Advanced Certificate in Palliative Care Psychology

Research and Evidence-based Practice in Palliative Care

Research and Evidence-based Practice in Palliative Care Glossary

A

Advance Care Planning (ACP)
Related Terms: End-of-life care, Decision-making, Patient preferences
Advance care planning (ACP) involves discussions between patients, their families, and healthcare providers about the patient's values, beliefs, and goals for future medical care. It helps individuals make informed decisions about their healthcare preferences in advance, especially in the context of serious illness or end-of-life care. ACP can include the completion of advance directives, such as living wills and healthcare proxies, to ensure that a patient's wishes are respected even if they are unable to communicate them later.

Adverse Event
Related Terms: Complication, Medical error, Harm
An adverse event in healthcare refers to any undesirable or harmful event that occurs during the provision of medical care. These events can range from minor issues to serious complications that result in harm to the patient. Adverse events can be caused by a variety of factors, including medical errors, system failures, or complications of treatment. In palliative care, identifying and addressing adverse events is crucial to ensuring patient safety and quality of care.

B

Biopsychosocial-spiritual Model
Related Terms: Holistic care, Multidimensional assessment, Patient-centered care
The biopsychosocial-spiritual model is a comprehensive approach to healthcare that considers the biological, psychological, social, and spiritual dimensions of a person's health and well-being. In palliative care, this model recognizes that patients are complex individuals with physical, emotional, social, and spiritual needs that must be addressed to provide holistic care. By taking a multidimensional approach to assessment and treatment, healthcare providers can better understand and support patients in their care journey.

C

Clinical Practice Guidelines
Related Terms: Best practices, Standard of care, Evidence-based medicine

Clinical practice guidelines are evidence-based recommendations developed to assist healthcare providers in making informed decisions about patient care. These guidelines are created by expert panels using systematic reviews of the available evidence to provide recommendations for diagnosis, treatment, and management of specific conditions. In palliative care, clinical practice guidelines help standardize care delivery, improve quality of care, and promote consistency across healthcare settings.

Communication Skills
Related Terms: Empathy, Active listening, Nonverbal communication
Communication skills are essential for healthcare providers working in palliative care to effectively interact with patients, families, and interdisciplinary team members. These skills include the ability to listen actively, express empathy, provide information clearly, and engage in difficult conversations about prognosis, goals of care, and end-of-life decisions. Effective communication in palliative care can improve patient satisfaction, enhance shared decision-making, and strengthen relationships between patients and their care providers.

D

Decision-making Capacity
Related Terms: Competence, Informed consent, Substitute decision-maker
Decision-making capacity refers to a person's ability to understand relevant information, appreciate the consequences of their decisions, and communicate their preferences regarding medical treatment. In palliative care, assessing decision-making capacity is crucial for ensuring that patients can participate in shared decision-making about their care. Healthcare providers must determine whether a patient has the capacity to make informed decisions and, if not, involve appropriate individuals, such as family members or legal representatives, in the decision-making process.

E

Evidence-based Practice
Related Terms: Research synthesis, Clinical effectiveness, Quality improvement
Evidence-based practice (EBP) in palliative care involves integrating the best available research evidence with clinical expertise and patient values to inform decision-making and improve patient outcomes. EBP emphasizes the use of current, high-quality research to guide clinical practice, rather than relying solely on tradition or anecdotal evidence. By incorporating evidence-based interventions and strategies into care delivery, healthcare providers can enhance the quality, safety, and effectiveness of palliative care services.

End-of-life Care
Related Terms: Hospice care, Comfort measures, Bereavement support
End-of-life care encompasses the physical, emotional, social, and spiritual care provided to individuals who are approaching the end of their lives. This type of care focuses on symptom management, quality of life, and support for patients and their families during the dying process. In palliative care, end-of-life care often

involves discussions about goals of care, advance care planning, and providing comfort measures to ensure a peaceful and dignified end-of-life experience for patients.

F

Futility
Related Terms: Medical interventions, Prognosis, Ethical dilemmas
Futility in healthcare refers to the point at which a particular medical intervention or treatment is unlikely to achieve its intended goal or benefit the patient. In palliative care, discussions about futility often involve weighing the potential risks and benefits of continued treatment, considering the patient's goals of care and quality of life. Healthcare providers must navigate complex ethical dilemmas related to futility to ensure that care is aligned with the patient's wishes and values.

G

Goals of Care
Related Terms: Treatment preferences, Prognosis, Advance care planning
Goals of care in palliative care refer to the specific outcomes or objectives that patients and healthcare providers aim to achieve through medical treatment and care interventions. These goals are based on the patient's values, preferences, and priorities for their healthcare journey. By aligning care with the patient's goals and preferences, healthcare providers can enhance communication, improve decision-making, and optimize the quality of care provided to individuals with serious illness or at the end of life.

