The changing landscape of palliative care & implications for allied health clinicians

Deidre Morgan, Palliative & Supportive Services, Flinders University

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National survey of Allied Health clinicians

- Cross sectional online survey of OT, PT, SW, SP, Psychology, Dietitians, MT
- 42 item survey piloted for content & face validity with expert advisory group
- 217 survey responses, 94% female: 187 useable responses to Q1
- Inductive conceptual content analysis, categories, subcodes & themes

Please describe what you think palliative care involves for patients, families & the health practitioner
Themes

1. Palliative care employs a client centred model of care
2. Acknowledgement of living whilst dying
3. Interdisciplinary palliative care interventions provide active care in a range of domains
4. Characteristics of palliative care teams & settings
1. A client centred model of care

- Aims to ↑ comfort, ↓ stress
- Holistic care
- Actively values patient and family wishes
- Shift from ‘curative’ focus to prioritising patient goals
- Allied health clinicians employ a person centred approach
- Supports the patient’s dignity
2. Acknowledgement of living whilst dying

- A focus is placed on living the life that is left – quality over quantity
- Includes planning for future care, for discharge, for death
- Extends beyond patient care into grief & bereavement support
- Considers death & dying as routine part of care – preparation, acceptance, discussion, ‘good’ death
- Supporting adjustment to change/deterioration
3. Interdisciplinary care in a range of domains

- Active approach to symptom management
- Proactive approach to care, implemented from point of diagnosis
- Allied health discipline specific support which includes
  - support of spiritual, emotional, physical, social, & cultural issues
  - education, counselling, resources, service coordination
- Rehabilitation to ↑, optimise, maintain function
- Assistance to engage/participate in meaningful activities
4. Characteristics of palliative care teams & settings

- Interdisciplinary or multidisciplinary team approach
- Allied health clinicians require certain personal qualities: empathy, patience, creativity, flexibility, determination, care/compassion, honesty, respect, self awareness
- Implemented in a range of settings – home, IP settings, may include respite
- Duration of care provision is unpredictable
Patients who might die in next 12 months (N=207)

Work setting
- 52% - hospital
- 32% - community
- 10% - residential care
- 8% - private practice
- 33% - specialist PC
Implications for Allied Health clinical practice

• Need for development of new skill sets:
  - symptom management (SOB, pain, fatigue)
  - developing conversations about dying/living whilst dying,
  - encountering grief
• Advocacy regarding rehab, symptom Mx, &/or extended length of stay to achieve an optimal outcome for patients & caregivers in generalist setting
• Debriefing? Managing your own responses
Cultural considerations

- Cultural considerations. Providing end of life care for Aboriginal & Torres Strait Islander peoples (PEPA)
  - ask Qs, preferences?
  - family spokesperson?
- QOL & pain Mx, Finishing up, sorry business, not going to get better
- Importance of silence, time to process
- Advance care yarning – develop an advance care plan
Limitations & resources

- Dependent on partner organisations for distribution
- Participants were self selecting, existing knowledge, may not be representative of allied health population

- PEPA (Program of Experience in the Palliative Approach)
CareSearch would like to thank the many people who contribute their time and expertise to the project, including members of the National Advisory Group and the Knowledge Network Management Group.

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“Palliative Care involves the management of symptoms whether they be physical - management of pain, nausea etc, functional - difficulty participating in everyday activities, preferred occupations & emotional - grief & loss, adjustment issues.

It can involve empowerment where patients & family members are supported to arrange legal & end of life paperwork. For families it can involve education & support to help them to care for their family member safely & successfully.”