Patient centered integrated palliative care pathways in advanced cancer and chronic disease

A European Commission Framework 7 (FP7) Study
(Project ref: 305555)

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What is the study about?

InSup-C aims to identify best practice in integrated palliative care (IPC) by examining models of care delivery across a number of European countries.

The study will focus on people with advanced cancer and on those in the later stages of chronic illness, specifically chronic heart failure (CHF) and advanced lung disease (COPD).

It will deliver recommendations on best practice in IPC and on the best professional skill mix and organisational systems required to achieve optimal care.

How will the project run?

Beginning with a systematic review of relevant literature, the project will use a mixed methods approach to establish a taxonomy (general classification) of IPC models.

This innovative study places the patient and carer voice at the centre of its approach. As such, we will gather service user experiences of interacting with and accessing IPC services by following participants during their palliative care journey.

Sharing the study results

Study results will be disseminated throughout the course of the project using a variety of media. These will include conference presentations, blogs, scientific publications and reports, culminating with a book of examples of best practice.

An invitational conference will target policy and other decision makers at the highest European institutional level to ensure maximum impact of the study findings.

In time, a dedicated website will host an e-learning platform and checklists against which services can benchmark their own palliative care service provision.

Who is doing the research?

InSup-C is funded under the European Union Seventh Framework Programme (FP7). It will run for four years ending in late 2016.

The consortium partners are from seven European countries with representation from the World Health Organization and the USA.

InSup-C partner institutions will take the lead on six discrete work packages. We are working together on all phases of the study to ensure a thorough examination of IPC in order to achieve the project aims.

Our objective

We anticipate that the work of InSup-C will significantly contribute to our understanding of what works best in delivering IPC in a European context, but will be applicable in other geographical areas and for a range of patients with complex or chronic care needs.

InSup-C is a truly collaborative effort and has the potential to improve the care we provide to those facing chronic long-term decline and death across Europe. If we are able to do something to ease this passage, we will have succeeded.