



# Service Delivery Framework in Palliative & Elderly Care

































## LEARNING OBJECTIVES

At the end of the be able to:

1. Enumerate the palliative & elderly care services delivered at Community, SHC-HWC, and referral center level.

List the key ta
elderly care.

3. Understand role in coordination with field-level workers and Medical officers in palliative & elderly care.

### At the end of the session the participant should

2. List the key tasks of CHO in providing palliative

















# PALLIATIVE CARE SERVICES DELIVERED AT DIFFERENT LEVELS OF CARE















## **COMMUNITY LEVEL**

### **ASHA**

**Identify** patients in need of palliative care – using CBAC

**Document** palliative care services provided to individuals in her area & submit monthly report (Annexure 2)

Identify community volunteers for palliative care

Facilitate referral of patients requiring care to higher centres

### **ASHA and MPW**

Create awareness regarding palliative care - including in VHSNDs, VHSNC/MAS meetings

Home care visits as part of home care team (ASHA will coordinate)

Equip caregivers in simple nursing tasks

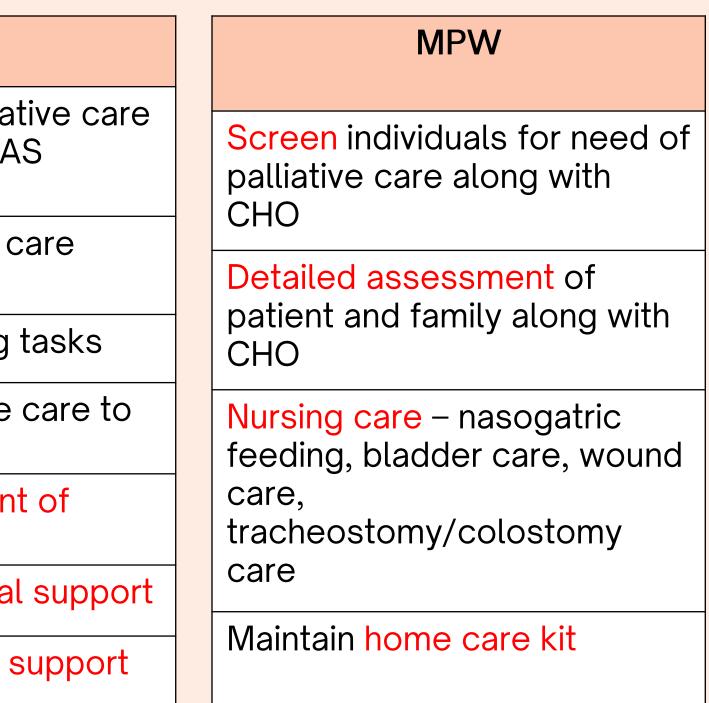
Notify & refer those needing more care to CHO

Non-pharmacological management of symptoms

Provide psychological and spiritual support

End of life care and bereavement support





















## **SHC-HWC LEVEL (CHO)**

### **Clinical functions**

Conduct detailed assessment of patients requiring palliative care (annexures 1,3)

Refer patients to higher centres for palliative care when needed.

Provide basic nursing care to palliative care patients, and perform necessary nursing procedures in required cases.

Provide home care as part of home care team.

### Public health functions

Take leadership in creating Patient Support Groups and Care givers Support Groups with community volunteers.

Conduct IEC and SBCC activities regarding palliativ care in the area, and to rec community volunteers.

Help patients/families avail benefits from various government and nongovernmental programs/schemes.

ons		Managerial functions
ng and ups rs.		Supervise the SHC-HWC team in identifying and line listing of individuals requiring palliative care.
tive ecruit		Maintain records of palliative care patients in the area, including referral and follow-up records.
		Maintain inventory control for the home care kit.
	h d	Maintain a list of palliative care hospitals and physicians up to district level with contact details.

















