Dementia From Advanced Disease To Bereavement

#advanced dementia #end-of-life dementia care #dementia bereavement #grief from dementia #palliative care for dementia

Explore the complex journey of advanced dementia, understanding its progression and the critical importance of compassionate end-of-life care. This resource provides vital insights into supporting individuals through their final stages, and crucially, navigating the profound challenges of dementia bereavement and the subsequent grief experienced by families and caregivers.

These articles serve as a quick reference for both beginners and advanced learners.

Dementia

Dementia is a growing issue, exacerbated by improvements in health care which have led to an ageing population. This book concentrates on advanced disease and addresses issues such as pain management, decision-making, communication, the Mental Health Capacity Act, dementia in the younger patient, and the carer's perspective.

End of Life Care for People with Dementia

People with dementia need increasingly specialised support as they approach the end of life, and so too do their families and the professionals working with them. This book describes not only what can be done to ensure maximum quality of life for those in the final stages of the illness, but also how best to support those involved in caring for them. Emphasising the importance of being attuned to the experiences and needs of the person with dementia, the authors explain why and how they should be included in decisions relating to their end of life care. Practical strategies for ensuring physical and emotional wellbeing are provided, drawing on useful examples from practice and providing solutions to potential challenges that carers and family members will face. Dilemmas surrounding end of life care are explored in detail, including the moral dilemma of medical intervention, and the authors suggest ways of supporting family members through the process in terms of providing information, helping them adjust to change and loss, and involving them in their relative's care, and at how care staff can be supported through appropriate education and training, team building and information-giving. This is an essential resource for anyone who wishes to provide compassionate, person-centred care for a person with dementia as they approach the end of life, including care staff, nurses, social workers and related professionals.

Hospice Palliative Home Care and Bereavement Support

This book provides an unique resource for registered nurses working in hospice palliative care at home and for the community, outside of acute care settings and also incorporates literature related to palliative care in acute health care settings, as part of the overall services and supports required. Very few resources exist which specifically address hospice palliative care in the home setting, despite the fact that most palliative care occurs outside acute care settings and is primarily supported by unpaid family caregivers. An overview of the concerns for individuals and families, as well as specific nursing interventions, from all ages would be an excellent support for nursing students and practicing registered nurses alike. The book structure begins with a description of the goals and objectives of hospice palliative care and the nursing role in providing excellent supportive care. Chapters include research findings and specifically research completed by the authors in the areas of pediatric palliative care, palliative care for those with dementia, and the needs of family caregivers in bereavement. Interventions developed by the editors are provided in this book, such as the “Finding Balance Intervention” for bereaved caregivers; the “Reclaiming Yourself” tool for bereaved spouses of partners with dementia; and The Keeping Hope Possible Toolkit for families of children with life threatening and life limiting illnesses. The development and application of these theory-based interventions are also highlighted. Videos and vignettes written by family caregivers about what was helpful for them, provide a patient-and family-centered approach./div The book will benefit nursing students, educators and practicing registered nurses by providing information, theory, and evidence from research.

Contemporary and Innovative Practice in Palliative Care

This book is designed to provide a comprehensive insight unto the key and most prevalent contemporary issues associated with palliation. The reader will find viewpoints that are challenging and sometimes discerning, but at the same time motivating and thought-provoking in the care of persons requiring palliation. This book is divided into three sections. Section 1 examines contemporary practice; Section 2 looks at the challenges in practice; Section 3 discusses models of care. This book is an excellent resource for students, practising clinicians and academics. By reading the book, reflecting on the issues, challenges and opportunities ahead, we hope it will create within the reader a passion to take on, explore and further develop their palliative care practice.