H

Health-related Quality of Life
Related Terms: Patient-reported outcomes, Symptom burden, Functional status
Health-related quality of life (HRQoL) is a multidimensional concept that assesses an individual's overall well-being and satisfaction with their physical, emotional, and social functioning in the context of their health status. In palliative care, HRQoL is an important outcome measure used to evaluate the impact of treatment interventions, symptom management strategies, and psychosocial support on patients' quality of life. By addressing factors that affect HRQoL, healthcare providers can enhance the overall well-being and satisfaction of patients receiving palliative care.

I

Interdisciplinary Team
Related Terms: Collaborative care, Team-based care, Communication
An interdisciplinary team in palliative care consists of healthcare professionals from various disciplines, such as medicine, nursing, social work, chaplaincy, and psychology, who work together to provide comprehensive, holistic care to patients and families. This team-based approach enables healthcare providers to address the diverse needs of patients, including physical, emotional, social, and spiritual

aspects of care. By collaborating and communicating effectively within the interdisciplinary team, care providers can optimize patient outcomes and enhance the quality of care delivered.

J

Just-in-time Education
Related Terms: Continuous learning, Professional development, Knowledge translation
Just-in-time education refers to the provision of timely, relevant, and targeted educational resources to healthcare providers at the point of care to address specific clinical challenges or learning needs. In palliative care, just-in-time education can help clinicians improve their knowledge and skills in symptom management, communication, and end-of-life care, leading to better outcomes for patients. By offering on-demand educational opportunities that are easily accessible and tailored to individual learning needs, healthcare organizations can support continuous learning and professional development among their staff.

K

Kübler-Ross Model
Related Terms: Grief stages, Coping strategies, End-of-life care
The Kübler-Ross model, also known as the five stages of grief, is a psychological framework that describes the emotional stages individuals may experience when facing a terminal illness or death. The five stages include denial, anger, bargaining, depression, and acceptance, and are meant to provide insight into the emotional processes that occur during times of loss and transition. In palliative care, the Kübler-Ross model can help healthcare providers understand and support patients and families as they navigate the challenges and complexities of end-of-life care.

L

Life-sustaining Treatment
Related Terms: Artificial nutrition, Mechanical ventilation, Cardiopulmonary resuscitation
Life-sustaining treatment refers to medical interventions or procedures that are intended to prolong a patient's life or sustain vital functions in the face of serious illness or injury. These treatments can include interventions such as mechanical ventilation, dialysis, or cardiopulmonary resuscitation (CPR) to support organ function and maintain life in critical situations. In palliative care, discussions about life-sustaining treatment often involve considerations of the patient's wishes, values, and goals of care to ensure that interventions align with their preferences and promote quality of life.

M

Medical Futility
Related Terms: Goals of care, Advance directives, Ethical decision-making
Medical futility occurs when a medical intervention or treatment is not expected to provide any meaningful benefit to a patient, given their clinical condition, prognosis, and goals of care. In palliative care, discussions

about medical futility often revolve around whether continued treatment is likely to achieve the desired outcomes or improve the patient's quality of life. Healthcare providers must carefully consider the potential risks and benefits of interventions to ensure that care is appropriate, aligned with the patient's wishes, and focused on optimizing comfort and quality of life.

N

Non-pharmacological Interventions
Related Terms: Complementary therapies, Mind-body techniques, Relaxation exercises
Non-pharmacological interventions in palliative care refer to treatments and therapies that do not involve the use of medications or drugs to manage symptoms, improve quality of life, or enhance well-being. These interventions can include techniques such as massage therapy, music therapy, art therapy, and mindfulness practices that address the physical, emotional, social, and spiritual needs of patients. By incorporating non-pharmacological interventions into care plans, healthcare providers can offer holistic, patient-centered care that complements traditional medical treatments and supports the overall well-being of individuals receiving palliative care.

O

Outcome Measures
Related Terms: Quality indicators, Performance metrics, Patient satisfaction
Outcome measures in palliative care are standardized tools and assessments used to evaluate the effectiveness, quality, and impact of care interventions on patient outcomes. These measures can include indicators such as symptom control, quality of life, caregiver burden, patient satisfaction, and healthcare utilization. By tracking and analyzing outcome measures, healthcare providers can monitor the progress of patients, identify areas for improvement, and demonstrate the value of palliative care services in improving patient outcomes and enhancing the overall quality of care.

