

SpringerBriefs in Public Health

Child Health

Claudia Delgado-Corcoran · Ryann Bierer · Lauren Cramer Finnerty ·
Katie Gradick · Brandy Harman · Mark Harousseau · Brooke Johnston ·
Sydney Kronaizl · Dominic Moore · Benjamin Moresco ·
Betsy Ostrander · Paige Patterson · Holly Spraker-Perlman ·
Amanda L. Thompson · Antonia Vitela-Elliott

Specialized Pediatric Palliative Care

SpringerBriefs in Public Health

SpringerBriefs in Child Health

Series Editor

Angelo P. Giardino, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

SpringerBriefs in Child Health present concise summaries of cutting-edge research and practical applications from the fields of child and adolescent health. This book series is designed to target children's health issues from birth through adolescence, from both a policy and practice perspective. Each subject in the series will be written by a specialist in that area. Their expertise will offer evaluation of the special health issues that would be of value to any health care provider. The authors all practice at nationally recognized children's hospitals and have done extensive research in their respective areas. The "template" for the series will be in three sections:

- "Snapshot from the Field" will address current practice and policy
- "Implications for Policy and Practice" will deal with the emerging science and best practices related to cutting edge work going on in the field
- "Looking Ahead" will look forward towards anticipated changes, recommendations and strategies to achieve the best for children and families.

Featuring compact volumes of 55 to 125 pages, the series covers a range of content from professional to academic. Possible volumes in the series may consist of timely reports of state-of-the art analytical techniques, reports from the field, snapshots of hot and/or emerging topics, elaborated theses, literature reviews, and in-depth case studies. Both solicited and unsolicited manuscripts are considered for publication in this series. Briefs are published as part of Springer's eBook collection, with millions of users worldwide. In addition, Briefs are available for individual print and electronic purchase. Briefs are characterized by fast, global electronic dissemination, standard publishing contracts, easy-to-use manuscript preparation and formatting guidelines, and expedited production schedules. We aim for publication 8-12 weeks after acceptance.

Claudia Delgado-Corcoran • Ryann Bierer
Lauren Cramer Finnerty • Katie Gradick
Brandy Harman • Mark Harousseau
Brooke Johnston • Sydney Kronaizl
Dominic Moore • Benjamin Moresco
Betsy Ostrander • Paige Patterson
Holly Spraker-Perlman • Amanda L. Thompson
Antonia Vitela-Elliott

Specialized Pediatric Palliative Care



Springer

Claudia Delgado-Corcoran
Divisions of Critical Care and Palliative Care
Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Lauren Cramer Finnerty
Pediatric Advanced Care Team, Boston Children's
Hospital
Dana-Farber Cancer Institute
Boston, MA, USA

Brandy Harman
Office of the Chair, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Brooke Johnston
Division of Palliative Care, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Dominic Moore
Division of Palliative Care, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Betsy Ostrander
Division of Neurology, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Holly Spraker-Perlman
Divisions of Hematology/Oncology and Palliative Care
Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Antonia Vitela-Elliott
Palliative Care Services, Primary Children's Hospital
Intermountain Healthcare
Salt Lake City, UT, USA

Ryann Bierer
Divisions of Neonatology and Palliative Care
Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Katie Gradick
Division of Palliative Care, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Mark Harousseau
Divisions of Palliative Care and Hospital Medicine
Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Sydney Kronaizl
Palliative Care Services, Primary Children's Hospital
Intermountain Healthcare
Salt Lake City, UT, USA

Benjamin Moresco
Division of Palliative Care, Department of Pediatrics
University of Utah
Salt Lake City, UT, USA

Paige Patterson
Departments of Pediatrics and Internal Medicine
University of Utah
Salt Lake City, UT, USA

Amanda L. Thompson
Pediatric Programs, Life with Cancer
Inova Schar Cancer Institute
Fairfax, VA, USA

ISSN 2192-3698
SpringerBriefs in Public Health
ISSN 2625-2872
SpringerBriefs in Child Health
ISBN 978-3-031-65451-0
<https://doi.org/10.1007/978-3-031-65452-7>

ISSN 2192-3701 (electronic)

ISSN 2625-2880

ISBN 978-3-031-65452-7 (eBook)

© The Editor(s) (if applicable) and The Author(s), under exclusive license to Springer Nature Switzerland AG 2024
This work is subject to copyright. All rights are solely and exclusively licensed by the Publisher, whether the whole or part of the material is concerned, specifically the rights of translation, reprinting, reuse of illustrations, recitation, broadcasting, reproduction on microfilms or in any other physical way, and transmission or information storage and retrieval, electronic adaptation, computer software, or by similar or dissimilar methodology now known or hereafter developed.

