University of Huddersfield Repository

Hardy, Beth

Primary care palliative and supportive care services: Experiences and perceptions of patients with advanced progressive disease and their informal carers

Original Citation


This version is available at http://eprints.hud.ac.uk/id/eprint/4802/

The University Repository is a digital collection of the research output of the University, available on Open Access. Copyright and Moral Rights for the items on this site are retained by the individual author and/or other copyright owners. Users may access full items free of charge; copies of full text items generally can be reproduced, displayed or performed and given to third parties in any format or medium for personal research or study, educational or not-for-profit purposes without prior permission or charge, provided:

- The authors, title and full bibliographic details is credited in any copy;
- A hyperlink and/or URL is included for the original metadata page; and
- The content is not changed in any way.

For more information, including our policy and submission procedure, please contact the Repository Team at: E.mailbox@hud.ac.uk.

http://eprints.hud.ac.uk/
Primary care palliative and supportive care services: Experiences and perceptions of patients with advanced progressive disease and their informal carers. A project summary.

PhD Research–Beth Hardy. Supervisors–Prof. Nigel King, Jan Firth, Alison Rodriguez.

Palliative care can be defined as the active, holistic care of patients with advanced progressive illness, and incorporates symptom management with psychological, social and spiritual care (WHO, 1990). Palliative care is for patients in the advanced stages of illness.

Supportive care follows people throughout the process of their disease, from pre-diagnosis, treatment, cure, continuing illness, death and into bereavement. The aim of supportive care is to maximise benefits of treatment and help people to live as well as possible with a disease (NCHSPCS, 2002).

The majority of palliative/supportive care is delivered in primary care, and up to 90% of people spend most of their last year of life at home (Aoun et al, 2005).

Palliative services were initially only available for cancer sufferers, however recent policy proclaims that palliative and supportive care services should be available to all, regardless of diagnosis (DoH, 2008) and a plethora of services now exist to meet these needs.

This research will take a interpretive phenomenological methodology to explore the experience of receiving these services from the perspectives of patients and their informal carers.

Example Pictor diagram done by a district nurse describing a case study of a patient with COPD in the last hours of life, and receiving care in the home environment.

References