Does respite care address the needs of palliative care service users and carers? An exploration of their perspectives and experience of respite care

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Background
The research is located in a professional doctoral study carried out in the School of Health and Social Science, Northumbria University. The central focus of the doctoral electrons is in the context of the palliative care (Hew, 2005) and is in line with the research priorities of the School. The School’s research priorities include palliative care and the wider role of the team. The aim of the research is to explore the lived experience of palliative care service users and carers who are referred to hospice respite care facilities.

The sample and method
The research is an ethnographic study with a qualitative design, using a non-experimental design. The research approach is interpretive. The research is dominated by participants who experience the hospice services. The research was carried out by the sample from the research study of Palliative Care Service Users and Carers. The sample consists of 12 people who were service users or carers who were resident at The Oaks Hospice in Hull.

The sample and method
To establish how far respite care addresses the needs of palliative care service users and carers, the approach is qualitative, the methodology interpretive and the purpose of respite services. The study was based on the assumptions that palliative care service users and carers have different needs and the aim should be to provide a response that is sensitive to the lived experience of both service users and carers.

The various findings from the study show that respite care addresses the needs of palliative care service users and carers. The study also shows the importance of the service users and carers experience of respite care, which may be seen as being a powerful form of knowledge. The findings also show that palliative care service users and carers do have realistic expectations of respite care and that respite care does provide a way of managing the needs of the service users and carers.

The research findings show that there is a need for a new approach to respite care which is more comprehensive and which is more responsive to the needs of the service users and carers. The study also shows that there is a need for a new approach to respite care which is more comprehensive and which is more responsive to the needs of the service users and carers.

Conclusion
The findings from the study and the recommendation of ‘reframing’ respite care to hospices should be encouraged to ‘reframe’ respite care. The findings from the study and the recommendation of ‘reframing’ respite care to hospices should be encouraged to ‘reframe’ respite care.

Application to hospice practice
The findings from the study and the recommendation of ‘reframing’ respite care to hospices should be encouraged to ‘reframe’ respite care. The findings from the study and the recommendation of ‘reframing’ respite care to hospices should be encouraged to ‘reframe’ respite care. The findings from the study and the recommendation of ‘reframing’ respite care to hospices should be encouraged to ‘reframe’ respite care. The findings from the study and the recommendation of ‘reframing’ respite care to hospices should be encouraged to ‘reframe’ respite care.

References