Alzheimer's Matters

Individuals and families face challenges at the end of life that can vary significantly depending on social and cultural contexts, yet more than ever is now known about the needs that cut across the great diversity of experiences in the face of dying and death. A number of behavioural interventions and clinical approaches to addressing these needs have been developed and are available to help providers care for clients and assist them in achieving their goals. Perspectives on Palliative and End-of-Life Care: Disease, Social and Cultural Contexts explores how these interventions can be used to address a range of issues across social and cultural contexts for those in need of end of life care. With perspectives from experienced clinicians, providers, and caregivers from around the world, the book offers a strong foundation in contemporary evidence-based practice alongside seasoned practice insights from the field and explores interventions for people as diverse as HIV caregivers in Africa and individuals dying with dementia. In addition, readers will learn about the process of caring for individuals with chronic illnesses including severe mental illness; weigh the impact of policy regulations on the availability of and access to palliative care and interventions; and be able to compare the different issues experienced by family caregivers and formal caregivers. As the companion volume to Perspectives on Behavioural Interventions in Palliative and End-of-Life Care, this book will be of interest to a wide variety of individuals, such as academics, researchers and postgraduates in the fields of mental health, medicine, psychology and social work. It will also be essential reading for healthcare providers and trainees from psychosocial and palliative medicine, social work and nursing.

Perspectives on Palliative and End-of-Life Care

Improving Care for the End of Life provides expert guidance on how to make significant improvements now, at all levels of the health care system from the bedside and the hospital to the health care policy and legislative arenas by using the rapid-cycle breakthrough approach to change. Thoroughly updated references. The sourcebook speaks to all managers of health care systems serving people with serious illnesses.

The Longest Loss

Helping others to learn about caring for people with advanced disease has always been a fundamental part of effective palliative care. This flexible learning material, formally evaluated by the Open University, is based on the Current Learning in Palliative Care (CLIP) worksheets to cover all aspects of palliative care. Easy to use, with activities throughout, they can be reproduced as handouts when presenting to a group, or used individually alongside a tutor, or within a group setting. Each worksheet is carefully structured and assigned a learning level from introductory to advanced, to give the reader an indication of how much experience or knowledge is needed to carry out the exercise. This book provides an essential resource to arm health professionals, carers and teams with the knowledge and skills needed in their daily work.

Improving Care for the End of Life

Covers a medical overview of Alzheimer's and other dementias, programs and services for patients and caregivers, grief, hospice and public policy issues.

Alzheimer's Disease

Ageing populations mean that palliative and end of life care for older people must assume greater priority. Indeed, there is an urgent need to improve the experiences of older people at the end of life, given that they have been identified as the 'disadvantaged dying'. To date, models of care are underpinned by the ideals of specialist palliative care which were developed to meet the needs of predominantly middle-aged and 'young old' people, and evidence suggests these may not be adequate for the older population group. This book identifies ways forward for improving the end of life experiences of older people by taking an interdisciplinary and international approach. Providing a synergy between the currently disparate literature of gerontology and palliative care, a wide range of leading international experts contribute to discussions regarding priority areas in relation to ageing and end of life care. Some authors take a theoretical focus, others a very practical approach rooted in their clinical and research experience. The issues covered are diverse, as are the countries in which discussions are contextualised. Those working in both palliative care and gerontology will find the issues and advice discussed in this book hugely topical and of real practical value.

Helping The Patient with Advanced Disease

This volume demonstrates how hospice care leads to improved quality of life for patients with terminal dementia and their families. Much of the information is based on the successful 10-year experience of the E.N. Rogers Memorial Hospital, where the first palliative care program for the management of patients with advanced dementia was developed. This volume is of importance to nurses, physicians, and social workers involved in hospice or home care of patients at the terminal stage of dementia.

Alzheimer's Disease

Edited by Thomas A. Shannon, this series provides anthologies of critical essays and reflections by leading ethicists in four pivotal areas: reproductive technologies, genetic technologies, death and dying, and health care policy. The goal of this series is twofold: first, to provide a set of readers on thematic topics for introductory or survey courses in bioethics or for courses with a particular theme or time limitation. Second, each of the readers in this series is designed to help students focus more thoroughly and effectively on specific topics that flesh out the ethical issues at the core of bioethics. The series is also highly accessible to general readers interested in bioethics.

Living with Ageing and Dying

This handbook offers a practical, thorough approach to the clinical practice of palliative care. Adding North American authors to its roster of UK contributors, the third edition of this award-winning book addresses important changes in the evidence base of palliative care, as well as an emphasis on end-of-life community-based care. It features new chapters on dementia and advance care planning, a simplified lymphoedema discussion, and an ongoing commitment to providing essential guidance for physicians, nurses, and all primary care providers involved in palliative care in hospital, hospice, and community settings.

