

GLOSSARY

Encephalopathy	This refers to a change in brain function due to injury or disease.
End of life care	<p>End of life care is a form of palliative care provided when someone is close to the end of life. End of life care should begin when someone needs it and may last a few days or months, or sometimes more than a year.</p> <p>People are considered to be approaching the end of life when they are likely to die within the next 12 months, although this is not always possible to predict. This includes people whose death is imminent, as well as people who:</p> <ul style="list-style-type: none"> • have an advanced incurable illness • are generally frail and have co-existing conditions that mean they are expected to die within 12 months • have existing conditions if they are at risk of dying suddenly from the condition <p>have a life-threatening acute condition caused by a sudden catastrophic event, such as an accident or stroke.</p>
Health and welfare lasting power of attorney (LPA)	Giving someone power of attorney means giving another person the right to make decisions about your care and welfare.
Karnofsky performance status scale	This index allows patients to be classified as to their functional impairment. The lower the score, the worse the survival for most serious illnesses.
Mental capacity	Mental capacity refers to the ability to understand information sufficiently to engage in decision-making.
Palliative care	<p>Palliative care is the care and support given to people with life-limiting conditions like cancer, heart failure and lung disease. Palliative care aims to make people as comfortable as possible by managing pain and other distressing symptoms. It also involves psychological, social and spiritual support for the person and their family or carers. This is called a holistic approach, because it deals with the person as a 'whole' person, not just the illness or symptoms. Palliative care is available when someone first learns they have a life-limiting (terminal) illness, and it can be received while the person is still receiving other therapies to treat their condition.</p> <p>Much of the support given to people is from professionals who are not specialists in palliative care. Professionals providing general palliative care services (for example members of primary care teams) should aim to meet the needs of a person and their family within the limits of their knowledge and competence. Specialist advice should be sought, or the person referred to specialist services when necessary.</p>
Rockwood clinical frailty scale	A global clinical measure of fitness and frailty in elderly people.

Specialist palliative care

Specialist palliative care services manage complex palliative care problems that cannot be dealt with by generalist services. Ideally, professionals who are not specialists in palliative care should always have access to specialist advice. Specialist palliative care services are likely to include:

- multidisciplinary specialist palliative care teams to provide assessment, advice, and care for people with advanced cancer in all locations
- specialist in-patient facilities (for example hospice beds) for people with complex problems that cannot be managed adequately in other settings.
- bereavement support services.

Specialist palliative care services may be provided by statutory and voluntary organisations. Care may be provided in community, hospice, and hospital settings.