P

Palliative Sedation
Related Terms: Symptom management, Terminal sedation, Comfort care
Palliative sedation is a medical intervention used in end-of-life care to manage severe symptoms, such as refractory pain, dyspnea, or agitation, that are not responsive to conventional treatments. This approach involves the administration of sedative medications to induce a state of decreased consciousness and relieve distressing symptoms while maintaining comfort and dignity for the patient. Palliative sedation is used as a last resort when other symptom management strategies have been exhausted and is intended to provide relief and comfort for patients nearing the end of life.

Q

Quality of Life

Related Terms: Well-being, Functional status, Health-related quality of life
Quality of life (QoL) in palliative care refers to an individual's overall satisfaction, well-being, and ability to enjoy life in the context of their health status and life circumstances. This multidimensional concept encompasses physical, emotional, social, and spiritual aspects of life and is influenced by factors such as symptom control, functional status, social support, and spiritual well-being. By addressing the factors that impact quality of life, healthcare providers can enhance the overall well-being and satisfaction of patients receiving palliative care.

R

Research Evidence
Related Terms: Systematic reviews, Meta-analysis, Randomized controlled trials
Research evidence in palliative care refers to the findings, results, and conclusions derived from scientific studies and investigations that contribute to the knowledge base of the field. This evidence is generated through rigorous research methods, such as randomized controlled trials, observational studies, and qualitative research, to inform clinical practice, policy development, and quality improvement initiatives. Healthcare providers use research evidence to guide decision-making, develop best practices, and enhance the quality of care provided to patients with serious illness or at the end of life.

S

Shared Decision-making
Related Terms: Patient autonomy, Informed consent, Communication
Shared decision-making in healthcare involves a collaborative process in which patients, families, and healthcare providers work together to make informed decisions about medical treatment, care options, and health interventions. This approach emphasizes the importance of involving patients in the decision-making process, providing information about available options, discussing risks and benefits, and considering patient preferences and values. In palliative care, shared decision-making empowers patients to participate in choices about their care, improve communication with healthcare providers, and align treatment plans with their goals and priorities.

T

Terminal Care
Related Terms: End-of-life care, Comfort measures, Bereavement support
Terminal care refers to the supportive and compassionate care provided to individuals who are in the final stages of a life-limiting illness and approaching the end of their lives. This type of care focuses on managing symptoms, promoting comfort, and addressing the physical, emotional, social, and spiritual needs of patients and their families during the dying process. In palliative care, terminal care aims to ensure a dignified and peaceful end-of-life experience for patients, enhance quality of life, and provide support to loved ones as they navigate the grieving and bereavement process.

U

Unmet Needs
Related Terms: Symptom burden, Psychosocial distress, Caregiver support
Unmet needs in palliative care refer to the physical, emotional, social, or spiritual needs of patients and families that are not adequately addressed or supported by healthcare services. These needs can include uncontrolled symptoms, psychological distress, communication challenges, caregiver burden, or spiritual concerns that impact the quality of life and well-being of individuals receiving palliative care. By identifying and addressing unmet needs, healthcare providers can improve the overall care experience, enhance patient outcomes, and optimize the quality of care delivered to individuals with serious illness or at the end of life.

V

Validation Therapy
Related Terms: Dementia care, Communication techniques, Person-centered care
Validation therapy is a person-centered approach to communication and care that acknowledges and validates the feelings, emotions, and experiences of individuals with cognitive impairment, such as dementia. This therapeutic technique involves listening empathetically, acknowledging the person's reality, and validating their emotions and needs to establish a connection and foster trust. In palliative care, validation therapy can help support the emotional well-being and dignity of patients with dementia, improve communication with caregivers and family members, and promote a person-centered approach to care delivery.

W

Whole-person Care
Related Terms: Holistic care, Biopsychosocial-spiritual model, Patient-centered care
Whole-person care in palliative care emphasizes a comprehensive and holistic approach to addressing the physical, emotional, social, and spiritual needs of patients and families facing serious illness or end-of-life care. This model of care considers the individual as a whole person with unique values, preferences, and priorities that influence their healthcare journey. By providing whole-person care, healthcare providers can offer personalized, patient-centered support that enhances quality of life, promotes dignity, and respects the autonomy and individuality of each person receiving palliative care.

This glossary provides a comprehensive overview of key terms related to research and evidence-based practice in palliative care. By understanding these concepts and their implications for care delivery, healthcare providers can enhance their knowledge and skills in providing high-quality, patient-centered care to individuals with serious illness or at the end of life. The integration of research evidence, best practices, and interdisciplinary collaboration is essential for optimizing patient outcomes, improving quality of care, and promoting the well-being and dignity of patients and families receiving palliative care.