Supportive Care Framework: A Foundation for Person-Centred Care

MI Fitch, HB Porter & BD Page (Editors)
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From the very beginning of this book the supportive care framework for cancer care is described as a useful tool in a range of settings, including service planning, education and research. A ‘something for everyone’ type claim, which in this case holds true. In essence, this well written and highly relevant book demonstrates how theory can be translated and used in practice. It consists of eight chapters (143 pages) written by 12 authors. The only non-Canadian author is Professor Sanchia Aranda from the Peter MacCallum Cancer Centre and University of Melbourne.

So now you are thinking, what is in this book for me? For those who have heard the term ‘supportive care’, but do not fully understand its meaning, the first chapter by Dr Fitch provides a concise definition and describes how the concept of a supportive care framework was developed. Some of its appeal and usefulness has to be attributed to its development by a range of health professionals involved in cancer care and its validation with patients and survivors. In simple terms supportive care “is an overarching concept to describe all the help cancer patients and their families may need beyond their medical, surgical or radiation interventions”.

Those involved in nursing education will be particularly interested in chapter two, which outlines how the supportive care framework was used to guide the development, delivery and evaluation of undergraduate nursing courses.

For readers with an interest in research there are several chapters that will appeal. Chapter three describes in some detail how the seven domains of the supportive care framework can be successfully measured in samples of patients with lung and gynaecological cancers and those receiving rapid response radiotherapy for palliation. This was achieved using an adapted version of the Supportive Care Needs Survey originally developed in Australia by Sanson-Fisher and colleagues (2000). Chapter four describes how the supportive care framework was used as the guiding framework to investigate the supportive care needs of parents of children with cancer and chapter six describes the usefulness of the framework when used to evaluate the effectiveness of community based oncology nurse-led supportive care programs.

For those in the more strategic positions in health care, chapters five, seven and eight are particularly relevant. Chapter five describes the highs and lows of an Australian cancer centre’s attempt to use the supportive care framework to improve supportive care service delivery. Chapter seven takes the supportive care framework outside cancer and discusses its applicability and relevance to patients who have had a stroke and their caregivers. The final chapter describes how the framework has informed policy in local, regional, provincial and national jurisdictions within Canada.

For those providing clinical care there is something relevant to practice in most of the chapters. But for me there is also an important reminder that patients cope with their situation in a variety of ways. Therefore, we must remember to discuss with patients and their family the different options for interventions, their desire for assistance and then determine together how best to provide the required assistance. While seemingly obvious to most of us, I believe this fact can easily be forgotten in the everyday business of providing care to patients with cancer.

While the text is dense, and in my view somewhat crowded, the content is useful and informative for a wide range of health professionals. I trust my grouping together of chapters according to specific interests is seen as it was meant: a guide for the ‘time short reader’ rather than a constraint.

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