)
- identifies and responds to all the complex and multiple issues that clients and families may face including discussion of end-of-life issues (CNA, 2000; Canadian Healthcare Association, et al., 1995; Canadian Home Care Association, et al., 1994)
- uses an approach to clinical decision making that provides guidance and support in addressing ethical questions and concerns that registered nurses face in different ways across a variety of practice settings (CARNA 2005; CNA, 2002)
- advocates for basic and advanced hospice palliative care education
- advocates for the development and funding of effective hospice palliative care services
- strengthens hospice palliative care by encouraging positive societal attitudes toward living with an advanced illness and that death is a natural process

- advocates for the development and maintenance of health-care environments conducive to ethical practice and to the health and well-being of clients and others in the setting (CNA, 2002)

Registered nurses need to assume a leadership role in facilitating the coordination and implementation of hospice palliative care services. Registered nurses' contribution to hospice palliative care is vital as they have the knowledge, education and skill to provide hospice palliative care nursing to people and their families.

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