

Transforming palliative care through connections



Ednin Hamzah

ednin@hospisma.org



David Tasma and Cicely Saunders



- Connections may foster transformation
- The connection between Dame Cicely Saunders and David Tasma led to the development of the concept of 'total pain'



Transformation could be

Personal



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graph TD; A[Personal] --> B[Professional]; B --> C[Organisational]; C --> D[National];
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Professional

Organisational

National



First point of connection and transformation

- During my 3 year training rotation in internal medicine - respiratory medicine
- Witness to a delicate consultation between my respiratory consultant and a dying patient
- Changed my personal perception of how medicine should be practised

In Malaysia - learning lessons from the pioneers

- Do you know who, how and why palliative care was started in Malaysia?
- Different models of starting palliative care in Malaysia. if you are not connected with the past, what is the relevance of the future?
- The value of volunteering across the country
- The bravery and initiative to start something that had not existed ...and remain committed for decades. Work life balance?
- The pursuit of knowledge - because it is needed.. What was given and what was lost?
- Amateur professionals or professional amateur?
- Are the projects started years ago sustainable and able to grow ?

The value of connections

- Window to the development of palliative care (wisdom v knowledge)
- The chance to have a discourse about the actions taken
- Invitation to create a path where there was none
- Shared values create partnerships and lasting relationships
- You are not alone

Catching companions

- Rising stars
- As they develop and grow, so will you (hopefully)
- The skill is spotting them as they emerge



Original papers

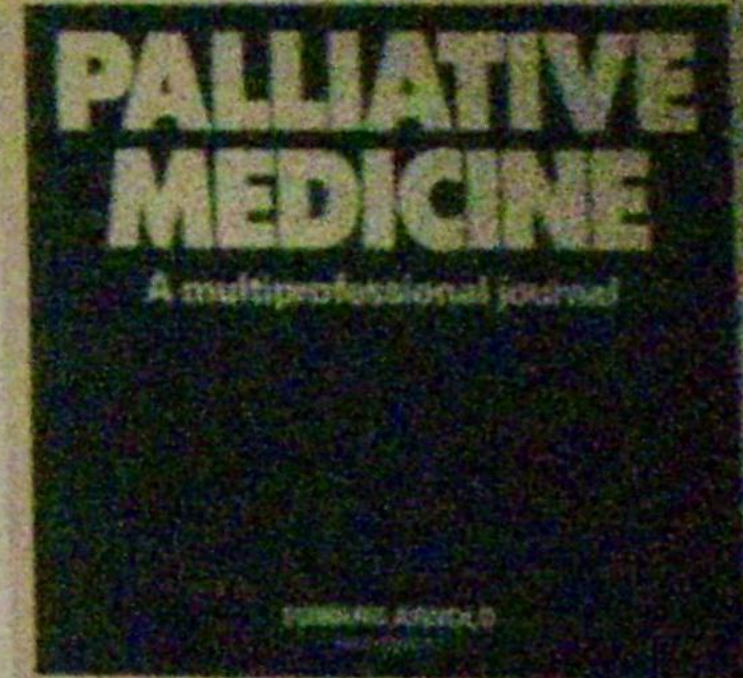
What does it mean to you to be doing palliative care? What does that mean to those that you care for or work with?