Hospice Care for Patients with Advanced Progressive Dementia

Death, Dying and Social Differences addresses the importance of care of dying people in their social context. It focuses on the much neglected area of the social aspects of death and dying. It highlights the key ways that health and social care professionals who provide end of life care can cater for those from a variety of social circumstances and communities. It speaks about best professional practice that can balance the inequalities in society's structures and what that means for thedying and their carers. A first of its kind, the twelve chapters by leaders in their fields, are aimed at clinicians and practitioners from all disciplines, policy-makers and managers who are committed to palliative and good end of life care for all. A multi-professional and case-based approach underpins the principles and practices of innovative care. The book considers the differences in the palliative care of people with advanced cancer and other life threatening conditions, related to poverty, social class, gender, sexuality, age, ethnicity and religion, as well as the circumstances of patients and carers who have disabilities, experience psychiatric illness, are refugees, are subject to abuse or who are prisoners. It uncovers 'disadvantaged dying' and suggests appropriate responses. The physical, spiritual, psychological and holistic aspects of care are largely shaped by and intertwined with a person's environment and social experiences. The book unpacks this essential ingredient of care of the very ill and bereaved and those close to them. Although death can be a great leveller, it can also highlight great differences in the quality of the experience. This book offers a key to upholding maximum human dignity for dying people and those they leave behind.

Alzheimer's Disease

As this book shows us, when a loved one dies we search for meaning in our own lives while struggling to hold onto memories of a precious life lost, O says Senator John Breaux in his introduction to this book. The 29 chapters of this book address the struggles, concerns and issues faced by the bereaved, and those who care for them.

Death and Dying

Textbook of Palliative Care is a comprehensive, clinically relevant and state-of-the art book, aimed at advancing palliative care as a science, a clinical practice and as an art. Palliative care has been part of healthcare for over fifty years but we still find ourselves having to explain its nature and practice to colleagues and to the public in general. Healthcare education and training has been slow to recognize the vital importance of ensuring that all practitioners have a good understanding of what is involved in the care of people with serious or advanced illnesses and their families. However, the science of palliative care is advancing and our understanding concerning many aspects of palliative care is developing rapidly. The book is divided into separate sections for ease of use. Over 100 chapters written by experts in their given fields provide up-to-date information on a wide range of topics of relevance to those providing care towards the end of life no matter what the disease may be. We present a global perspective on contemporary and classic issues in palliative care with authors from a wide range of disciplines involved in this essential aspect of care. The Textbook includes sections addressing aspects such as symptom management and care provision, organization of care in different settings, care in specific disease groups, palliative care emergencies, ethics, public health approaches and research in palliative care. This Textbook will be of value to practitioners in all disciplines and professions where the care of people approaching death is important, specialists as well as non-specialists, in any setting where people with serious advanced illnesses are residing. It is also an important resource for researchers, policy-and decision-makers at national or regional levels. Neither the science nor the art of palliative care will stand still so we aim to keep this Textbook updated as the authors find new evidence and approaches to care.

Handbook of Palliative Care

The original Dementia Reconsidered: The Person Comes First by Tom Kitwood was published by Open University Press in 1997. It was a seminal text in the field of dementia studies and is still cited and referenced as core reading on person-centred dementia care. Tom died unexpectedly, just 12 months after the book was published. This book continues to inspire many people to challenge simplistic paradigms about dementia. Since the original book was written, however, there have been many changes in our understanding of dementia. The editor of this new edition, Dawn Brooker was mentored by Tom Kitwood. She has drawn together a remarkable group of writers to provide a commentary on Kitwood’s work. This new edition reproduces the original chapters but provides extra content from subject experts to update the book to a contemporary level. Dementia Reconsidered Re-visited is an

ideal main text or supplementary text for all those studying or working in nursing, medicine, psychiatry, psychology, occupational therapy, social work, adult education, gerontology and health and social care more generally. “This important book does three things. It brings to a new generation the insight and vision of Tom Kitwood. It highlights the remarkable progress we have made in recent years. But most important of all it reminds us what still needs to be done if we are to fully respect the rights of people with dementia and their family care-givers. Kitwood inspired Alzheimer’s Society to knit together research, care, and societal change. We are now re-inspired to make sure all progress is evidenced and evaluated for its impact. We must realise the enormous opportunities the digital age offers people affected by dementia but in doing so constantly listen to and learn from their many and varied voices across nations and cultures.” Jeremy Hughes CBE, Chief Executive, Alzheimer's Society, UK

