



# 'PC-ace' Community Palliative Care: Access, Choice, Equity

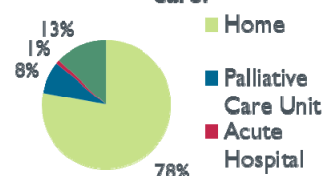


Emma Kean, Kylee Sheehy, Skye Cooke; Sydney Local Health District (SLHD)

## Case for Change

- Community based Palliative Care services support patient choice and improve end of life experience by allowing them to remain in their home.
- Access to these services within SLHD is limited by geographic location and the patient/carers ability to navigate the system.

2015 SLHD palliative care preferred place of End of Life care.



In 2015 78% of SLHD Palliative Care patients chose to die at home, yet only 64% actually did so.

## Goal

Our aim is for patients to receive Palliative Care services that are equitable and time appropriate, and which enable them to live and die in their place of choice.

## Objectives

- 90% of SLHD palliative care patients have their documented end of life care wishes met.
- 100% of SLHD palliative care speciality patients have a minimum and timely assessment of their phase (stable, unstable, deteriorating, terminal) and RUG (Resource Utilisation Group).
- 100% of SLHD palliative care patients are triaged at referral and classified according to symptom and care needs, with episode of care commenced on the day of, or day after 'ready for care' date.
- Improve the culture of surveying patients by conducting 10 patient/carer surveys per facility two (2) times per year.

## Methodology



## Lucy's Story

Lucy is referred by her GP for palliative care.

She is contacted and triaged within 24hrs of referral.

Lucy's care is commenced according to her triage assessment score and is managed by a specialist community nurse and generalist nurse with support from the GP and specialist palliative care doctor at home.

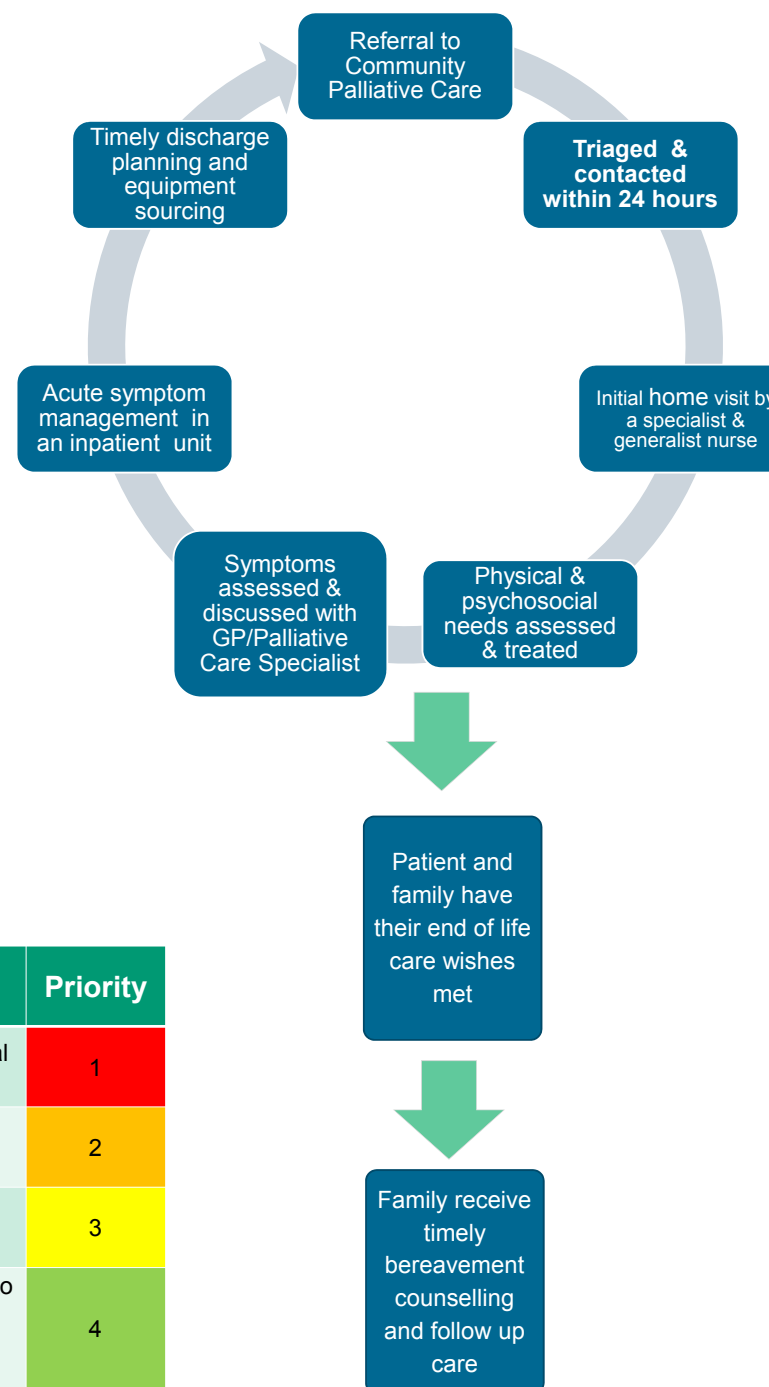
Lucy's functional and psychosocial needs are assessed and treated by the allied health team.

