

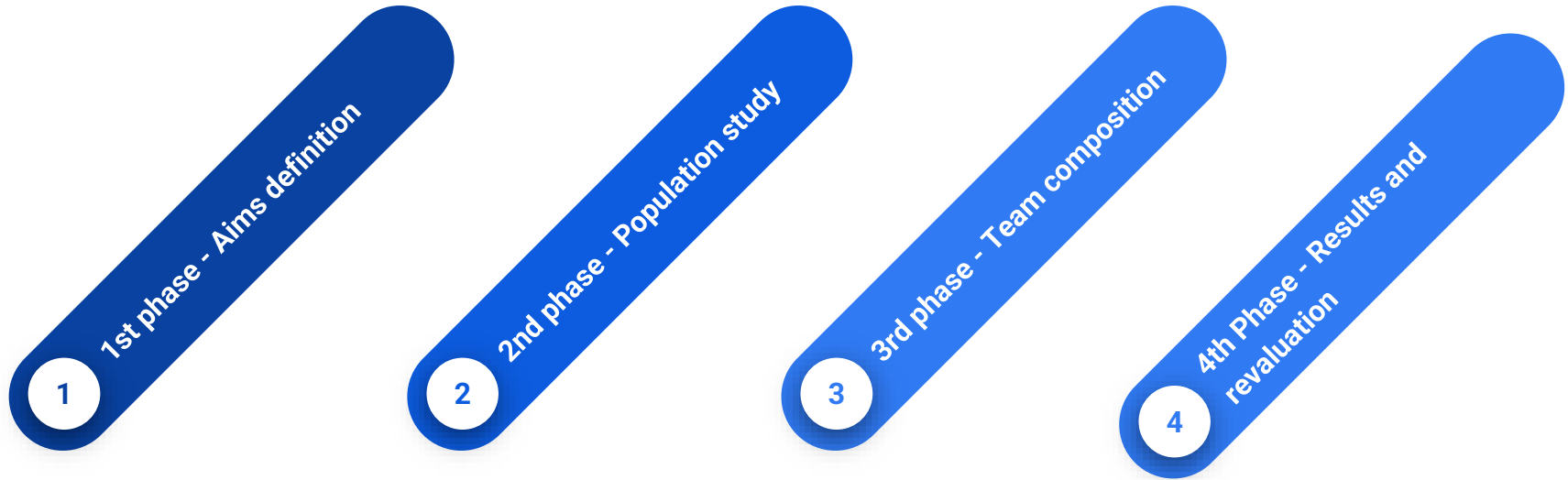


Successful implementation of a Pediatric Palliative Care and Hospital at Home Program

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Hospital Clínico Universitario de Valencia (Spain)

Successful implementation of a Pediatric Palliative Care and Hospital at Home Program



Successful implementation of a Pediatric Palliative Care and Hospital at Home Program

1

1st phase - Aims definition

Successful implementation of a Pediatric Palliative Care and Hospital at Home Program

1 1st phase - Aims definition

1. To establish a team that provides palliative care to children and families who require it according to international standards.

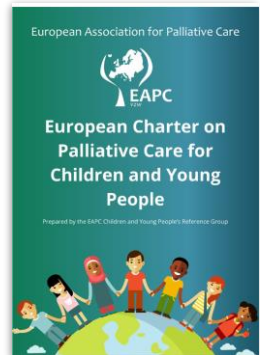
2. To provide individualized and continuous holistic care.

3. To preserve, promote and improve the quality of life and autonomy of pediatric patients with serious, chronic and/or complex conditions, preserving the family environment.

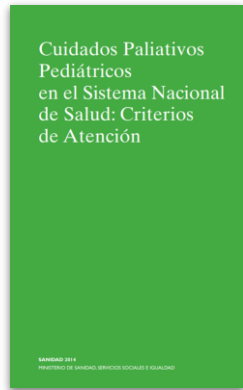
4. To allow a dignified life until death in a trusted family or private environment.