Death, Dying, and Social Differences

Social isolation and loneliness are serious yet underappreciated public health risks that affect a significant portion of the older adult population. Approximately one-quarter of community-dwelling Americans aged 65 and older are considered to be socially isolated, and a significant proportion of adults in the United States report feeling lonely. People who are 50 years of age or older are more likely to experience many of the risk factors that can cause or exacerbate social isolation or loneliness, such as living alone, the loss of family or friends, chronic illness, and sensory impairments. Over a life course, social isolation and loneliness may be episodic or chronic, depending upon an individual's circumstances and perceptions. A substantial body of evidence demonstrates that social isolation presents a major risk for premature mortality, comparable to other risk factors such as high blood pressure, smoking, or obesity. As older adults are particularly high-volume and high-frequency users of the health care system, there is an opportunity for health care professionals to identify, prevent, and mitigate the adverse health impacts of social isolation and loneliness in older adults. Social Isolation and Loneliness in Older Adults summarizes the evidence base and explores how social isolation and loneliness affect health and quality of life in adults aged 50 and older, particularly among low income, underserved, and vulnerable populations. This report makes recommendations specifically for clinical settings of health care to identify those who suffer the resultant negative health impacts of social isolation and loneliness and target interventions to improve their social conditions. Social Isolation and Loneliness in Older Adults considers clinical tools and methodologies, better education and training for the health care workforce, and dissemination and implementation that will be important for translating research into practice, especially as the evidence base for effective interventions continues to flourish.

Living with Grief

This book provides an overall introduction to the medical management of dementia with chapters dedicated to specific topics such as pain, epilepsy, vascular risk factors in dementia and review of medication, which are often not addressed in books on the subject, and thereby filling a gap in the field. Chapters are supplemented with cases to highlight key concepts and treatment approaches, and to provide the reader with the possibility to reflect on management options and the readers own current practice. This book is aimed at clinicians of different specialties (mainly neurology, psychiatry, geriatric medicine and general practice/family medicine) who manage patients with dementia on a regular basis, and thus provides useful guidance to be used in the clinic.

Textbook of Palliative Care

For patients and their loved ones, no care decisions are more profound than those made near the end of life. Unfortunately, the experience of dying in the United States is often characterized by fragmented care, inadequate treatment of distressing symptoms, frequent transitions among care settings, and enormous care responsibilities for families. According to this report, the current health care system of rendering more intensive services than are necessary and desired by patients, and the lack of coordination among programs increases risks to patients and creates avoidable burdens on them and their families. Dying in America is a study of the current state of health care for persons of all ages who are nearing the end of life. Death is not a strictly medical event. Ideally, health care for those nearing the end of life harmonizes with social, psychological, and spiritual support. All people with advanced illnesses who may be approaching the end of life are entitled to access to high-quality, compassionate, evidence-based care, consistent with their wishes. Dying in America evaluates strategies to integrate care into a person- and family-centered, team-based framework, and makes recommendations to create a system that coordinates care and supports and respects the choices of patients and their

families. The findings and recommendations of this report will address the needs of patients and their families and assist policy makers, clinicians and their educational and credentialing bodies, leaders of health care delivery and financing organizations, researchers, public and private funders, religious and community leaders, advocates of better care, journalists, and the public to provide the best care possible for people nearing the end of life.