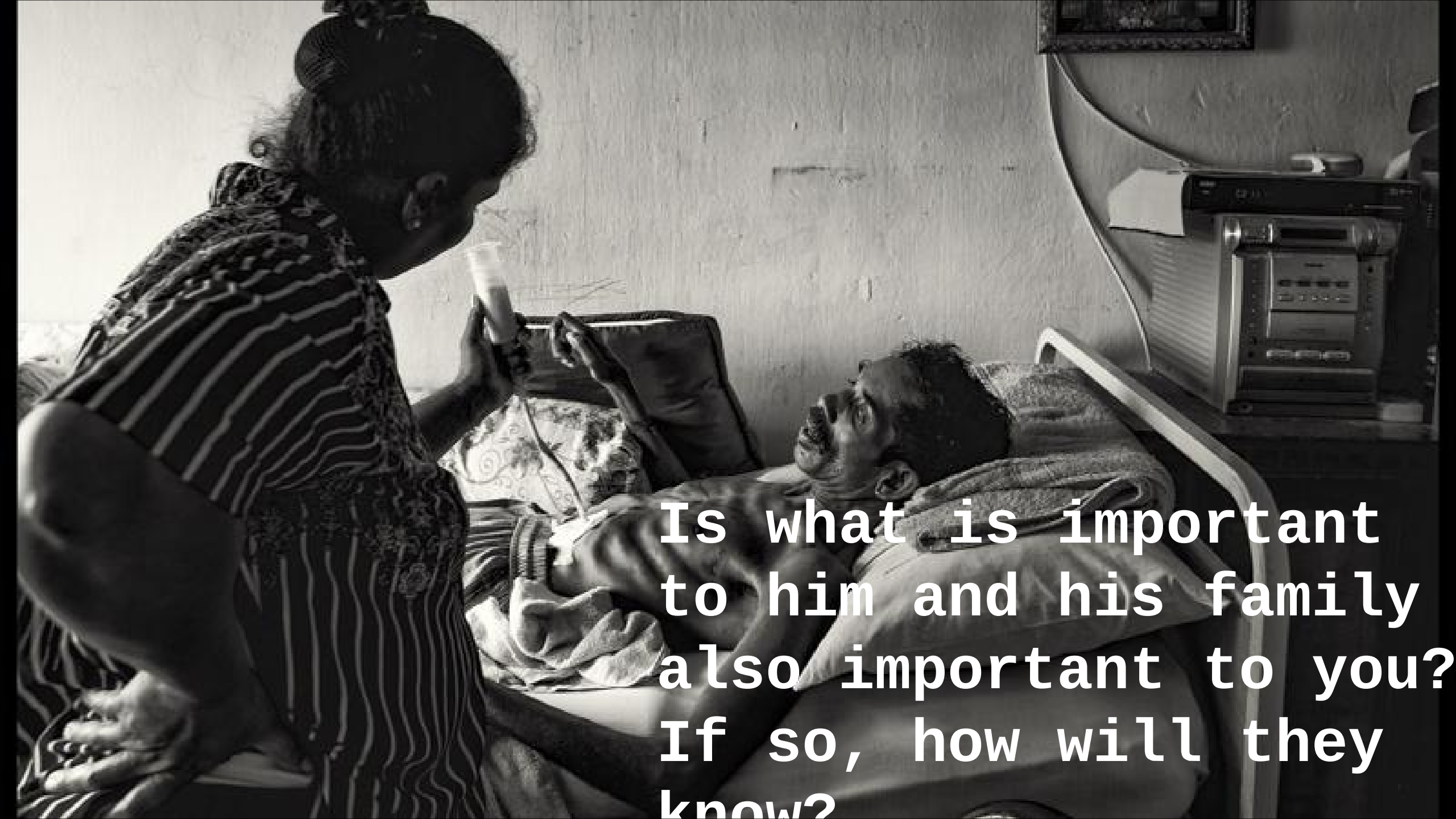
Palliative medicine – just another specialty?

M Kearney *Consultant in Palliative Medicine, Our Lady's Hospice, Dublin, Eire*

Key words: healing (non-MeSH), hospice, medical philosophy, medical specialties, specialism, terminal care

It is argued that palliative medicine may be in danger of developing into a specialty of 'symptomatology'. Such a specialty would be confined by the limits of the medical model and its particular view of illness. The potential for physicians working in palliative medicine to go beyond symptom control to creating conditions where healing at a deep personal level may occur for the individual patient, and the practical and personal implications of this, are discussed.





Is what is important
to him and his family
also important to you?
If so, how will they
know?