5. To work within the regional and national PPC network.

INTERNATIONAL



NATIONAL



REGIONAL



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1st phase - Aims definition

To establish a team that provides palliative care to children and families who require it according to international standards.

2

2nd phase - Population study

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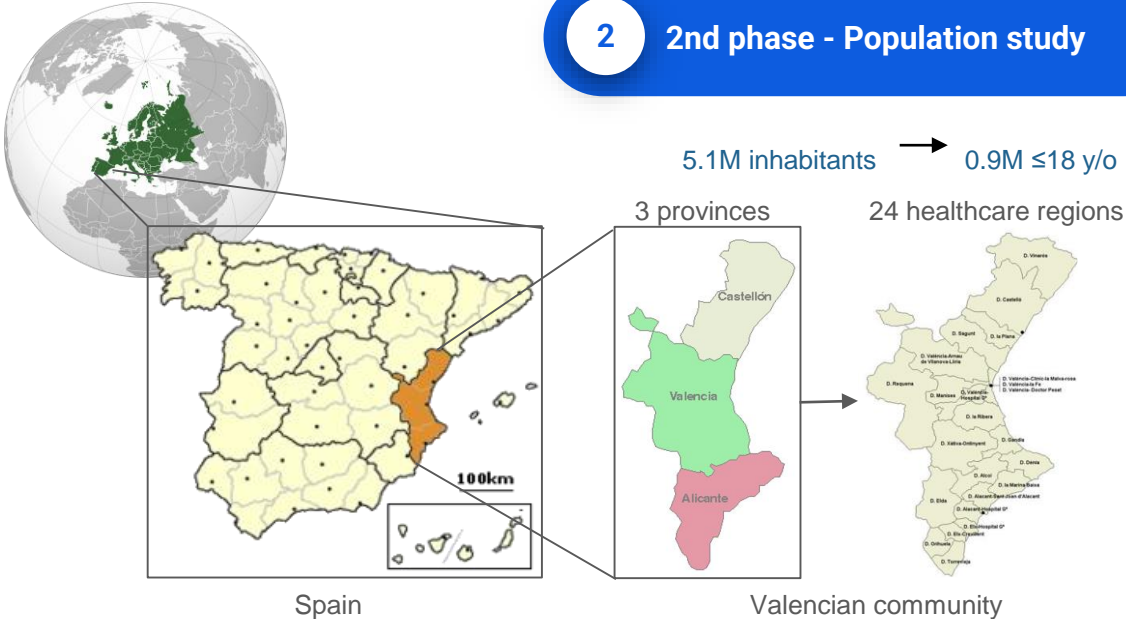
2 2nd phase - Population study



Spain

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2 2nd phase - Population study



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2 2nd phase - Population study



