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International
Better care at the end of life

WHO Collaborating Centre
for Palliative Care, Policy and
Rehabilitation



Preparedness and response: the palliative care evidence from sub-Saharan Africa

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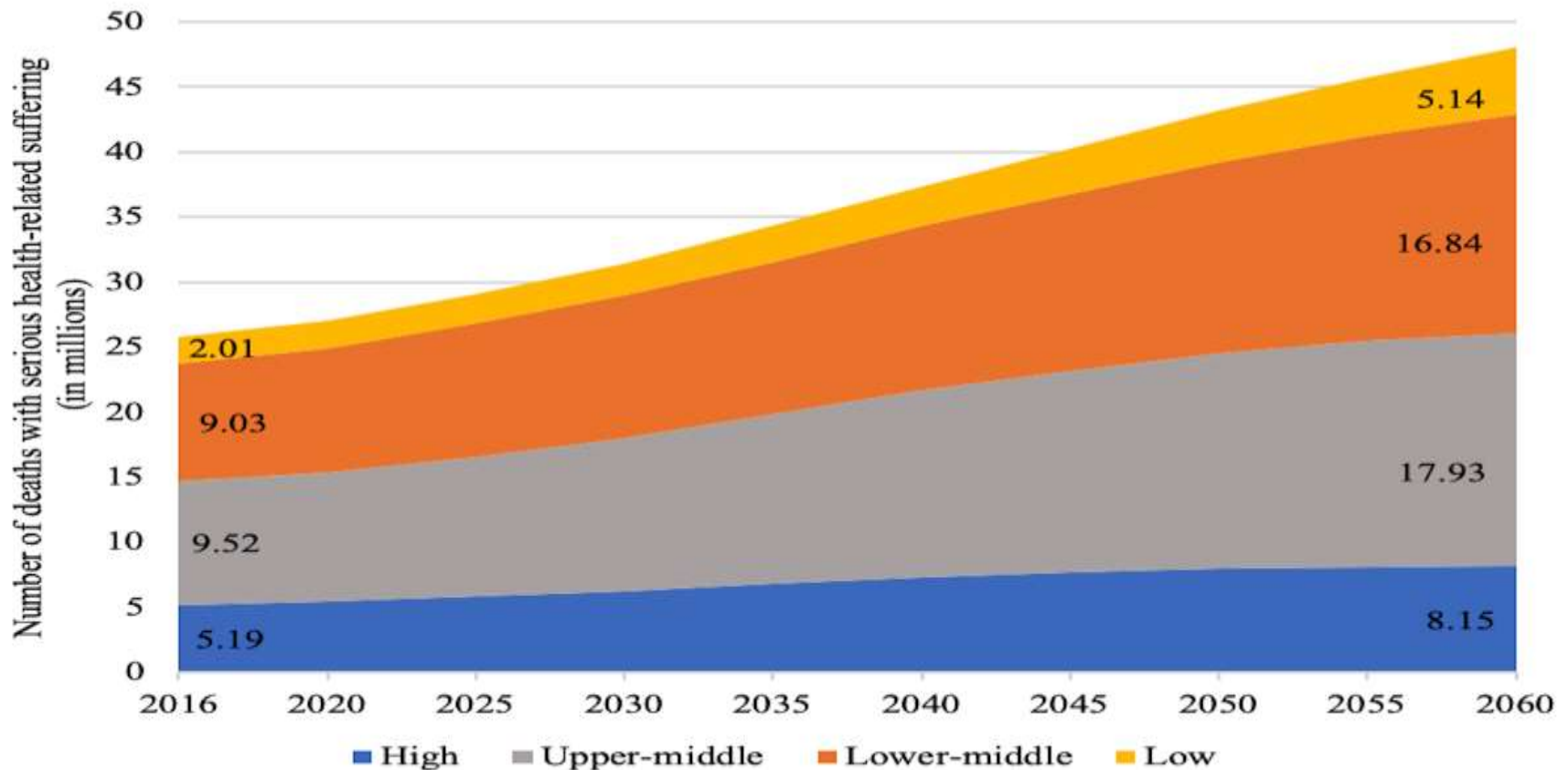
@RHardingCSI @CSI_KCL @KingsGHI