Dementia Reconsidered Revisited: The Person Still Comes First

Previous research has indicated that what constitutes a good death is heterogenic and complex although there are some recurrent themes and similarities regardless individual background factors. Studies on advance care planning (ACP), i.e. making proactive plans regarding content of care and treatment limitations, on nursing home (NH) patients are rare. Positive effects of ACPs are shown, but also that these often are lacking. The overall aim with this thesis was to explore the perceptions of a good death from the perspective of patients with severe illness and to investigate, from different perspectives, experiences of ACP in a NH context. In paper I, patients with cancer in a palliative phase were interviewed on their perceptions of a good death. Death was viewed as a process and previous experiences on the death of others influenced their own perceptions. A good death was associated with living with the prospect of imminent death, preparing oneself and others for one's death and dying comfortably, e.g. without suffering, with independence and with social relations intact. Some were comforted by their belief that death is predetermined, and that after death, there is something else. Others felt uncomfortable when they viewed death as the end of the existence. In paper II, nurses and physicians were interviewed on their experiences of the factors that shape the ACP process in NHs. Exploration of the patient's preferences regarding content of care and treatment limitations was important, as well as integration of the patient's preferences and the views of the family members and staff concerning these questions. ACP documentation had to be clear, updated and available for staff and the implementation and reevaluation of ACP were also considered important, according to the participants. Significance of clinicians' perceiving beneficence as well as fear of accusations of maleficence were shown to be essential factors to contemplate. In a retrospective chart review (paper III), medical records of 367 deceased NH patients were analysed. A high prevalence of ACP was shown, using two different definitions of ACP (ACP I and ACP II). Moreover, adherence to the ACP content was strong and positive associations were seen between ACP and variables of the three research aims, such as: diagnosis (dementia), physician attendance at NH and end-of-life (EOL) care. In paper IV, family members of deceased NH patients were interviewed on their experiences of ACP in NHs. EOL issues were challenging to talk about, although the family members appreciated staff raising these questions. The patient's preferences were sometimes explicitly or implicitly communicated. However, in some cases, family members had a feeling of the patient's preferences, although they had not been clearly communicated. Everyday details symbolised staff commitment. The family members viewed the nurse as central. The physician was described as absent and ACP meetings often went unnoticed. Both involvement and lack of involvement could cause the family members feelings of guilt. In conclusion, we found that what constitutes a good death is highly individual, although recurrent themes are seen. EOL conversations are important and challenging and need staff training and experience. It seems important to support healthcare staff not only to initiate ACP in NH patients, but also to involve the patient and family members in the ACP and planning EOL care. Making proactive plans regarding content of care including treatment limitations, could enable patient autonomy, optimise the chances for the patient to experience a good death and enhance for the family members during the dying trajectory and after the patient's death.

Social Isolation and Loneliness in Older Adults

The ageing of society is becoming a major public health issue, posing challenges to social and health care structures in many countries. This book demonstrates the added value of palliative care which, although traditionally focused on cancer and the very end of life, can play a role in strengthening and complementing the care of older people. The book outlines the current state of worldwide policy work, research, and innovations in the field of public health and palliative care for older people and concludes with recommendations for policy and decision makers, at international and national level.

Planning for the End of Life for People with Dementia

Emphasising the multi-disciplinary nature of palliative care the fourth edition of this text also looks at the individual professional roles that contribute to the best-quality palliative care.

Management of Patients with Dementia

The first book of its kind, this must-have resource examines the integration of palliative interventions from a disease-specific approach, providing practical guidance on caring for patients who follow a progressive, chronic disease trajectory prior to death. This uniquely practical book addresses all aspects of palliative care, going beyond theoretical information to advise practitioners on the most effective management of common symptoms and providing physical, psychological, and spiritual comfort to patients and families. The multidisciplinary focus of care is reflected by collaborative contributors and diverse authorship of an oncology/palliative care nurse practitioner, a physician, and a social worker. Expert authors in the field of palliative care - an oncology/palliative care nurse practitioner, an MD, and a social worker - represent the collaborative nature of caring for chronically ill patients. The most common illnesses that cause death in the United States are addressed in separate chapters on specific disease states: Cardiovascular, Pulmonary, Nephrology, Oncology, and Neurology. Case studies at the conclusion of each chapter illustrate important patient scenarios in the context of clinical practice. Comprehensive drug information for symptom management and comfort measures is provided in an appendix, as well as palliative care assessment tools and helpful website resources. An entire chapter is devoted to cancer pain. Objectives at the beginning of each chapter introduce the reader to concepts that will be addressed in that chapter. Each chapter ends with multiple-choice objective questions to test the reader's comprehension, with answers and rationales provided in the back of book. Prognostic tables demonstrate precisely how and when to integrate palliative interventions into the course of an advanced illness, identifying prognostic indicators where appropriate. Other important topics are covered with chapters on sleep, ethics, cultural and spiritual issues, and the dying process.

Dying in America

This is the new edition of the 'Oxford Textbook of Old Age Psychiatry', highly successful and well-established due to its clear writing comprehensive coverage of all issues surrounding the mental care of older people.