The use of general descriptive names, registered names, trademarks, service marks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

The publisher, the authors and the editors are safe to assume that the advice and information in this book are believed to be true and accurate at the date of publication. Neither the publisher nor the authors or the editors give a warranty, expressed or implied, with respect to the material contained herein or for any errors or omissions that may have been made. The publisher remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

This Springer imprint is published by the registered company Springer Nature Switzerland AG
The registered company address is: Gewerbestrasse 11, 6330 Cham, Switzerland

If disposing of this product, please recycle the paper.



Rainbow Kids

Palliative Care

*Rainbow Kids: A logo used by the palliative care service at author institution.
(Created by and used with permission from S. Josh Ware and Kari Yurth)*

Foreword

Simply put, pediatric palliative care is increasingly recognized as an essential element in the comprehensive set of services and support that are necessary to care for children who are dealing with serious illness in a compassionate manner. The authors of this monograph provide us with a broad overview of the many details that define the “what” and “how” of state-of-the-art pediatric palliative care as we now understand it. Perhaps more importantly, these valued colleagues also give us a window into the “why” of pediatric palliative care, which we could describe as being our collective way to alleviate the suffering that the pediatric patient and their family experience as they navigate through an illness and care plan. The centrality of the connection between the work pediatric palliative care professionals do and the motivation that seems to routinely animate them is captured by the word “compassion.” Drs. Trzeciak and Massarelli, in their now classic book entitled *Compassionomics: The Revolutionary Scientific Evidence That Caring Makes a Difference*, define compassion as “the emotional response to another’s pain or suffering, involving an authentic desire to help” (2019, p. 5). One could make the case that it is exactly this “authentic desire to help” that defines the field of pediatric palliative care. Dr. Brené Brown’s description of compassion characterizes well the pediatric palliative care occurring in our midst: “the daily practice of recognizing and accepting our shared humanity so that we treat ourselves and others with loving-kindness, and we take action in the face of suffering” (2021, p. 118). On an almost daily basis, those of us in pediatric health care actually witness the “authentic desire to help” combined with “action in the face of suffering” among our palliative care colleagues. Seeing their work in action assists those of us who are less skilled with how best to alleviate suffering and remain hopeful with the child and family with whom we are engaged in care.

As the authors of this monograph make clear, pediatric palliative care is a dynamic emerging sub-specialty within the broader area of pediatrics, and it is consummately an interdisciplinary effort that involves a number of professionals from a variety of other related fields. The definition of palliative care offered by the World Health Organization (WHO) (2020) best captures its comprehensive nature:

Palliative care is an approach that improves the quality of life of patients (adults and children) and their families who are facing problems associated with life-threatening illness. It prevents and relieves suffering through the early identification, correct assessment, and treatment of pain and other problems, whether physical, psychosocial, or spiritual. Addressing suffering involves taking care of issues beyond physical symptoms. Palliative care uses a team approach to support patients and their caregivers.

Each of these interdependent team members makes a unique and essential contribution to understanding the needs of a given child and their family and helps craft a care plan that optimizes what health care has to offer.

In addition to discussing the concepts of the palliative care approach referred to the WHO's definition, the authors point out a number of challenges confronting their emerging field of practice. There is well-documented variability in access to pediatric palliative care services, both nationally and internationally, with more availability present in the United States at academic settings, most notably in the nation's children's hospitals and health systems. Not uncommonly, palliative care is not well understood by the lay public nor by providers in the healthcare field and is still confused with hospice care. While palliative care can include hospice services delivered to patients near end of life, it is much broader and not limited to end-of-life care.

Additionally, the authors provide us with information about specific populations of children that are likely to be served by pediatric palliative care teams, including those children seen in oncology, cardiology, and neurology as well as those with a variety of chronic and/or disabling conditions. The authors also offer valuable insights into the venues of care, spanning inpatient, outpatient, and home care settings. The data on the growth of pediatric palliative care teams is encouraging, but the obvious mismatch between the need for pediatric palliative care and the number of pediatric palliative care sub-specialists available to serve is striking. The authors issue a realistic call to action to close the gap between those who need pediatric palliative care and the number of skilled professionals necessary to provide that care in the coming decades. This call to action revolves around broader recognition of the importance of education and training in pediatric palliative care, continued prioritization of research and evaluation in order to expand the evidence base for such care, and increased attention to ongoing sustainable funding to support the delivery of this care to all children and families in need.