Leadership : Models develop according to

- Founder's vision
- Context
- Resource
- Programme
- Collaboration



Hospis Malaysia

- Model influenced through connections across the world
- Reflected and checked through frequent visits and monitored with patient views (formal and informal)
- Development of an organisational culture that became infused by all that worked there
- Constantly evolving through the influence of connections
- Always patient centred and inclusive
- Transformation and on going process



Adding wings to caterpillars does not create butterflies. It creates awkward and dysfunctional caterpillars. Butterflies are created through transformation.

Stephanie Pace Marshall



Asia Pacific Palliative Care Network



- Legally registered in 2001 in Singapore
- Rosalie Shaw as Executive Director (1999 - 2008)
- 14 founding 'sectors'



The connection between APHN and Hospis Malaysia

- Created connections with many palliative care workers across the region to Hospis Malaysia and vice versa
- Many came and spent time to develop Hospis Malaysia
- Assisted in providing not just palliative care training and education but also enhanced a learning environment, shared values and cultural competency
- Staff from Hospis Malaysia became regional resources and participated in training in many countries
- 2 countries signed Memorandum of Understanding

Visit by DG of Health, Thailand. 2023



- Hospis Malaysia has a long history of working with Thailand.
- Doctors and nurses from Thailand were sent to train at Hospis Malaysia
- In 2023, the DG of Health together with a contingent of hospital directors visited Hospis Malaysia to be briefed on our clinical and training activities

Memorandum of Understanding

13th April 2023

China



Connecting Sarawak to the region

- The political leadership of Sarawak were open to develop palliative care with APHN
- Faculty from Kuala Lumpur, Australia, Singapore, Philippines joined local palliative care leaders in Sarawak to collaborate in training health care workers in Sarawak over 4 years
- Exposes local participants to experience different teaching methods as well as becoming more aware of what is possible outside the country
- Development of regional links beyond Malaysia – Sarawak palliative care leaders are invited to



Dr Suraj

Yong

Dr Wang XiaDong

Dr BaiLu

Dr Attakorn

Jiak Jee

Luo Ren

Gabriel

Hui Wen

Michelle

Ms Chalerm Sri

Dr Karin

Dr Sharon

Dr Mingota

Dr Arabelle

Dr Shirlynn

Dr Sushma

Dr Ghauri

Dr Ednin

Poh Wah

Trudy

Giam

Dr Andrew

Dr Anjum

Dr Roopesh

Ms Nanda

Dr Kinley

Jessica

MONEY EXCHANGE
Singapore
JiangHu Autu
Si Chen Dao Hua at PABR
features its new auto-
menus specially created by
Lil
Delicious dishes include Sp
Orange Peel, Steamed Red G
Prepared Mixed Chilli, and a
Priced from S\$208 per person
and 2 persons to share

The effect of connections

- Transforms the individual from a narrow local / national focus to one that may consider other views and options
- Solves problems before it happens
- Sets higher benchmark
- Create connections beyond boundaries and cultures
- Create lasting professional and personal friendships
- Shared values
- Improve palliative care outcomes

Lucy Watts and Dr Tedros Adhanom Ghebreyesus, WHO

- Lucy Watts was a palliative care patient and an advocate who met Dr Tedros, the Executive Director of WHO.
- Their meeting convinced Dr Tedros of the importance of palliative care and set about in motion several initiatives by WHGO



If you had a chance to meet the Minister of Health for a few minutes



- How will you make yourself relevant?
- What would you talk about?
- What is the reason and what are you hoping for?
- Who will benefit from your ask?
- Why should your request be considered?
- How should it be evaluated?
- Is your request important to the person

Listen to your patients

- Do not portray them as being helpless and weak but people with strength and dignity
- Listen to not just their words but the meaning and values behind them
- There is a lot of patient related evidence for palliative care, use them and provide care from a person centred and evidenced based platform
- Ensure that you have the competency.
- Remember at some point, you and your loved ones may someday need palliative care

Summary

- At its basic point, palliative care is a connection between patients and their families with care providers
- True connections may transform the practise of palliative care into a higher and deeper level (but it could also go the other way..)
- Be brave in meeting others and be open to their values, thoughts, learning and practises surrounding palliative care
- The evolution and transformation of regional and global palliative care has been through connections