A good death from the perspective of patients with severe illness and advance care planning (ACP) in patients near end-of-life

2010 AJN Book of the Year Award Winner in both Gerontologic Nursing and Hospice and Palliative Care! "This book...provides important information on best practices and appropriate ways to care for a person with Alzheimer's and advanced dementia. Drs. Martin and Sabbagh have assembled a team of experts to help craft recommendations that should ultimately become standards that all professional caregivers adopt." -Michael Reagan Son of former President Ronald Reagan President, Reagan Legacy Foundation This book testifies that caregivers can have a monumental impact on the lives of persons with advanced dementia. Through specialized programming and a renewed effort toward patient-centered care, caregivers can profoundly enrich the quality of life for these persons. Providing guidelines for health care professionals, caregivers, and family members, this book introduces palliative care programs and protocols for the treatment of people with advanced dementia. The book is designed to guide professional caregivers in meeting the needs of patients and their families, providing insight into the philosophy, assessment, planning, implementation, and evaluation measures involved in interdisciplinary palliative care. The chapter authors offer guidelines and standards of care based on contributions from nurses, physical therapists, social workers, dietitions, psychologists, family caregivers and pastors. An exhibit at the end of every chapter clearly articulates the standards of care appropriate for all advanced dementia facilities and health care staff. This book helps caregivers: Enhance the physiological, psychological, social, and spiritual well-being of the patient and the patient's family Anticipate and meet the patient's basic human needs: hunger, thirst, body positioning, hygiene, continence, and management of any pain Ensure that the patient's surroundings are safe, comfortable, and homelike Address health care decisions that will support the patient's right to self-determination until the end of life

Palliative Care for Older People

Caring for terminally ill patients and their families is challenging. Patients with life limiting illness require the skills of many professionals but also the support of their community. While most clinicians are comfortable in assessing a broad range of physical problems, it is often the psychosocial issues that prove the most complex. These issues range from psychosocial assessment to the treatment and care of patients with life limiting illnesses. Evaluating emotional, social and spiritual needs, in particular, requires excellent teamwork. This fully-updated and expanded new edition takes a comprehensive

look at current practice and provision of psychosocial support as applied to a range of palliative care patients. A number of important areas are covered including community approaches of psychosocial care, neonatal palliative care, the provision of psychosocial care to families, the role of volunteers in supporting palliative care professionals, and the needs of the frail elderly, marginalised patients, and those with dementia. Including multiple case study examples, this highly practical text examines current literature and evidence to demonstrate the best research-based practice in psychosocial care. It is an essential resource for professionals working within hospitals and communities in the fields of medicine, nursing, social work, chaplaincy, counselling, primary care, and mental health.

Oxford Textbook of Palliative Medicine

This book in Palliative Care is an evidence-based handbook which helps palliative care clinicians identify risk factors and contributing variables to the development of pathological grief reactions, implement treatment plans that can adequately minimize the impact of risk factors, and provide professional and specific support to patients and families.

Palliative Practices

This review incorporates the views and visions of 2,000 clinicians and other health and social care professionals from every NHS region in England, and has been developed in discussion with patients, carers and the general public. The changes proposed are locally-led, patient-centred and clinically driven. Chapter 2 identifies the challenges facing the NHS in the 21st century: ever higher expectations; demand driven by demographics as people live longer; health in an age of information and connectivity; the changing nature of disease; advances in treatment; a changing health workplace. Chapter 3 outlines the proposals to deliver high quality care for patients and the public, with an emphasis on helping people to stay healthy, empowering patients, providing the most effective treatments, and keeping patients as safe as possible in healthcare environments. The importance of quality in all aspects of the NHS is reinforced in chapter 4, and must be understood from the perspective of the patient's safety, experience in care received and the effectiveness of that care. Best practice will be widely promoted, with a central role for the National Institute for Health and Clinical Excellence (NICE) in expanding national standards. This will bring clarity to the high standards expected and quality performance will be measured and published. The review outlines the need to put frontline staff in control of this drive for quality (chapter 5), with greater freedom to use their expertise and skill and decision-making to find innovative ways to improve care for patients. Clinical and managerial leadership skills at the local level need further development, and all levels of staff will receive support through education and training (chapter 6). The review recommends the introduction of an NHS Constitution (chapter 7). The final chapter sets out the means of implementation.