Spain



Valencian community

5.1M inhabitants

0.9M ≤ 18 y/o

117K ≤ 18 y/o

24 healthcare regions

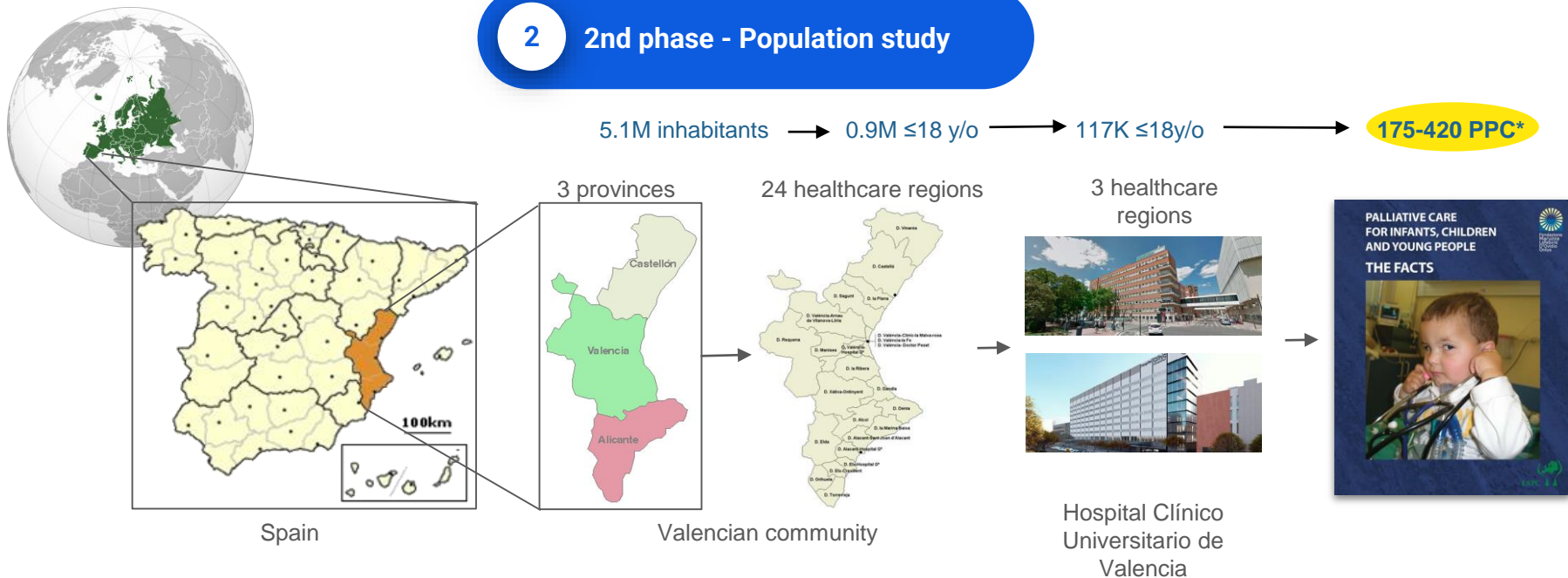
3 healthcare regions



Hospital Clínico Universitario de Valencia

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2 2nd phase - Population study



*Estimation based on 15 to 36 per 10.000 population <19 y/o. EAPC Taskforce for Palliative Care in Children (2009) & Fraser, L. K. et al (2021).

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1st phase - Aims definition

To establish a team that provides **palliative care to children and families** who require it according to international standards.

2

2nd phase - Population study

88-210 infants, children and adolescents needing specialized PPC

3

3rd phase - Team composition

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3 3rd phase - Team composition

nurses

physician



spiritual
adviser

psychologist

social worker

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3 3rd phase - Team composition



nurses physician



spiritual
adviser

psychologist

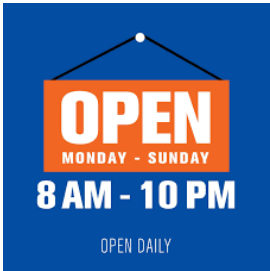
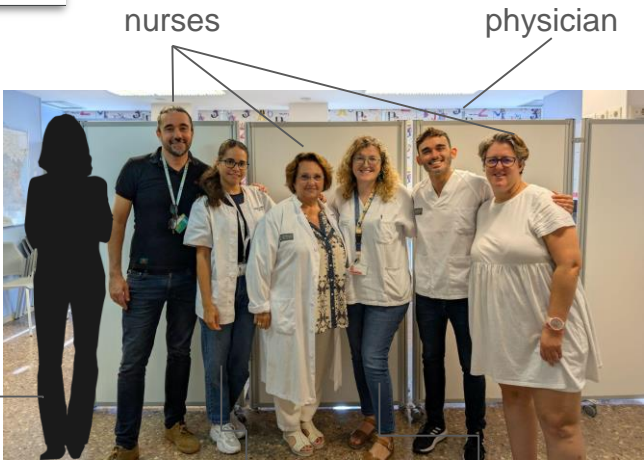
social worker