Centre for Global Health Palliative Care

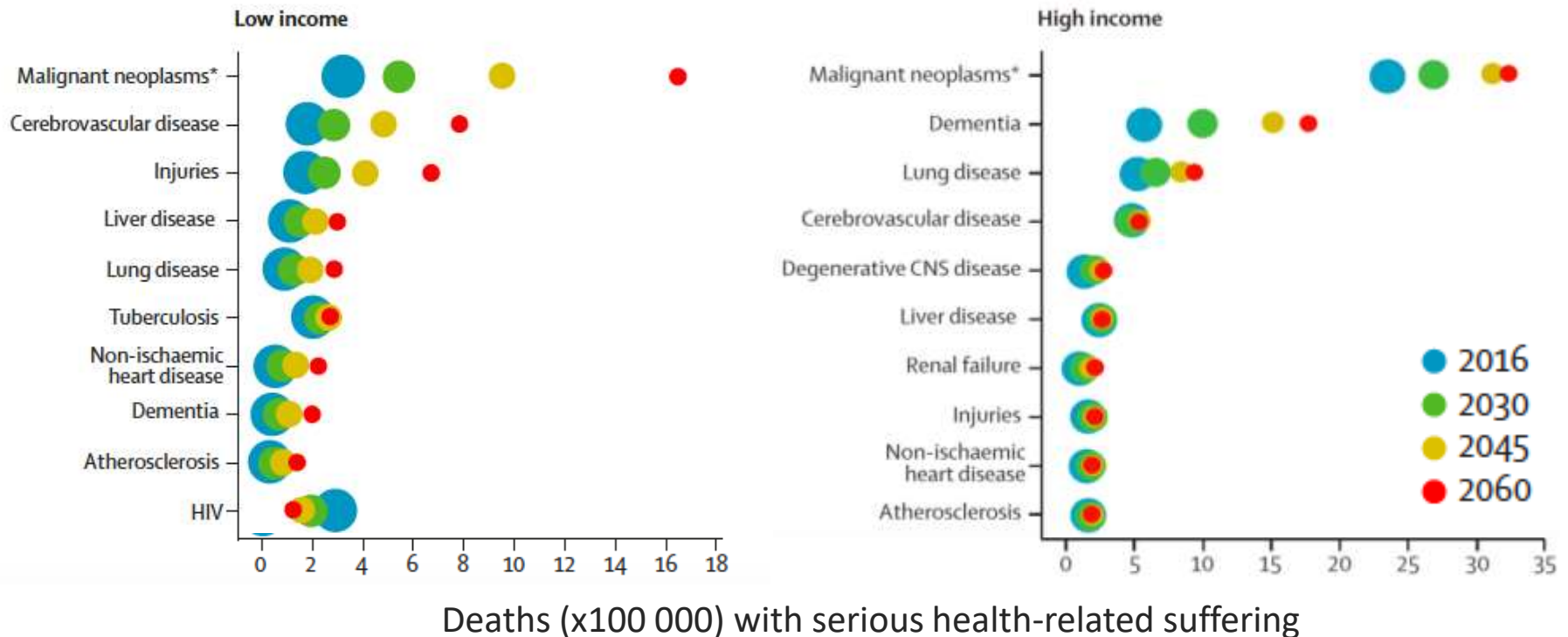
- Dr Mary Abboah-Offei
- Oladayo Afolabi
- Dr Sabah Boufkhed
- Dr Emeka Chukwusa
- Dr Eve Namisango
- Dr Kennedy Nkhoma
- Dr Adejoke O. Oluyase

Future projections of need:

Sleeman et al Lancet Global Health 2019



Top 10 conditions driving the increase in serious health-related suffering in low and high income countries



Sleeman et al, The Lancet Global Health 2019

What could be our role and response?

- **Aim**

To synthesize evidence for the role and response of palliative care and hospice teams to viral epidemics/pandemics and inform the COVID-19 pandemic response

- **Methods**

- Rapid systematic review according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines in five databases.
- Downar & Seccareccia model, i.e. in palliative pandemic focus on “*systems, space, staff, and stuff*”

Journal Pain Symptom Manage 202060(1): e31-e40



Review main findings

- Search returns
 - N=3094 articles, n=10 retained: *West Africa, Taiwan, Hong Kong, Singapore, USA, Italy*
- Recommendations
 1. responding rapidly and flexibly;
 2. ensuring protocols for symptom management are available, and training non-specialists in their use;
 3. being involved in triage;
 4. considering shifting resources into the community;

Results continued

5. considering redeploying volunteers to provide psychosocial and bereavement care;
6. facilitating camaraderie among staff and adopting measures to deal with stress;
7. using technology to communicate with patients and carers (JPSM In Press, WHO project; BMJ Open 2019);
8. adopting standardized data collection systems to inform operational changes and improve care.