## **REFERRAL CENTRE LEVEL**

Palliative care outpatient services at least once a week (PHC/CHC/SDH/DH)

Palliative care inpatient services (CHC/SDH/DH)

**Prescription** of medicines including pain management

**Referral** to higher centre when needed

Provision of home care and end of life care on routine/emergency basis whenever needed

**Awareness** generation activities

Maintain relevant records

Maintain drugs and consumables and inventory control

Monitoring of palliative care activities of HWCs in the area

















# ELDERLY CARE SERVICES DELIVERED AT DIFFERENT LEVELS OF CARE



















The following slides show a list of various services for Elderly care. Participants will have to answer:

1. At what level of care is the particular service delivered?

2. Who is responsible for providing that service?





Identification and mapping of elderly in the village

Service



Risk assessment of elderly through CBAC form









Maintain records of OPD attendance of

elderly in SHC-HWC

evel of care	Provider



Identification and mapping of elderly in the village

Service



Risk assessment of elderly through CBAC form



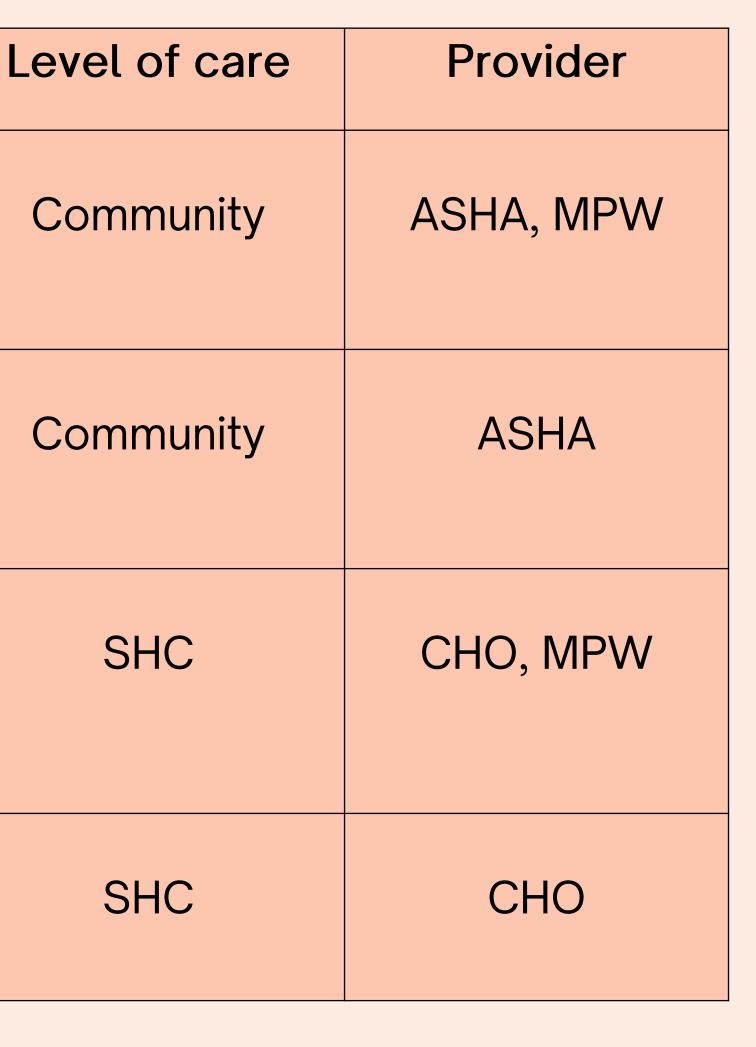




Maintain records of OPD attendance of elderly in SHC-HWC

Comprehensive Geriatric Assessment











Dispense medicines to elderly on prescription by MO

Promote healthy ageing through VHSNC/MAS

Service

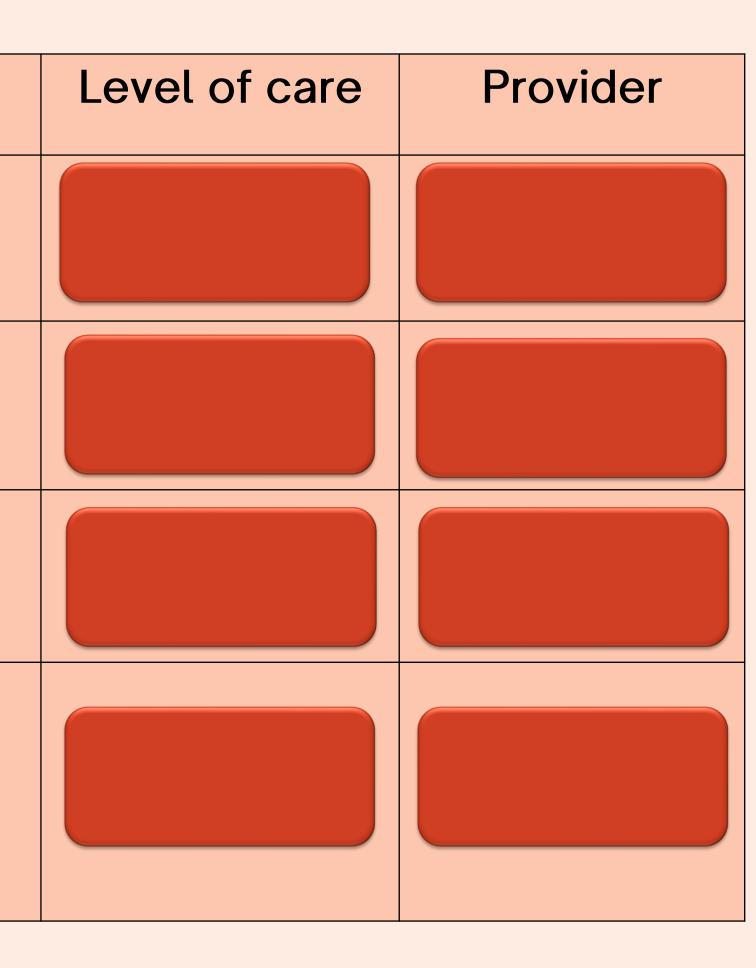






Formation of elderly & caregiver support groups

Referral of complicated cases to PHC-MO









Dispense medicines to elderly on prescription by MO

Promote healthy ageing through VHSNC/MAS

Service







Formation of elderly & caregiver support groups

Referral of complicated cases to PHC-MO

Level of care	Provider
Community	ASHA, MPW
SHC	CHO
Community	ASHA
SHC	CHO







Follow up of referred patients to ensure compliance to treatment

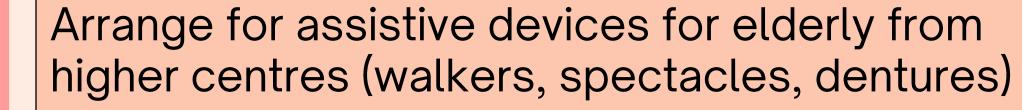
skills of the elderly







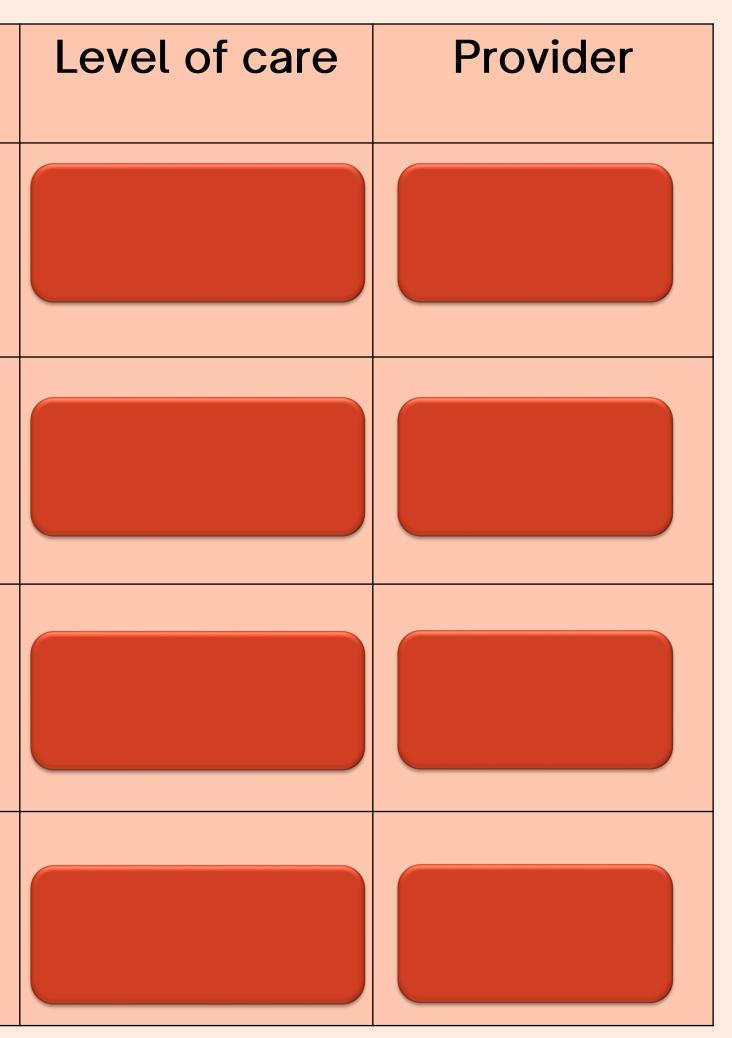




Educate and train caregivers in basic nursing



Medical and surgical treatment of complicated cases









Follow up of referred patients to ensure compliance to treatment

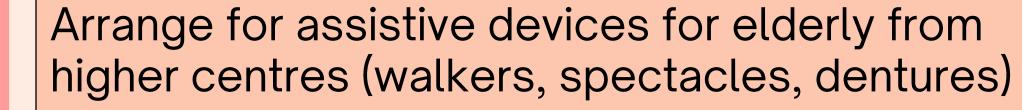
skills of the elderly











Educate and train caregivers in basic nursing



Medical and surgical treatment of complicated cases







Assist PHC-MO in providing management for common/emergency geriatric ailments

Service







NHSRC

Establish linkages with NGOs for elderly care services and health promotion activities

Provision of elderly care services at weekly fixed day geriatric clinic

Supportive supervision of MPW and ASHA in carrying out elderly care activities in the community

Level of care	Provider





Assist PHC-MO in providing management for common/emergency geriatric ailments

Service







NHSRC

Establish linkages with NGOs for elderly care services and health promotion activities

Provision of elderly care services at weekly fixed day geriatric clinic

Supportive supervision of MPW and ASHA in carrying out elderly care activities in the community