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3 3rd phase - Team composition



end-of-life guards

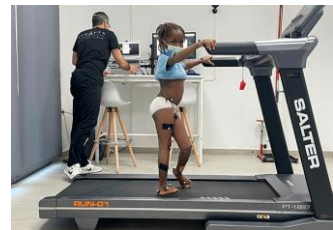
spiritual adviser

psychologist

social worker

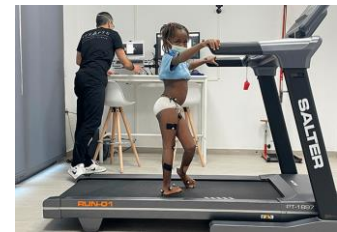
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3 3rd phase - Team composition



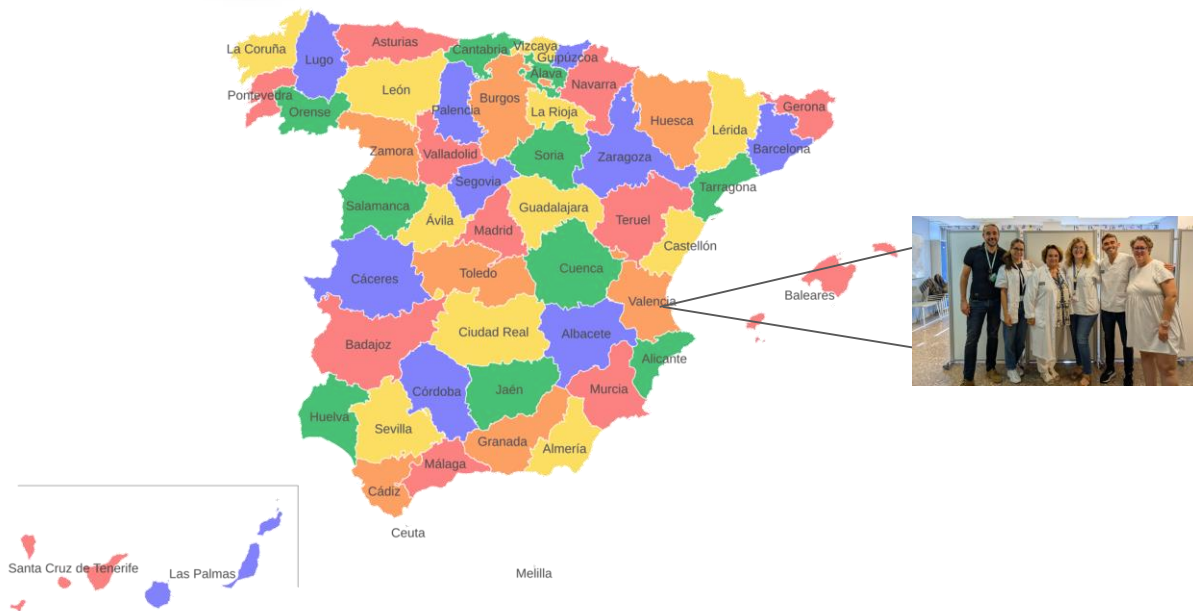
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3 3rd phase - Team composition