Preparedness: African palliative care survey

- JPSM in Press
<https://doi.org/10.1016/j.jpainsymman.2020.09.018>
- **Background**
 - High burden of symptoms, low availability of ICU
 - High prevalence of comorbidity
 - Palliative care is essential but overlooked in preparedness plans
 - International Health Regulations 2005 require plans for public health threats of international concern

Methods

- Cross-national online survey with APCA
- Eligibility:
 - Palliative care service in any African country
 - Non-probabilistic sampling
 - APCA member list/ non-member partners
 - One respondent per service
- Based on Costantini (Pall Med 2020)
- SmartSurvey platform April-May 2020

Results

- 83 full respondents
 - 73% participation rate, 50% completion rate
 - **Staff anxiety** (possible range 1-10)
 - **personal infection** : median 9 (IQR 8-10)
 - **community reaction**: median 8 (IQR 7-10)
 - **Staff absenteeism**: one-third identified
 - **fears**: unemployment, civil unrest
 - **support**:
 - 59% counselling, 17% team meeting discussions

Results

- Infection control
 - 2/5 had not **trained** all staff
 - 3/5 included **cleaning** staff
 - 50% had no records of relatives visting
 - Among **community** services, 61% lacked **infectious waste management** facilities
 - PPE
 - **none** for clinical staff 41%
 - **none** for cleaning staff 45%

Results & conclusion

- 43/83 had symptom control protocols to share
 - of these n=40 could deliver training
 - main limitation was resources to share expertise
- Palliative care **MUST** be assessed in preparedness plans
- Resources are needed to support staff **AND** wider health system

African COVID-19 case management guidelines

- **Do the clinical management guidelines for Covid-19 in African Countries reflect the African quality palliative care standards? A rapid review**
- Oladayo A Afolabi , Mary Abboah-Offei, Eve Namisango, Emeka Chukwusa , Adejoke O. Oluyase, Emmanuel BK Luyirika, Richard Harding, Kennedy Nkhoma

Bull World Health Organ. E- pub: 26 May 2020.
doi: <http://dx.doi.org/10.2471/BLT.20.267120>

Methods

- Rapid document analysis May 2020
 - APCA network identified all government available case management guidelines
 - International Guideline Network
- Appraised against
 - *“African Palliative Care Association standards for providing quality palliative care”*
 - *Narrative synthesis of extracted data*
- *Principle 2: “Holistic Care Provision”*
 - *17 standard themes*
 - *OA & MOA independently graded*
 - *EN EC AO KN verified*



Results

- Of 54 countries
 - Online retrieval 31 documents retrieved/14 countries
 - 23 documents from 16 key contacts
 - 15 retained for analysis
- Comprehensive recommendations on psychosocial support & communication
N=15/15

Results

| Standard | Countries |
|----------------------------------|---|
| Staff psychosocial support | Tanzania |
| Spiritual needs | Ethiopia & South Sudan |
| Decision making & choice in care | South Sudan, Eswatini, Ethiopia, and Uganda |
| Family support | South Sudan, Eswatini, Ethiopia, Tanzania, and Uganda |

However, majority of standards not met

Results

- Standards partially met by majority:
 - 2.1 Planning and coordination of care 14/15
 - 2.2 Access to Specialist Palliative care 11/15
 - 2.4 Pain and symptom Management 15/15
 - 2.6 Management of Medications 15/15
 - 2.11 Care for special needs populations 12/15
 - 2.17 Providing support to care providers 15/15
- Fully met 14/15
 - standard 2.5 (Management of opportunistic infections)

COVID-19 repository for sub-Saharan Africa

COVID-19 in Sub-Saharan Africa

#COVID_SSA



Home

Latest Updates

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Technical Notes

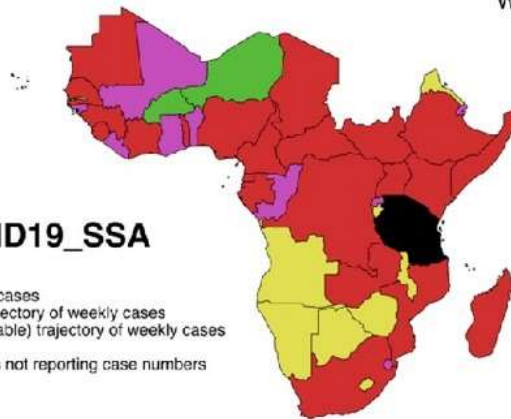
Resources

Just over one billion people (14% of the world's population) live in the 46 countries of the Sub-Saharan African region (SSA). Their first confirmed case of COVID-19 infection was reported, in Nigeria, on the 28th February 2020, just two months after the first notification of a pneumonia of unknown cause in Wuhan, China. On the 11th March 2020 the Director General of the World Health Organization, Dr Tedros, classified the COVID-19 outbreak as a global pandemic. By 1st April 2020 43/46 sub-Saharan Africa countries had reported confirmed cases of COVID-19. All of the 46 sub-Saharan Africa countries have since reported cases.

