AN OVERVIEW OF THE ACTIVITIES ON PALLIATIVE CARE IMPROVEMENT IN BELGRADE DURING THE LAST TEN YEARS

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Background: The provision of palliative care (PC) is multidisciplinary and in addition to the health system and health workers, patients' family members also participate in it. The need for this type of health care in Belgrade is increasing due to the aging population, the increase in malignant diseases' morbidity, diabetes, chronic obstructive pulmonary disease or trauma. Recognizing this problem, the Institute of Public Health of Belgrade, supported by the Secretariat of Health of the City of Belgrade implemented a series of activities on PC improvement in Belgrade.

Methods and Objectives: The objectives of this study were to examine the capacities and workflow of and needs for PC services in Belgrade and to define the measures for improvement. This study represents the mixed method of retrospective analysis and focus groups. First, the retrospective analysis was done using the available data on capacities, provision and utilisation of PC at all levels of healthcare in Belgrade. Then, a series of focus groups with PC professionals were organized to collect additional data in line with the objectives.

Results: The data from 18 primary health care centres and 4 clinical centres were analysed showing that 6,000 patients annually received PC (83.3% on primary level). Based on the results of the analysis, proposals for improvement of PC organization were prepared including needs for definition of criteria for admission to PC services, health workforce standards, reporting on provided services. In the next phase, activities were carried out to create a manual to help family caregivers in caring for family members in need of a PC. The manual contained answers to the most common questions that family caregivers ask health professionals during home visits. In the last phase, a series of accredited continuing medical educations for health workers and associates providing PC services were held.

Conclusions: Our results show that there is a lot of space for further improvement of PC organization, services provision and reporting, quality of PC, needed resources and education of PC workers so as family caregivers.

Keywords: palliative care, organisation, needs, utilisation, quality improvement