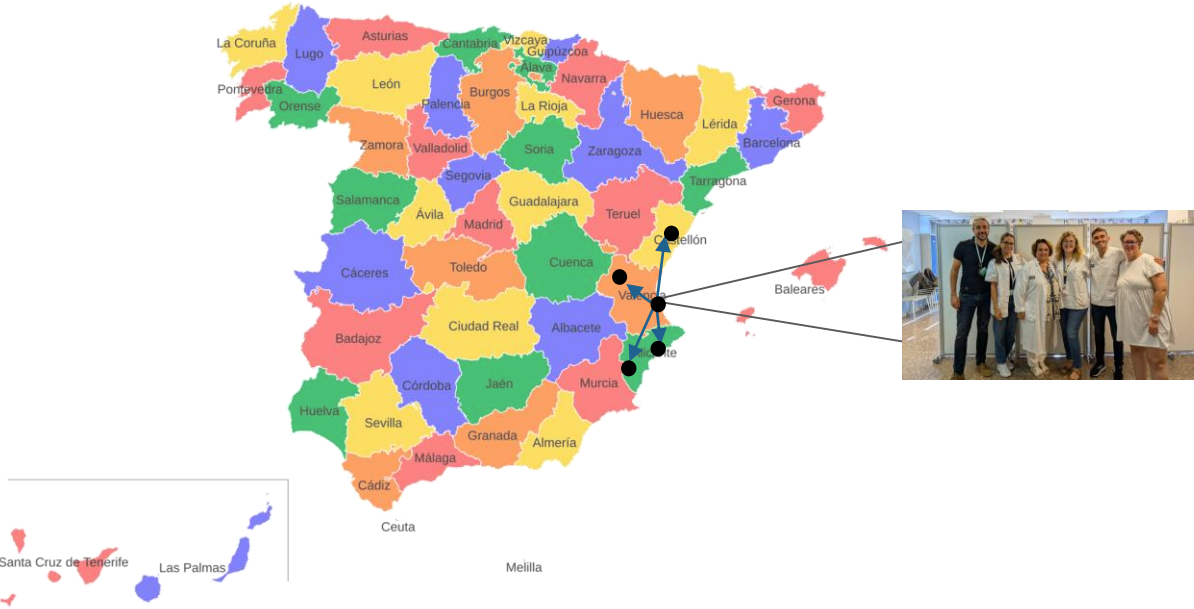
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3 3rd phase - Team composition



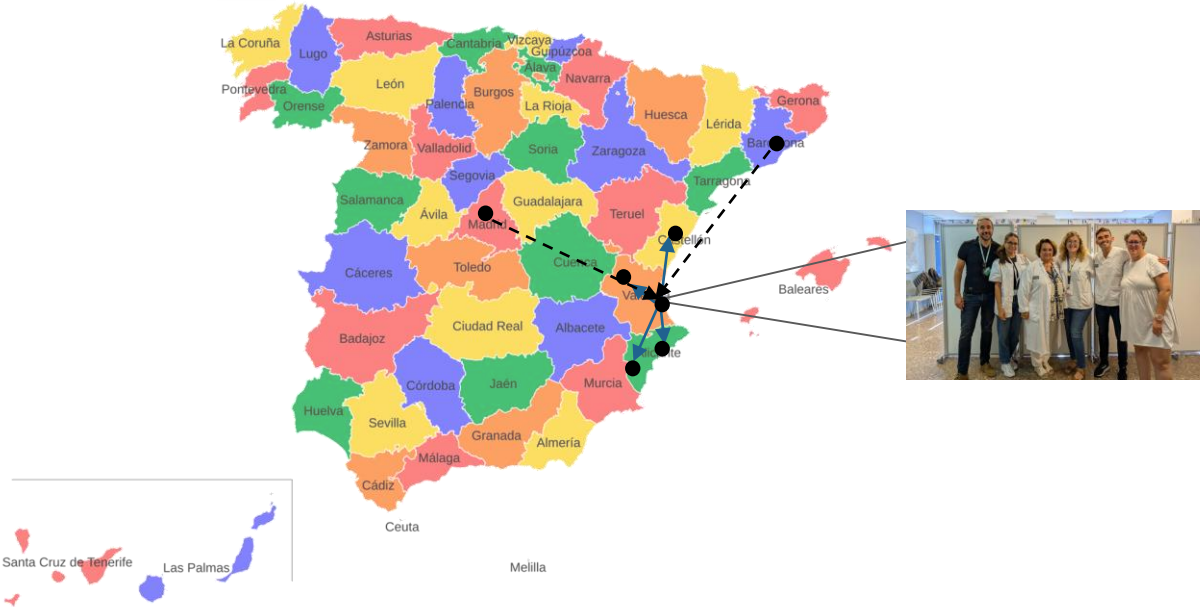
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3 3rd phase - Team composition



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3 3rd phase - Team composition



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2nd phase - Population study

88-210 infants, children and adolescents needing PPC

3

3rd phase - Team composition

- Physician, nurses, psychologist, social worker
- 365 days/year, 8am-10pm, 24/7 end-of-life
- Regional and national PPC network

