

# SA Palliative Care Community Pharmacy Update

## A joint initiative of South Australian Palliative Care Services

Carers are an important resource in supporting people with palliative needs to remain in their homes. Given the complexity of medicines management, pharmacists play a primary role in helping carers to anticipate and solve problems that may arise.

### Jeffry

Jeffry Hollins is well-known to you and your staff. He is 38 years old and is the principal at the local primary school. He is also the primary carer for his neighbour Melinda. Melinda was diagnosed with small cell carcinoma 12 months ago and while you've regularly dispensed medicines for her, Jeffry is now regularly visiting the pharmacy on her behalf. Today he presents a prescription for an opioid.

### Carers

Evidence shows fatigue and inability to cope, on the part of the carer, as well as medicine errors, are leading causes for unplanned admissions to hospitals.

Carers are vital in managing the symptom burden through good medicines management. This is within a context of other competing responsibilities, including: paid employment, managing finances, preparing meals and caring for children.

The literature describes people with palliative care needs taking an average of 5 medicines at referral to a palliative care service. As their responsibilities increase, carers may feel overwhelmed. Rather than asking if Melinda has used the opioid before, it may be useful to frame the conversation on Jeffry's understanding of the situation, including his approach to managing of the medicines. This might include Jeffry's understanding of what the medicine is for or when to give as required medicines. Carers report that having their practical and informational needs met helps them to manage.

It is imperative to avoid assumptions about the carer's ability, confidence and commitment to providing care. Information may be provided using a variety of techniques, including

demonstration, as well as through both verbal and written instructions.

Some carers will be gatekeepers and will impose their own judgements on medicines based on inaccurate understanding of the role of medicines (e.g. using opioids and sedatives "too early" contributing to premature tolerance). Reassurance and written plans describing when and how to manage breakthrough symptoms are paramount.

Many carers will be appointed substitute decision makers (SDMs). When the person does not have decision-making capacity, SDMs can make decisions on behalf of that person, but only in accordance with that person's expressed preferences for and goals of care. Engaging with the carer early is valuable – an opportunity to build trust and knowledge around managing medicines before the person they are caring for deteriorates and their needs escalate.

### Useful resources

- > ["Allow Me" app](#)
- > [NPS Medicines List](#)
- > [Palliative Care Australia website](#)
- > [CareSearch \(Patients, Carers and Families\)](#)
- > [Exploring factors that influence informal caregiving in medication management for home hospice patients.](#)

### For more information

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