SUPPORT EDUCATION ASSESSMENT and MONITORING

Final Report

A project funded

under the Caring Communities Program

by the Australian Government Department of Health & Ageing

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Name of service conducting the project: GP Connections Toowoomba

Part B – The Main Message (1 Pager)

- **What we did**
- Recruited a Registered Nurse to provide support to patients, their families or careers, General practitioners, practice staff and other health professionals in the area of palliative care.
- **What has been learned?**
- Those new partners on palliative care networks e.g. a practice nurse impact on the direction and framework of palliative care networks. When key stakeholders disengage from a project, the new networks can be fragile and suffer if not supported from other areas.
- **What is useful to other projects/communities?**
- The model could be applied in other urban and rural settings to revitalise or establish links between palliative service providers and stakeholders like general practitioners.
- **What have been the benefits of disseminating information about your project?**
- The educational resources developed during this project will have a capacity to evolve as timely and flexible sources of information. Sharing our experience will help to forecast and hopefully forewarn other communities of pitfalls in coordination of palliative care service networks.
- **What needs to happen in order to sustain the key achievements of your project**?
- Locating the SEAM nurses office at the new hospice helped create an awareness and acceptance of the hospice by General practitioners. The SEAM nurse has effectively established and revitalised relationships amongst the current service providers and General Practitioners especially however we have identified a possible gap in coordination particularly of bereavement services in our district.

Part B - Main Report (maximum 25 pages)

1. Project Recommendations

The establishment of the SEAM service in Toowoomba, Queensland, has made significant inroads in the area of networking and building of partnerships with existing rural palliative care services. These aspects of the SEAM service have positively impacted on those health professionals involved in the delivery of oncology and palliative care services and have been the outstanding features of the service.

However, it is apparent that in the area of client and family contact, as well as GP support, that the service has been insufficiently used by either of these groups. The lack of use appears to be related to a lack of awareness of the existence of the service. Extensive marketing of the service to GPs, specialists and the general public would help to address this issue. In order for the SEAM service to continue to exist, it needs to be promoted as a professional service where health professionals, palliative care clients and their families can receive advice in relation to the most up-to-date information on palliative care. It will be important in the future to maintain good contact with all GPs in Toowoomba and district and to remain known as a service that can make valuable contributions to palliative care clients and their families. This cannot be achieved without mutual respect for each health professional's knowledge and experience in the palliative care field and willingness to liaise with the available resources.

Greater acceptance and utilisation of the SEAM service may also occur once the service has been established for some time and has proven to be of benefit to health professionals, clients and their families in need of information and support. Continuation of the SEAM service would also provide opportunity for the service to become more widely known and seen as an integral part of the palliative care structures in the region. A positive outcome, however, is that the model has allowed the identification of factors that work as barriers to GP's and client/family utilisation of rural palliative care services, allowing for the implementation of strategies to overcome these barriers.

2. Project Profile

The SEAM program is funded by the Commonwealth Department of Health and Ageing (DOHA). In partnership with The Toowoomba Hospice, GP Connections is the lead organisation for the program and manages the program under the Contract with DOHA. It was envisaged that the SEAM service would:

i) increase the palliative care support available to patients and their families;
ii) provide palliative care education for patients and their families and health professionals;
iii) assess the palliative care needs of patients and their families;
iv) increase networks between care providers to overcome communication barriers and decrease duplication of palliative care services;
v) provide a care coordination model of service delivery for palliative care; and
vi) increase the role of GP and practice nurses in the care coordination of people requiring palliative care.

The SEAM program is part of the Australian Government's Caring Communities Program, which was designed to achieve the goals of the National Palliative Care Strategy. Under this strategy, funding was provided for a range of community programs to improve the quality of palliative care in the community by assisting

families, carers and health service providers to give better support to people who are dying (DOHA, 2004). The World Health Organisation (2005) defines palliative care 'as an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual'.

The main goals of the SEAM program are to address two of the three goals of the National Palliative Care Strategy (2000):

1) To improve community and professional understanding of, and professional commitment to, the role of palliative care practices in supporting the care needs of people who are dying and their families of care.
2) To promote and support partnerships in the provision of care for people who are dying and their families, and the infrastructure for that care, to support delivery of high quality, effective palliative care across all settings.

The SEAM Program was developed to help meet a number of Caring Communities Program objectives:

1) To improve the knowledge and skills of families, carers and community groups so they can better support relatives, loved ones or individuals within the community who are dying, and work optimally through their bereavement.
2) To enhance community awareness of the role and benefits of palliative care in meeting the needs of people who are dying and their families.
3) To improve awareness of a broad range of health care providers the role of palliative care as an integral part of the health care system and their role in this area.
4) To support the educational needs of the specialist palliative care workforce and primary health practitioners and hence the skills of both groups in working collaboratively across professional boundaries.
5) To support the coordination of care for the person who is dying and their family.

6) To develop strong partnerships between palliative care service providers, other health services providers and the service system infrastructure to ensure the delivery of palliative care is geographically accessible and integrated across service delivery settings.