Abstract

Patient-centered palliative care, particularly within home-based settings, represents a critical advancement in providing comprehensive, individualized support for patients with serious illnesses and their families. This model prioritizes the patient's preferences, values, and needs, integrating a holistic approach that encompasses physical,

Home Health Services; Hospice Care; Patient Autonomy; Comfort Measures; Family Support

In the realm of healthcare, palliative care has emerged as a critical component of comprehensive medical support, particularly for individuals with serious, life-limiting illnesses [1]. Traditionally, palliative care was predominantly administered within hospital settings, focusing on managing symptoms and enhancing the quality of life for patients through clinical interventions and support. However, there is a growing recognition of the bene ts of delivering palliative care in the home environment, where patients o en experience a greater sense of comfort, autonomy, and emotional support. Home-based palliative care models have gained signi cant attention as they o er a more patientcentered approach, addressing not just the medical needs but also the personal and emotional preferences of individuals and their families [2].

ese models aim to provide holistic care that encompasses physical symptom management, psychological support, and social and spiritual well-being, all within the familiar and intimate setting of the is approach aligns with the principles of patient-centered care, which prioritize the values, needs, and preferences of patients and their families. By integrating interdisciplinary teams that include healthcare contrasts with traditional models that o en emphasize disease-speci c treatments and can sometimes overlook the holistic needs of the patient. Home-based models of PCPC have gained prominence as they align closely with the principles of patient-centered care, o ering a more personalized, comfortable, and supportive environment for patients.

is discussion explores the advantages, challenges, and best practices of home-based palliative care models [5].

: Home-based palliative care allows patients to remain in a familiar environment, which can signi cantly enhance their comfort and overall quality of life. Familiar surroundings o en help reduce anxiety and distress, promoting a sense of normalcy and stability.

e home setting enables a more tailored approach to care, as healthcare professionals can adjust interventions based on the patient's daily experiences and preferences. personalization helps in managing symptoms more e ectively and aligning care with the patient's values and goals [6].

: Home-based care models o en involve family members more directly in the caregiving process. is inclusion not only supports the patient emotionally but also provides families with families. By integrating interdisciplinary teams that include healthcare the education and tools needed to manage care e ectively, fostering a professionals, social workers, and volunteers, home-based pallioverview containing approach to palliative care [4].

> : Home-based care can be more cost-e ective compared to hospital or institutional settings. By reducing the need for hospital admissions and long-term facility stays, overall healthcare

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Patient-centered palliative care (PCPC) focuses on improving the quality of life for patients with serious illnesses and their families by addressing physical, emotional, and spiritual needs. is approach

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: Home-based palliative care can face challenges related to resource limitations, such as the availability of specialized equipment and medications. Ensuring access to necessary resources and support services can be a logistical challenge [7].

: While family involvement can be bene cial, it can also place a signi cant burden on caregivers. e physical, emotional, and nancial stress associated with providing round-the-clock care can impact caregivers' well-being and their ability to provide e ective support.

: E ective home-based palliative care requires seamless coordination among various healthcare professionals,

including doctors, nurses, social workers, and therapists. Ensuring that

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