Reading through the material in this monograph, the essential nature of pediatric palliative care in the alleviation of suffering among seriously affected children and their families is clear. The connection between palliative care and the authentic desire to help is palpable and defines compassion. Whether in the field of pediatric palliative care itself or as one among the many who benefit from the work of pediatric palliative care providers, our collective responsibility remains to encourage and support those who courageously come forward to serve in this compassionate manner. The ensuing pages make the imperative clear: pediatric palliative care is the

healthcare system's way of showing children and their families that we care about helping them as they navigate through the many twists and turns along their healthcare journey. Let's all commit to doing our part to help alleviate suffering by advocating for and taking steps toward greater pediatric palliative care capability and availability in our healthcare settings for all children and families who may be in need.

Angelo P. Giardino
W.T. Gibson Presidential Professor and Chair
Department of Pediatrics
University of Utah School of Medicine
Salt Lake City, UT, USA

Chief Medical Officer, Intermountain Primary
Children's Hospital
Salt Lake City, UT, USA

March 2024

References

- Brown, B. (2021). *Atlas of the heart: Mapping meaningful connection and the language of human experience*. Random House.
- Trzciek, S., & Mazzarelli, A. (2019). *Compassionomics: The revolutionary scientific evidence that caring makes a difference*. Studer Group.
- World Health Organization. (2020, August 5). *Palliative care*. Retrieved March 27, 2024, from <https://www.who.int/news-room/fact-sheets/detail/palliative-care>

Acknowledgments

The authors would like to thank Katie Boner, MA, BCC, Former Palliative Care Chaplain; Stacey Bushell, CPNP, Palliative Care Nurse Practitioner; Jessaca Condas, BSN, RN, Palliative Care Nurse/Care Coordinator; Anne Harvey, DNP, BCC, Palliative Care Nurse Practitioner; Kelly Kelso, CPNP, Palliative Care Nurse Practitioner; Allie Kendall, DNP, NNP-BC, Palliative Care Nurse Practitioner; Brittney Moss, LCSW, Palliative Care Social Worker; Sharon Noorda, BSN, RN, Palliative Care Nurse/Care Coordinator; Ashley Peter, LCSW, Palliative Care Manager; Jamie Seale, NNP-BC, Palliative Care Nurse Practitioner; Tomoko Tsukamoto, MSN, RN, Palliative Care Nurse/Care Coordinator; and Kari Yurth, CMHC, Mental Health Therapist, for their expertise, support, and assistance in preparing the manuscript and for being part of a great team.

Contents

1	Introduction and Definitions	1
1.1	Introduction to Palliative Care	1
1.2	Definition of Terms Commonly Used in Palliative and Hospice Care	2
1.3	Primary and Specialized Palliative Care	5
1.4	Clinical Areas of Focus in Palliative Care	6
1.4.1	Medical Communication	6
1.4.2	Goal Setting	7
1.4.3	Advance Care Planning	8
1.4.4	Symptom Management	8
1.4.5	Connection Along the Care Continuum	9
1.5	Unique Aspects of Pediatric Palliative Care	10
1.6	Holistic Approach: Roles of Interdisciplinary Pediatric Palliative Care Team Members	11
1.6.1	Pediatric Palliative Care Social Worker	11
1.6.2	Pediatric Palliative Care Child Life Specialist	12
1.6.3	Pediatric Palliative Care Chaplain	13
1.6.4	Pediatric Palliative Care Psychologist	13
	References	14
2	Pediatric Palliative Care Involvement in Specific Populations	17
2.1	Perinatal Palliative Care	17
2.1.1	Perinatal Palliative Care Teams	18
2.1.2	The Perinatal Palliative Care Consultation	18
2.1.3	Potential Barriers to Providing Perinatal Palliative Care	19
2.2	Children with Heart Disease	20
2.2.1	Benefits of Palliative Care Integration for Children with Heart Disease	21
2.2.2	Barriers and Facilitators to Palliative Care Integration for Children with Heart Disease	22
2.2.3	Conclusions	23