

## AAP endorses guidelines that call for improved access to palliative care

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Alyson Sulaski Wyckoff, Associate Editor

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Updated AAP-endorsed guidelines released today aim to improve palliative care for all ages, in any setting, and regardless of diagnosis or prognosis.

The publication *Clinical Practice Guidelines for Quality Palliative Care*, 4th edition, is based on a systematic review of the evidence for the first time since the initial release in 2004. Health care professionals and organizations are urged to integrate consistent palliative care principles and best practices into routine assessment and care of all seriously ill patients, including neonates, children and adolescents.

More than 80 groups endorsed the guidelines developed by leaders from 16 organizations that make up the National Consensus Project for Quality Palliative Care. Published by the National Coalition for Hospice and Palliative Care, the guidelines are available at <a href="https://www.nationalcoalitionhpc.org/wp-content/uploads/2018/10/NCHPC-NCPGuidelines\_4thED\_web\_FINAL.pdf">https://www.nationalcoalitionhpc.org/wp-content/uploads/2018/10/NCHPC-NCPGuidelines\_4thED\_web\_FINAL.pdf</a>.

Ten review questions in the guidelines address eight domains in palliative care:

- 1. Structure and processes of care
- 2. Physical aspects of care
- 3. Psychological and psychiatric aspects of care
- 4. Social aspects of care
- 5. Spiritual, religious and existential aspects of care
- 6. Cultural aspects of care
- 7. Care of the patient nearing the end of life
- 8. Ethical and legal aspects of care

New recommendations in the 4th edition include the following:

- Provide a comprehensive assessment of each person living with serious illness to determine needs and priority goals.
- · Assess the needs of families and caregivers for support and education.
- Improve the coordination of care, especially during transitions.
- · Provide culturally inclusive care.
- · Ensure communication among all of those caring for the patient.

In addition, there is an emphasis on community-based resources and providers; more attention to anticipatory and post-death grief and bereavement; ongoing care of patients even if they have a specialist palliative care team; and references to research evidence.

"We realize it may be overwhelming for providers to offer palliative care if they haven't previously," Betty Ferrell, Ph.D., FAAN, FPCN, guidelines co-chair, said in a news release. "That's why the guidelines provide

extensive real-world practice examples to illustrate what quality palliative care can and should look like in the community."

## Resource

• For questions, email info@nationalcoalitionhpc.org or visit www.nationalcoalitionhpc.org/ncp.

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