Level of care	Provider
PHC	Staff nurse
SHC, Community	CHO
PHC	MO
SHC	CHO

















# **REFERRAL PATHWAYS**









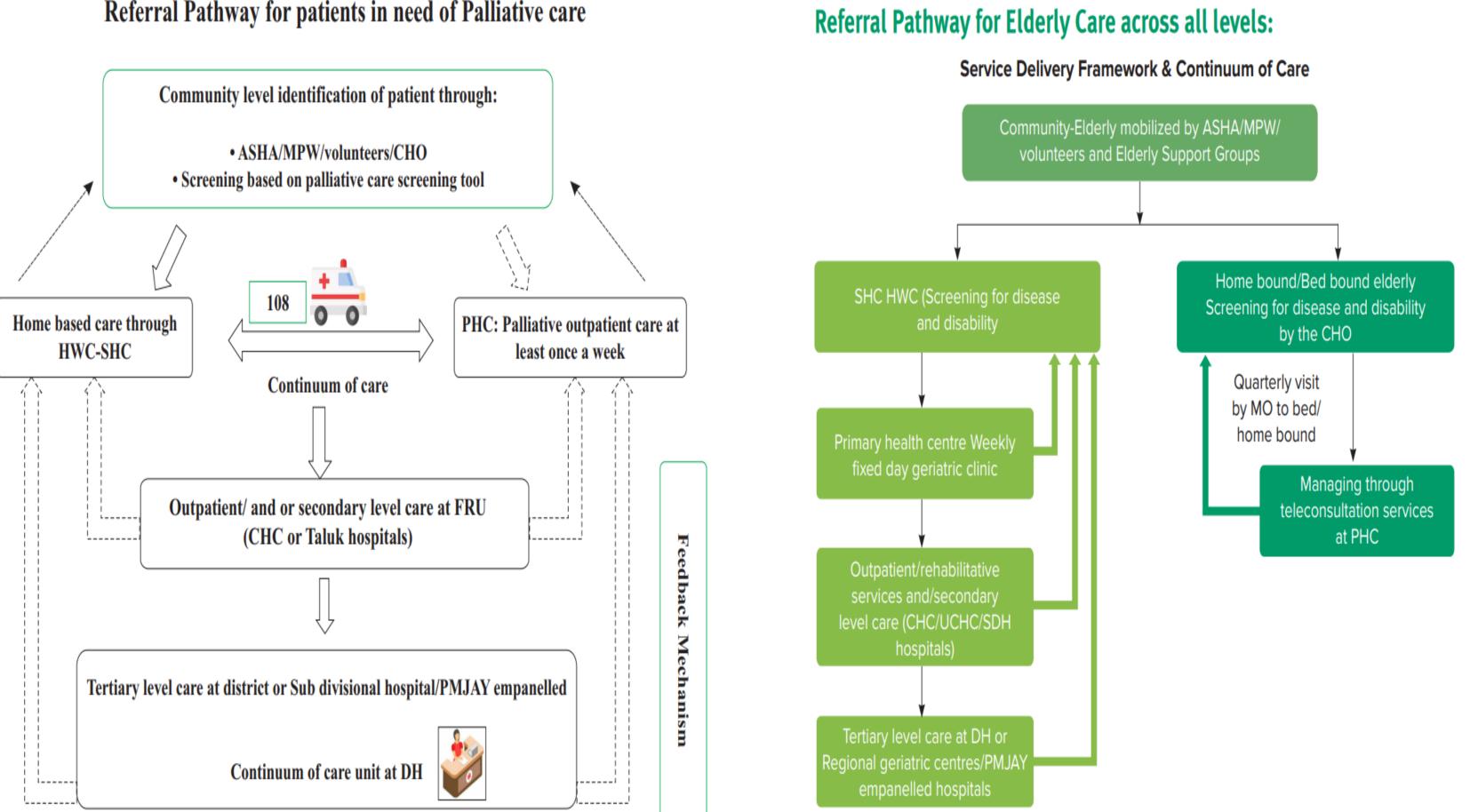








### **Referral Pathway for patients in need of Palliative care**



















- 1. All are roles of CHO in palliative care EXCEPT:
- a. Referring complicated cases to the MO
- b. Providing home care for palliative care patients
- c. Maintaining list of palliative care hospitals
- d. Identifying community volunteers for palliative care
- 2. All are roles of Staff Nurse in elderly care EXCEPT: a. Assisting MO in undertaking comprehensive geriatric assessment b. Assisting MO in clinical management of geriatric ailments c. Supportive supervision of ASHA and MPW d.Maintaining record of OPD attendance at PHC





















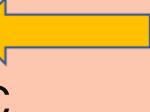


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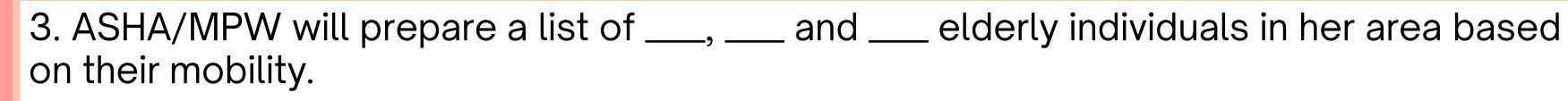














4. Managerial function of CHO is to provide basic nursing care to palliative care patients. ---- True / False







5. Home care provided to patients/families requiring palliative care services is a means to ensure continuum of care. ---- True / False

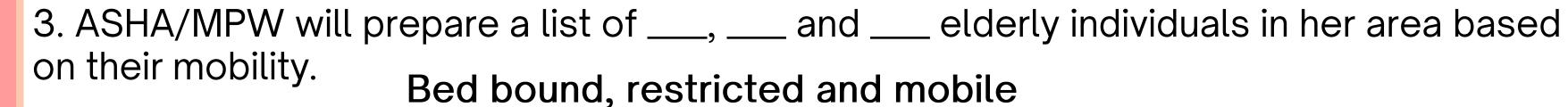
6. ASHA will help the CHO in undertaking assessment of elderly individuals and maintaining records for follow up. ---- True / False





## **EVALUATION**







4. Managerial function of CHO is to provide basic nursing care to palliative care patients. ---- True / False







6. ASHA will help the CHO in undertaking assessment of elderly individuals and maintaining records for follow up. ---- True / False

to ensure continuum of care. ---- True / False





5. Home care provided to patients/families requiring palliative care services is a means





## Thank You















