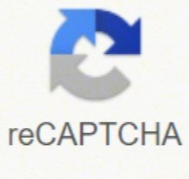
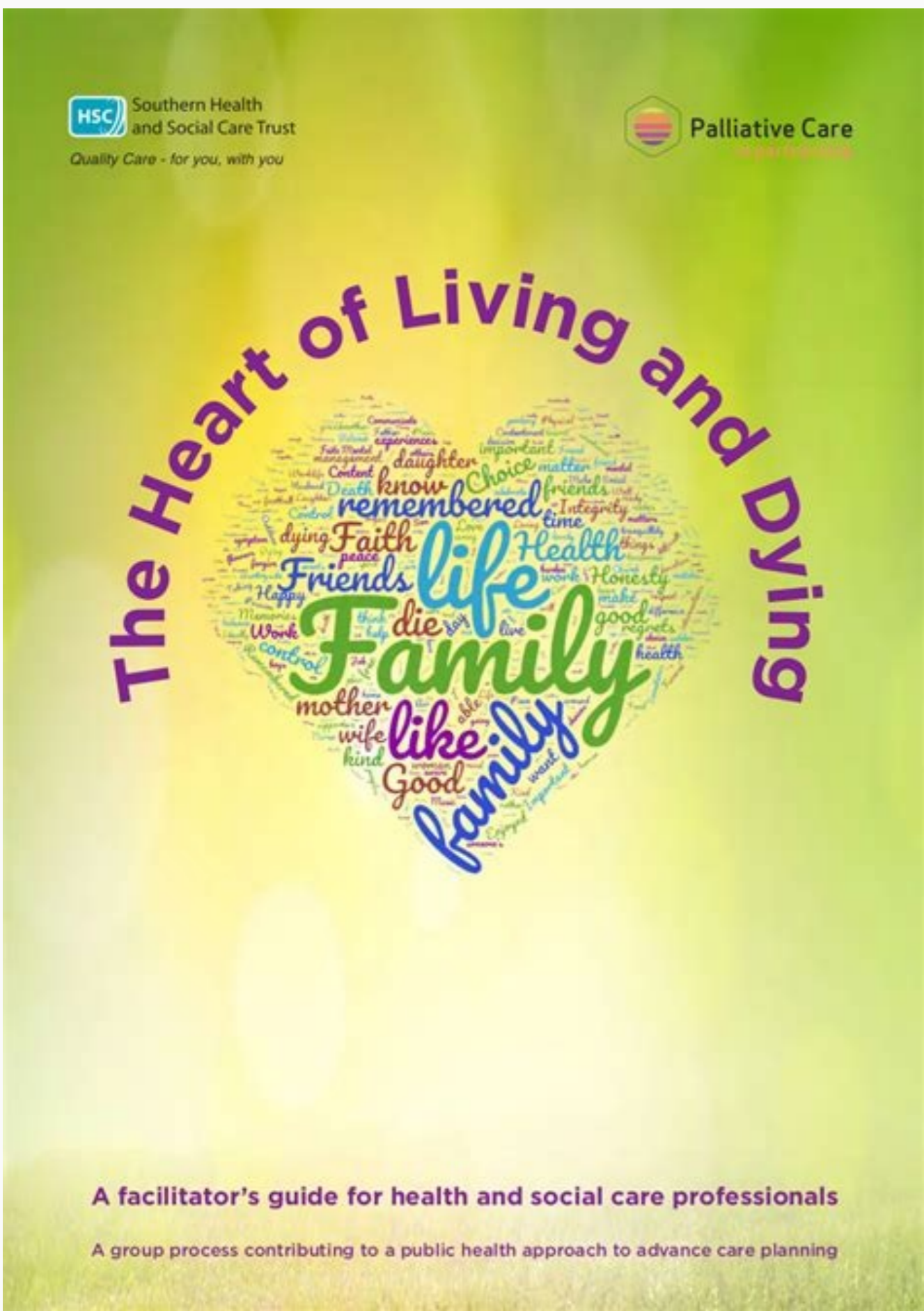




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Community nurses usually visit you at home. The key aim of the Palliative Care in Partnership programme is to provide regional direction so that everyone identified as likely to benefit from a palliative care approach, regardless of their condition: Is allocated a palliative care keyworker Has the opportunity to discuss and record their advance care planning decisions; and Is supported with appropriate generalist and specialist palliative care services to be cared for in their preferred place (whenever it is safe and appropriate to do so). You can formally appoint a friend, relative or professional to hold a Power of Attorney that will allow them to act on your behalf. Read more about managing your affairs and enduring power of attorney Find out more about end of life care on the NHS website More useful links For information please go to the Palliative Care in Partnership (PCIP) website Useful links Health Care Professionals eAAA please go to NICaN SharePoint for Palliative Care resources for professionals If you are approaching the end of your life, you are entitled to quality care. The Palliative Care in Partnership (PCIP) programme The Palliative Care in Partnership (PCIP) programme was formed in Northern Ireland in September 2016. You can receive end of life care at home or in care homes, hospices or hospitals, depending on your needs and preference. Family and friends may also be closely involved in caring for you too. These professionals may include: hospital doctors and nurses your GP community nurses hospice staff counsellors A social care staff chaplains (of all faiths or none) A physiotherapist occupational therapist A complementary therapist If you are being cared for at home or in a care home, your GP has overall responsibility for your care. They should also support your family, carers or other people who are important to you. You have the right to express your wishes about where you would like to receive care and where you want to die. You have the right to express your wishes on where you would like to receive assistance and where you want to die. Skip to Content Home Formulary Chapter Summary Sheets 1.0 Gastro System Intestinal 2.0 Cardiovascular System 3.0 Respiratory System 4.0 Central Nervous System Infections 5.0 (including Children) 6.0 Endocrine 7.0 Contraception, Gynecology and Urinary Tract Disorders 8.0 Disease Malignant and Immunosuppression 9.0 Nutrition and Care of PAINS BLOOD 9.0 MUSCULOSKELETAL AND JOINT DISEASES 11.0 EYE 11.6 Glaucoma 11.8.1 Eye Dry Eye 12.0 Earphone, Nose and Oropharynx 13.0 Skin 14.0 Anesthesia Wounds Care Formulary Newsletter & Publications Managed Entry Entry Decisions Entry Decisions in the Biosimilar Clinical Guidelines Deprosch & OTC ABOUT & CONTACT PALLIATIVE AND END OF THE CARE OF LIFE is the active and holistic treatment of patients with advanced progressive disease. This is called a holistic approach, because he takes care of you as a "whole" person. The care of their family is not only for the end of life. The end of life is support for people who have been in recent months or years of their lives. The care of life should help you live as much as possible until you die, and die with dignity. They should consider them while working with you to plan your care. If you have a disease that cannot be treated, for example, terminal cancer, palliative care makes you as comfortable as possible. This is an integral part of the care delivered by all health and social care professionals, and in fact as families and carers, to those who live with and dying from any advanced, progressive and incurable condition. The people who approach the end of life have the right to high quality assistance, wherever they take care of. This involves the management of ache. It also allows psychological, social and spiritual support for you and your family or companions. 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You can ask about all sorts of help eAAA for instance, there may be particular night-time services they can tell you about.For help and support in your areaFind out more about caring for someone who is terminally illBeginning of end of life careEnd of life care should begin when you need it and may last a few days, or for months or years.People are considered to be approaching the end of life when they are likely to die within the next 12 months, although this isn't always possible to predict. The people providing your care should ask you about your wishes and preferences. See information below on end of life care and palliative

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