Week 11

#COVID19_SSA

- Classification**
- Sporadic cases
 - Rising trajectory of weekly cases
 - Linear (stable) trajectory of weekly cases
 - Peaked
 - Country is not reporting case numbers



<https://healthasset.org>

Further COVID-19 palliative care resources

The screenshot shows the website for the Cicely Saunders Institute of Palliative Care, Policy & Rehabilitation. The header includes the King's College London logo, a search bar, and navigation links for STUDY, STUDENT SERVICES, RESEARCH & INNOVATION, FACULTIES, NEWS & EVENTS, ALUMNI COMMUNITY, and ABOUT KING'S. The main content area is titled 'RESOURCES' and features a sidebar with navigation links (ABOUT US, STUDY, RESEARCH, GLOBAL HEALTH, PATIENT, FAMILY & PUBLIC INVOLVEMENT (PPI), PATIENT & FAMILY SERVICES, RESOURCES, NEWS & EVENTS, DIVERSITY & INCLUSION, CONTACT US) and a main section for 'COVID-19 Resources'. The main section includes a paragraph about the institute's role in symptom management and support, a note about the rapidly evolving evidence, and a link to a report titled 'Research priorities of people affected by serious illness during COVID-19'. A sidebar on the right contains 'OUR RESEARCH', 'KEY REPORTS', and 'PATIENT & PUBLIC INVOLVEMENT' sections.

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INTERNAL Search... GO

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Home | Cicely Saunders Institute Of Palliative Care, Policy & Rehabilitation | Resources | Useful links

RESOURCES

ABOUT US

STUDY

RESEARCH

GLOBAL HEALTH

PATIENT, FAMILY & PUBLIC INVOLVEMENT (PPI)

PATIENT & FAMILY SERVICES

RESOURCES

- 100 papers
- Department papers of the month
- Questionnaires and tools
- Key reports
- Guidelines and policy briefs
- Training, CPD and courses
- Newsletters
- External papers of the month
- Useful links

NEWS & EVENTS

DIVERSITY & INCLUSION

CONTACT US

COVID-19 Resources

COVID-19 is a pandemic emergency and palliative care has an important role in symptom management and support. The clinical, clinical academic and academic teams at the Cicely Saunders Institute are providing care and support, as well as gathering evidence in these difficult times. We have been approached for requests for resources and so we have developed this page to provide links to key sources of information and evidence.

As COVID-19 is a new disease, evidence is evolving rapidly and we suggest you frequently refer to this page for updated information and further resources, which will be added to as developments are made.

Research priorities of people affected by serious illness during COVID-19

Experiences, concerns, and priorities for palliative care research during the COVID-19 pandemic: A rapid virtual stakeholder consultation with people affected by serious illness in England Johnson, H, Brighton, L.J, Clark, J, Roberts, H, Pocock, L, Ogden, M, Kumar, R, Gardiner, C, Higginson, IJ & Evans, C

We report the findings of a rapid virtual stakeholder consultation to understand the emerging experiences, concerns and research priorities of people affected by serious illness, in relation to palliative care, during the COVID-19 pandemic.

Cicely Saunders Institute Research

Palliative care for patients with severe covid-19 Ting R, Edmonds P, Higginson IJ, Sleeman K

This article outlines the palliative care approach to the management of patients with severe covid-19 in hospital and community settings. [View the full article](#)

OUR RESEARCH

KEY REPORTS

PATIENT & PUBLIC INVOLVEMENT

WE INVITE PATIENTS, CARERS, FAMILY & THE PUBLIC TO INPUT INTO OUR WORK

Conclusions

- Opportunity for leadership
- Chance to capitalize and grow?
- Look at our stressors within
- Need clearer commitment in policy & guidance
- Community care needs careful attention
 - E.g. ASSET chronic lung patients
- Staff empowerment through mhealth (e.g. REACH in Nigeria & Tanzania)
 - “Quality & coverage” Lancet 2005