Oxford Textbook of Old Age Psychiatry

Compassionate communities are communities that provide assistance for those in need of end of life care, separate from any official heath service provision that may already be available within the community. This idea was developed in 2005 in Allan Kellehear’s seminal volume- Compassionate Cities: Public Health and End of Life Care. In the ensuing ten years the theoretical aspects of the idea have been continually explored, primarily rehearsing academic concerns rather than practical ones. Compassionate Communities: Case Studies from Britain and Europe provides the first major volume describing and examining compassionate community experiments in end of life care from a highly practical perspective. Focusing on community development initiatives and practice challenges, the book offers practitioners and policy makers from the health and social care sectors practical discussions on the strengths and limitations of such initiatives. Furthermore, not limited to providing practice choices the book also offers an important and timely impetus for other practitioners and policy makers to begin thinking about developing their own possible compassionate communities. An essential read for academic, practitioner, and policy audiences in the fields of public health, community development, health social sciences, aged care, bereavement care, and hospice & palliative care, Compassionate Communities is one of only a handful of available books on end of life care that takes a strong health promotion and community development approach.

Palliative Care for Advanced Alzheimer's and Dementia

Advance Care Planning (ACP) is an essential part of end of life care in the UK and most developed countries. It enables more people to live well and die as they would choose, and has significant

implications for the individual person, their family and carers, and our wider society. In the context of an ageing population and increasing possibilities for medical interventions, ACP is a particularly important aspect of quality care. Expanded and fully updated throughout, this new edition gives a comprehensive overview of ACP and explores a wide range of issues and practicalities in providing end of life care. Written by experts from around the world, the book takes a comprehensive look at the subject by exploring the wide range of issues and practicalities in providing ACP; framing the purpose, process, and outcomes of these plans; and providing an important update on national and international research, policy and practice. Chapters also discuss values, goals and priorities, and include detailed case examples to aid best practice. This book is an invaluable resource for all clinicians involved in the caring for people in their final stages of life. It is of particular value to GPs, palliative care specialists, geriatricians, social care teams, researchers and policy leads interested in improving end of life care.

Psychosocial Issues in Palliative Care

Dr. Therese Rando is joined by 17 contributing authors to present the most comprehensive resource available on the perspectives, issues, interventions, and changing views associated with anticipatory mourning. Content Highlights Introduction Part I Knowledge and Theory -- A Review and Critique of the Literature; The Six Dimensions of Anticipatory Mourning; Re-Creating Meaning in the Face of Illness; The Transition to Loving in Absence; The Transition of Fading Away; On the Experience of Traumatic Stress; Coping with Dying: Similarities, Differences, and Suggested Guidelines for Helpers; Denial and the Limits of Anticipatory Mourning; Towards an Appropriate Death Part II Anticipatory Mourning from Different Perspectives -- Grief in Dying Persons; Promoting Healthy Anticipatory Mourning in Intimates of the Life-Threatened or Dying Person; Challenges for Professional and Volunteer Caregivers Part III Specific and Applied Cases -- Anticipatory Mourning and Prenatal Diagnosis; Dealing with Chronic/Terminal Illness or Disability of a Child; Anticipatory Mourning in HIV/ AIDS; Mourning Psychosocial Loss: Alzheimers, ALS, and Irreversible Coma; Advance Directives; Organ Donation; The Human-Animal Bond

Grief and Bereavement in the Adult Palliative Care Setting

Part of the authoritative Oxford Textbooks in Psychiatry series, Oxford Textbook of Old Age Psychiatry, Third Edition has been thoroughly updated to reflect the developments in old age psychiatry since publication of the Second Edition in 2013, and remains an essential reference for anyone interested in the mental health care of older people.

Better Palliative Care for Older People

I've Lost My Mum tell the true, soul-bearing, account of a daughter who wants to make a difference to those whose lives have been devastated by dementia. Cassandra's raw and deeply moving journey shares her own struggle for strength as well as invaluable insights into this invisible illness. This heartfelt and compelling story not only provides a deeper understanding of this cruel condition but gives hope that it's possible to find peace when someone you love is lost between worlds.

High Quality Care for All

Loss and Anticipatory Grief