

Role of the SLMA in addressing the objectives of the National Strategic Framework for Palliative Care Development in Sri Lanka 2017-2021

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The SLMA prioritized, this year, its role in advocacy for developing Palliative Care services in Sri Lanka. This entailed a comprehensive mechanism for establishing a support system for patients with life threatening illnesses and their family members; so as to improve their quality of life by relieving physical, social, spiritual and psychological suffering.

As the essential first step in this direction, the SLMA launched a Palliative and End of Life Care Task Force under its Expert Committee on NCDs.

As the apex national medical organization we encourage effective measures to be adopted that need to address this field, in order to ensure that all categories of patients who have no hope of cure, receive due care within the existing healthcare system.

National Strategic Objectives

1. Include palliative care as an essential component of comprehensive healthcare
2. Integrate palliative care services at all levels of care: tertiary, secondary, primary and at community level
3. Ensure availability of skilled multi-disciplinary human resource for delivery of palliative care services at institutional and at community levels
4. Ensure availability & adherence of protocols & guidelines in palliative care
5. Ensure availability of drugs & technology for provision of palliative care at all levels: tertiary, secondary, primary and community level
6. Build partnerships with government and non-governmental organizations for delivery of palliative care
7. Empower family members, care givers for the provision of palliative care
8. Encourage research related to palliative care

The SLMA endorses the first objective, and pledges its unstinted support for including Palliative care as an essential component of comprehensive healthcare. We were happy to conduct advocacy programmes to obtain the support of all stakeholders. We included the topic of Palliative care to be addressed in all our regional meetings planned in all provinces and by a dedicated symposium during the annual academic sessions. Our commitment dates back to over five years, when we encouraged an annual stand-alone symposium to commemorate world Palliative care day in collaboration with the national cancer control programme. Thereby we harnessed the strength of a voluntary multi-disciplinary group of health professionals, who are ever so willing to undertake their advocacy role. The SLMA is indeed deeply indebted to these caring professionals.

A group of general physicians of SLMA have come forward to give support by conducting pilot projects on home based Palliative care and in collaboration with primary care institutions. Such a concept of shared care in this endeavor clearly addressed the second objective of integrating Palliative care services at all levels of care.

The fourth objective of developing protocols and guidelines has already commenced. The SLMA supported the excellent work of the National Cancer Programme by taking yet another step forward in producing a Palliative care manual for non-cancer patients. Additionally, End of Life guidelines as well as a manual of Palliative care for paediatric patients was developed.

In terms of the fifth objective of ensuring availability of drugs and equipment, the Palliative Care Task Force of the SLMA was named as a resource organization in listing out the medications and equipment that are currently not available. Issues such as developing a strategy of the ‘essential drugs list’ were planned and implemented through decisions taken in the Committee for Development of National Strategies.

With a view to achieving the seventh objective of empowering family members, care givers in provision of Palliative care in Sri Lanka, the Palliative Care Task Force of the SLMA is happy to share with you the experience of conducting a highly successful public exhibition and a symposium on the subject. The “Mahajana Suwadana” public exhibition was conducted in conjunction with the Ceylon Collage of Physicians and National Chamber of Commerce at BMICH, in July 2017. The SLMA is more than willing to replicate such awareness programmes to empower the general public, in order to support their understanding of the importance of the family and care givers in improving the quality of life of patients requiring Palliative care and in facing end of life issues. Such an individual truly deserves a dignified death with respect for their values, wishes and preferences.

The SLMA has always encouraged research and audits, and is willing to give support in achieving the eighth objective of encouraging research related to Palliative care.

The Task Force has already commenced addressing the tenth objective of facilitating and strengthening legislative framework for End of Life Care process. Discussions were initiated from the early part of 2017 with the leaders of differing and relevant medical specialties and the legal services. This activity was greatly appreciated by the national level committee chaired by the Director General of Health Services.

I am pleased to conclude that the SLMA, as an apex national professional organization, has understood the importance of getting all stakeholders together to achieve the common goal of delivering Palliative care for all irrespective of the underlying cause for a life limiting illness with due recognition of the socio economic and cultural implications for the multitude of patients requiring this service throughout Sri Lanka.