

EDITORIAL

Dear Readers,

in May 2014, the World Health Assembly (WHA), meeting in Geneva, passed a resolution: *Strengthening of palliative care as a component of comprehensive care throughout the life course* (WHA 67.19) which it recommended that all governments adopt globally. What does this statement mean in practice? How can it be implemented? What is the role of nurses in the process of implementation?

First and foremost I am pleased to see that Palliative Care is highlighted in a Special Edition in this journal. The World Health Organisation (Sepulveda et al., 2002) definition recognises that palliative care is an active intervention that offers physical symptom management, psychosocial and spiritual care for patients with advanced disease and supports family members during the patient's illness and in bereavement. Palliative care is suitable for patients with all conditions, at all ages (from children to older adults), in all care settings and at all times during the disease trajectory. It seeks to offer compassionate patient centred care where quality of life and quality of dying are the ultimate goals.

Nurses have a central role in delivering palliative care. There are a number of ways that they can improve and strengthen palliative care. In response to the WHA resolution, it might be helpful for nurses in Central Europe to work through their national associations and international groups such as the European Association for Palliative Care (www.eapcnet.eu). An essential starting point is improving clinical nursing care. All nurses need to understand the core principles of palliative care (Gamondi et al., 2013) and a few will require additional education and experience to deliver specialist palliative care, working in hospices or hospital teams, for patients with complex needs.

Perhaps less well acknowledged is the leadership and advocacy role that nurses can have to influence governments to strengthen and develop new palliative care services. Also nurses can help to ensure the equitable access to affordable pain and other essential medicines wherever the patients need them (not just in hospitals). The WHA resolution calls for better integration of palliative care into normal health systems, so that palliative care is not seen as an optional extra or special service just for cancer patients. Integration will require that different health services work better together to smooth the path of the patient during the period of their final illness, however long that may be.

Nurses will be well aware of the needs of their patients wherever they work in Central Europe. It has been my pleasure to visit some excellent services; now we all have a duty to make the 'best of care' available to every patient and family with palliative care needs.

Professor Sheila Payne

Member, Editorial Board

*President of the European Association for Palliative Care,
Lancaster University, United Kingdom*

References

- Gamondi C, Larkin P, Payne S. Core competencies in palliative care: an EAPC White Paper on palliative care education – Part 1. *European Journal of Palliative Care*. 2013;20(2):86–91.
- Sepulveda C, Marlin A, Yoshida T, Ullrich A. Palliative care: The World Health Organization's global perspective. *Journal of Pain and Symptom Management*. 2002;24(2):91–96.