Provision of Palliative Care in Malta

Claudia Taylor-East

Chairman, Malta Hospice Movement

The Malta Hospice Movement, within its young, fastdeveloping structure, is established as a Body within the Maltese Community that continues to expand its vision of Palliative Care, Palliative Medicine and Hospice Philosophy by increasing its human, structural and organisational resources. Through the multi-disciplinary team, it reaches out to cancer patients both as a voluntary, charitable organisation but more importantly as a professional one in a wide range of Hospice services.

What is Palliative Care?

Palliative Care, as defined by the World Health Organisation, is:

'The active total care of patients whose disease is not responsive to curative treatment. Control of pain and other symptoms, and of psychological, social and spiritual problems, is paramount. The goal of palliative care is achievement of the best quality of life for patients and their families.'

Thus, Palliative Care:

- affirms life and regards dying as a normal process
- neither hastens nor postpones death
- provides relief from pain and other distressing symptoms
- integrates the psychological and the spiritual aspects of care
- offers a support system to help patients live as actively as possible until death
- offers a support system to help the family cope during the patient's illness and in their own bereavement

The relief of suffering when cure is impossible has always been at the heart of all good medical practice, even before it was called palliative care. It was, and surely still is, what every patient hopes for - and has a right to expect - whatever his condition. It has never been, nor should ever be, regarded as a luxury, an optional extra available to the privileged few. To all of us is given the challenge and the chance to relieve suffering. This is Palliative Care.

My own personal philosophy is that dying is as important a part of life as being born. We believe that every person should be able to live until they die, free from pain and distressing symptoms, and receiving the emotional, psycho-social and spiritual support they require. How can we achieve this?

I would say that a partnership of patient, family, nurse, doctor and other health professionals is necessary. Each must nurture the other - in other words, a multidisciplinary team. Developing a multi-professional approach to management is highly desirable. It is unrealistic to expect one professional or individual to have the skills to make the necessary assessment, institute the necessary interventions, and provide ongoing monitoring. It ensures that the entire responsibility does not fall on just one individual and that patients' problems and needs are addressed from different perspectives. Nursing staff, in particular, make a major contribution to the success of the interdisciplinary team, mainly because they are continuous care givers - the 'nucleus' of the team. It is the nursing service that coordinates the diverse inputs of other health care professionals and services.

Nowhere is the multi-professional approach more essential than in response to the expressed and perceived needs of cancer patients and their families. The particular gifts and skills of doctors, nurses, social workers, counsellors, physiotherapists, priests and others, all contribute to providing a competent and compassionate service which addresses the whole person and not only the disease.

The Malta Hospice Movement works with other health care professionals to provide an optimum standard of care for those with advanced cancer and Motor Neuron Disease, using our expertise to advise on the alleviation of pain. We work from a multi-disciplinary approach making an ongoing

assessment of the whole family's needs, coordinating and evaluating care. Most people want to stay in their own homes for as long as they can and our comprehensive home care package helps families manage this, with the specialist support enhancing the work of the patient's own general practitioners and district nurses. Continuity of care must and can be maintained but for this we need to ensure communication with all resources.

Our key objectives are therefore to:

- provide practical advice and support for patients and their families
- reduce distressing physical symptoms
- enable patients to choose the place of care and death
- identify those at risk in bereavement and refer to the appropriate bereavement service
- support patients and their families in their emotional and spiritual distress.

Our comprehensive range of facilities comprise:

- home care
- day therapy
- · night nursing in the home
- hospital support
- · loan of specialised equipment
- · assisted bathing
- hairdressing
- family/group support
- bereavement support

Together we must aim at further enhancing palliative care in the hospital and in the community, emphasising a holistic approach to care. We should maximise the potential of our patients with good symptom control, enabling them to live until they die.

The essential components of palliative care are effective control of symptoms and effective communication with patients, their families, and others involved in their care. As a disease progresses, continuity of care becomes increasingly important - coordination between services is required, and information must be transferred promptly and efficiently between professionals in the community and in the hospitals.

The principles of palliative care are essentially about attitudes. They emphasise the human and humane aspect of medicine, of care when cure is no longer possible. They stress life-affirming values by recognising the dying person as a living person and as a whole person with a right to dignity, comfort and support up to and through the end of life.

Finally, serving the dying more effectively is not just a way of benefiting that special group of patients; it enriches and ennobles us all.*