At the right time Lucy moves to the inpatient palliative care unit for symptom management.

Lucy's preference is to die at home and this facilitated from the inpatient unit seamlessly, with the right level of supports.

Lucy dies at home surrounded by her loved ones.

## The Desired Patient Journey



Solution	Priority
Development of a dedicated community palliative care referral and triage form and process	1
Revised model of care for community palliative care nursing.	2
Development of a district wide palliative care education program.	3
Development and appointment of a working party/committee to govern efficient and equitable use on high cost equipment including hospital beds, pressure care equipment, and home oxygen.	4

## Acknowledgements

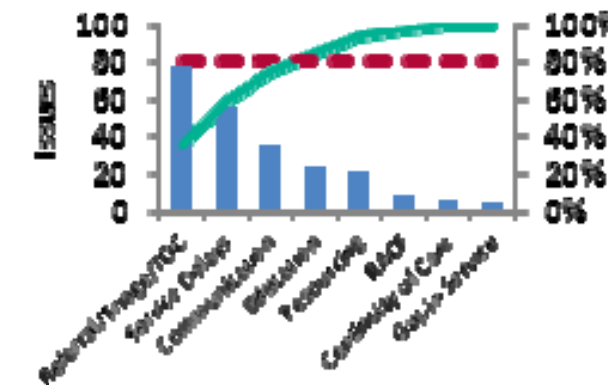
PC-ace Steering Committee  
 Sacred Heart, St Vincents Hospital  
 Greenwich Hospital Palliative Care Unit  
 Denise Fry, Evaluation Officer Community Health

## Contact

Emma Kean, Cancer Systems Innovation Manager SLHD  
[emma.kean@sswhs.nsw.gov.au](mailto:emma.kean@sswhs.nsw.gov.au)  
 Kylee Sheehy, Sydney District Nursing A/Quality & Clinical Risk Manger Community Health SLHD  
[kylee.sheehy@sswhs.nsw.gov.au](mailto:kylee.sheehy@sswhs.nsw.gov.au)  
 Skye Cooke, Palliative Care Service Development Officer SLHD  
[skye.cooke@sswhs.nsw.gov.au](mailto:skye.cooke@sswhs.nsw.gov.au)

## Diagnostics

### Themed Issues



## Sustaining Change

Every effort will be made to ensure the project outcomes are sustained. Ongoing measurement of the project indicators will be **integrated into routine monitoring** for Palliative Care services. The continued achievement of gains in patient and service outcomes will be governed by the SLHD, Concord and RPA Cancer Services Clinical Stream meetings and other relevant governance groups and management processes.

## Conclusion

- At the completion of April 2017, 90% of palliative care was delivered to patients within 24 hours of the patient being ready for care, meeting national benchmarks.
- At the completion of April 2017, 80% of care continuity occurred with either the care coordinator or the area palliative care nurse visiting the patient during the triage pilot period of the month of April 2017, exceeding the project target of 50%.
- The first education event within the palliative care education program commenced 2<sup>nd</sup> August 2017, with evaluation indicating 92% of attendees found the event helped them gain relevant skills.
- There was an increase of 25% in uptake of PEPA placements undertaken by SLHD palliative care staff from August 2016 to July 2017.