



EAPC Task Force on the development of Palliative Care in Europe

SLOVENIA



Current Directory:

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None identified x

Key Contact/National Association

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Population: 2,010,347

Palliative Care Services

NK = not known

Number of Palliative Care Services						
	Inpatient Palliative Care Units	Hospices	Consultant Teams in Hospitals	Home Care Teams	Day Centres	Total
Adult/Children	1	3	2	2	0	8
Paediatric only	0	0	0	0	0	0
				Inpatient Palliative Care Units/ hospices	Chronic Hospitals /Nursing Homes	Total
Number of beds allocated to adult palliative care inpatients				34	0	34
				Adults	Children	Total
Number of Bereavement Support Teams				7	1	8

Comments/Sources

- The palliative care unit is at the General hospital 'Golnik'.
- The hospices are in Ljubljana, Maribor, and Celje (but there are no beds).
- There is a hospital palliative care team in Golnik, and one in the Institute of Oncology. In addition, there are twelve outpatient pain clinics in acute hospitals in Slovenia.
- There are four beds allocated to palliative care patients in the palliative care unit in



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the General hospital Golnik. At the Institute of Oncology Ljubljana, 10-20% of the hospital beds (20-30) are used for patients on palliative care, located on various departments.

- There is no official structure of paediatric palliative care in Slovenia. However, the majority of children with palliative care needs are cared for at the oncology department of the pediatric clinic, and in the intensive care unit at the University Clinical Center. There are no paediatric home care teams.
- Bereavement services are based in different hospices in the country and consist of both professional teams and support groups; there is also a traditional bereavement children's group holiday every summer.
- Bereavement counselling is available in general hospital Golnik, the Oncology Institute, and the psychiatric, paediatric, and gynaecology clinics.
- Throughout Slovenia, bereavement support groups are organized by social workers at the Centers for Social Care.
- Philanthropic non-government organizations also have support groups in different cities in Slovenia.

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Adult Palliative Care Population

99%	of patients receiving palliative care have a cancer diagnosis
1%	of patients receiving palliative care have other incurable conditions
	Cancer (n)
Number of patients who die at home	NK NK
Number of patients who die in a general hospital	NK NK
Number of patients who die in other healthcare institutions	NK NK

Comments/Sources

- **Percentage of patients with cancer/non-cancer diagnoses receiving palliative care is an estimate only.**

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Palliative Care Workforce Capacity

	Full-time	Part-time	Total
Physicians	0	0	0
Nurses	10	0	10
Social Workers	NK	NK	5
Psychologists	NK	NK	4
Physiotherapists	NK	NK	2
Occupational Therapists	NK	NK	0
Spiritual/Faith leaders	NK	NK	2
Volunteers	NK	NK	120

Comments/Sources

- **There are no palliative care physicians in Slovenia, as there is no specialisation in palliative care.**
- **Number of volunteers is an estimate only. Hospices have very well developed volunteer services (and also Hospital Golnik).**

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Funding of palliative care services

Total number of palliative care services funded by the government	1
Total number of palliative care services funded privately or by NGO's	0

Comments/Sources

- **Palliative care services in Hospital Golnik are funded by the government.**



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- Palliative care services in the three hospices are supported by a combination of private and public funds.

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Perceived use of main opioids in palliative care

Order of frequency	Opioid	Estimated cost per month (€)
First opioid	Morphine	67 euros
Second opioid	Hydromorphone	60 euros
Third opioid	Oxycodone	83 euros

Comments/Sources

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Key issues and challenges

- There are an insufficient number of palliative care experts who are willing to work in palliative care as providers and teachers. A particular concern is that Slovenia lacks around 200 primary care physicians and even more nurses at the present time.
- Palliative care planning focuses too much on institutions and less on home care.
- Financing and classification of palliative care standards at the national level is not well established.
- There is not a good tradition of team work and collaboration in multidisciplinary teams.
- The problem of palliative care implementation at the primary care level needs to be closely examined and evaluated.
- The European Union is giving directions to the government on the development of palliative care in Slovenia, but progress is slow.
- Family doctors are unable to prescribe good and effective pain control.
- Prejudices relating to the use of narcotics are common amongst physicians, patients and families.

[EAPC Palliative Care Euro-Barometer 2005]

Palliative care accreditation

- There is no specialist accreditation for palliative care professionals in Slovenia at the present time. However, regular education on different topics related to palliative care has been organized and become part of the curriculum for family medicine, public health and oncology offered by the Medical Faculty Ljubljana. Traditional courses and seminars are also organized for health care professionals of all disciplines involved in the emergence of palliative care in Slovenia. Two-weekend experiential workshops on palliative care communication have been specially developed and health care professionals, especially physicians, are often sent to study abroad (Salzburg, Stockholm, Manchester, Sheffield and Poznan).

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Palliative care milestones

- 1995: The non-governmental organisation, *Slovenian Hospice Association* is founded, providing professional and volunteer home hospice care, and



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palliative care education.

- 1998: The *Slovenian Hospice Association* gains recognition from the Ministry of Health.
- 1999: National guidelines for pain management are published, and the WHO book *Pain and Symptom Management for Children with Cancer* is translated into Slovenian.
- 2000: The non-governmental, organisation *Palliative Care Development Institute* is founded, with the aim of developing palliative care education and research, and increasing contacts with the Ministries of Health and Social Welfare. The Institute plays a crucial role in the strategic planning and policy development of palliative care on the national level.
- 2004: The first hospital palliative care ward with 4 beds is opened at General hospital Golnik

[EAPC Palliative Care Euro-Barometer 2005]

Health policy

- The National Committee for Palliative Care at the Ministry of Health is overseeing and coordinating a pilot study on palliative care implementation in the health care system in Slovenia from 2004 to 2008.
- Printed guidelines on pain control were distributed to family doctors, organized by the chamber of family medicine (medicine faculty).
- The Slovenian Hospice Association did not mark the publication of the Council of Europe (2003) report on palliative care (Recommendation 24 of the Committee of Ministers to member states on the organisation of palliative care).
- The Slovenian Hospice Association has not participated in any way in the Council of Europe discussions about euthanasia (the Marty Report).
- At the current time, there are no initiatives in Slovenia that seek the legalisation of euthanasia or assisted suicide. A statement about euthanasia (that life is not to be shortened or prolonged) was published in two professional reviews.

[EAPC Palliative Care Euro-Barometer 2005]

References

Clark, D., and Wright, M. 2003. *Transitions in End of Life Care. Hospice and related developments in Eastern Europe and Central Asia*. Buckingham: Open University Press, 2003, pp. 113-117, Slovenia.

http://www.eolc-observatory.net/global_analysis/slovenia.htm

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