4

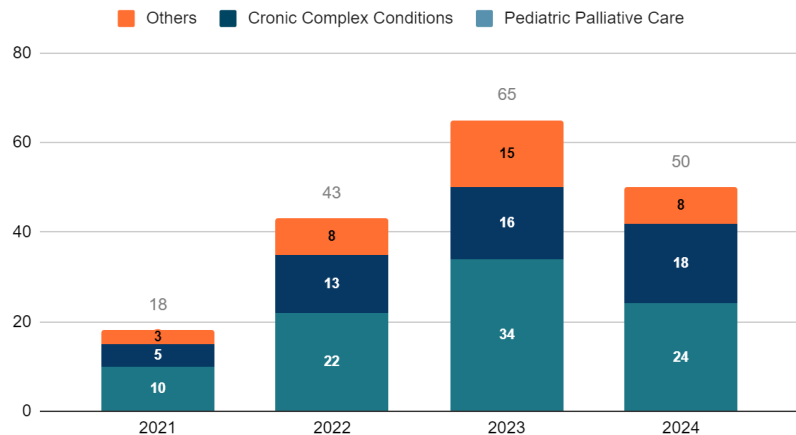
4th Phase - Results and reevaluation

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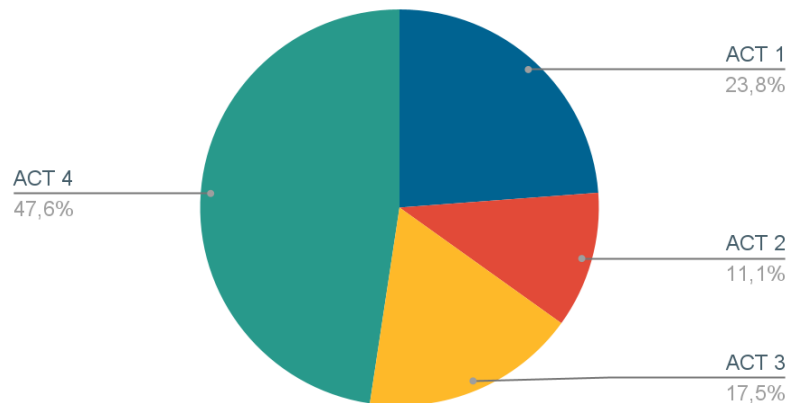
4

4th Phase - Results and revaluation

Admitted patients from agusut 2021 to july 2024



Types of patients

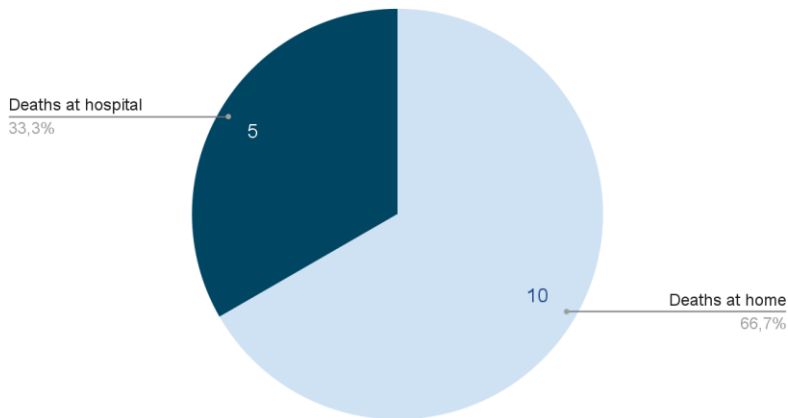


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4

4th Phase - Results and revaluation

Deaths from august 2021 to july 2024



Other outcomes:

- HaH admissions: 905
- Home visits: 1424
- Most frequent HaH admissions:
 - symptom control
 - consultations related to life-sustaining technology
 - respiratory support during intercurrencies
- Reported satisfaction level of 4.5 over 5 points

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4 4th Phase - Results and revaluation



**word cloud generated based on free text input reported by parents*

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Thanks for your attention

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