Adelaide Hills Palliative Care Project

Link Nurse Group Pre- Questionnaire

Name: Organisation:

What is your role within the organisation? (Eg: RN, EN, PMA, Manager)

- **Have you ever undertaken any Palliative Care courses, workshops or study days in the past? (please circle)**

  Yes No

- **Was this informal (such as in-service / on the job training) or more formal education (qualification, short course or study day)? (please circle)**

  Informal Formal

Please say what this was…

- **How long ago was the education undertaken? (please circle)**

  < 2 years 2 to 5 years > 5 years

- **How would you rate your overall knowledge of Palliative Care? (please circle)**

  Not good Quite good Very good Other

- **How often do you look after dying patients? (please circle)**

  Never Rarely Sometimes Regularly

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- **How would you rate your confidence in caring for dying patients? (please circle)**

Not at all confident Fairly confident Quite confident Other

- **If you represent a RACF, do patients tend to stay at the facility to die or do they go elsewhere?**
  Please say….

- **Overall, how well do you feel dying patients are cared for in your workplace? (please circle)**

  Not well Quite well Very well Other

  Comment…

- **Do you have any thoughts or ideas as to how this link nurse group could take Palliative Care forward in the Hills area?**

  If so, please say…

Link Nurse Group Pre- Questionnaire

- **Do you understand the concept of a "good palliative care approach"? (please circle)**

  Yes **No**

- **Does your organisation practice this concept?**

  Yes **No**

- **Does your organisation utilise volunteers for Palliative Care clients?**

  Yes **No**

- **Is there anything in particular that you would like to implement (or change) within your workplace from becoming a part of this group?**
  If so, what is this?...

- **Any other comments?...**
