

Eastern
Metropolitan
Region Palliative
Care Consortium



Annual Report 2021–2022



Eastern Metropolitan Palliative Care Consortium members provide services on the traditional lands and waterways of the Wurundjeri people and offer our respect to their Elders past, present and emerging.

A message from the Chair



On behalf of the members of the Eastern Metropolitan Region Palliative Care Consortium (Emrpcc), I am pleased to present the 2021-2022 annual report. Emrpcc members have provided a strong base of support for each other towards improving patient and carer outcomes in negotiating the significant and ongoing challenges of providing palliative care in a COVID-19 affected environment.

I would like to express appreciation to our active members for their consistent contribution to Consortium activities which enable Emrpcc to continue its coordinating and resourcing function to the eastern region. Particular thanks to Jeanette Moody, CEO of Eastern Palliative Care; Professor Leeroy William, Clinical Director of Supportive and Palliative Care from Eastern Health; and Andrea Lockwood, Program Manager – Aged and Palliative Care, Eastern Melbourne Primary Health Network. We were pleased to welcome Dr Mark Boughey back from leave to his role as Clinical Director of Palliative Care, St Vincent's Health.

Emrpcc has continued to work with our partners and stakeholders to strengthen diversity awareness and inclusive practice in the delivery of our regional palliative care services. While our education activities have continued via virtual delivery modes, we anticipate an increasing mixed method of face-to-face combined with online presentations into the future. Our regional training program activities have featured a strong focus on building capacity in regional Aged Care facilities and carers in diverse cultural communities.

On behalf of Emrpcc, I would like to express our deep appreciation to our Consortium Manager, Barb Dobson, for all of her hard work and commitment to the palliative care sector and Emrpcc specifically; to all of our stakeholders and partners for their constant efforts to strive for excellence in the delivery of both community based and hospital based specialist palliative care; and, to the broader community network for their support of the work of the Consortium.

Michael Bramwell Emrpcc Chair

A word from the Consortium Manager



Metropolitan Melbourne entered into its July activities with the hope of opening up after extended lockdowns in the previous year. This was not to be. Melbourne Lockdown #5 commenced on Friday 16 July lasting until 27 July. Lockdown #6 began on 5 August and continued until 21 October. Palliative care services across the region remained in a state of constant vigilance to address the impost of public health orders, as they managed staffing resources while continuing to provide the same high standards of palliative care.

There was an additional flow-on effect to Specialist Community Palliative Care Services as an increased number of families wanted their dying loved ones to be supported at home. In the Eastern Metro Region, pressure continued to be placed on Eastern Palliative Care resources with a significant rise in clients wanting to die at home; additional pressure was also placed on Eastern Health and St Vincent's Health to manage wards which accommodated COVID-19 related care, whilst also managing staff on furlough. Face-to-face volunteer services remained in suspension during lockdowns, along with various allied health supports. Creative caregiving moved to an online space as telephone and online communication mechanisms provided a bridge to clients and families at home. I would like to particularly acknowledge our colleagues who pushed through extended weeks of exhaustion, under very trying circumstances, to continue delivering excellent palliative care to an increasing number of people.

During the previous year, virtual forms of communication became the norm. Emrpcc has continued to work with partners in initiatives via these mechanisms. Sponsorship of places in online education delivered by EPC were offered to regional staff in both aged care and community care organisations. The annual Eastern Reconciliation event hosted by Yarra Ranges Council was once again a wonderful contribution to reconciliation initiatives. Emrpcc offered representation to the National CarerHelp Diversity project which is chaired by Dr. Mark Boughey. Commencing in May, Eastern Palliative Care and EMPHPN took the lead in arranging a series of four Webinars for GPs.

Emrpcc continued to play a connecting role between sectors and services by promoting or introducing significant pieces of work to colleagues. We continued to be involved in several surveys and focus groups connected with research and strengthening practice, including the redesign of the Victorian Healthcare Experience Survey (VHES), PCV interviews, clinical workshops and communities of practice. Clinical and community network participation and communication remained online.

Our representative from NEMICS, Kathy Simons moved to a new role and we recently welcomed Linda Nolte in her place. Janeen Cato now represents Bolton Clarke, in place of Leanne Davey. Our thanks to both Kathy and Leanne for their enthusiastic and positive contributions to Emrpcc meetings and projects.

Emrpcc members met on five occasions during 2021-2022 with meetings continuing to be conducted online. Emrpcc has been well governed, guided and supported by its Executive members. I would like to

A word from the Consortium Manager

particularly acknowledge the flexible and responsive leadership of our Chair, Michael Bramwell and the consistent, generous contributions of Vice Chair, Jeanette Moody and Executive member, Professor Leeroy William.

I will step away from the Consortium Manager role in June. I have appreciated the opportunity to serve our Eastern Metro Region community in the palliative care sphere, and celebrate both knowing and working with so many compassionate, kind and capable people. As I said last year, the Eastern Metro Region has been well served by some extraordinary examples of resilience, compassion, clinical excellence, dedication and exemplary leadership and I leave with confidence that this will continue.

Barb Dobson Consortium Manager

Emrpcc Governance

The Eastern Metro Palliative Care Consortium is an alliance comprised of publicly funded specialist palliative care services in the region and a number of associate members with a specific interest in collaboration to ensure the provision of high quality palliative care.

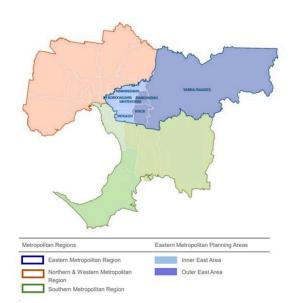
We work together to implement, review and improve services so the residents of the Eastern Metropolitan Region with a life limiting condition, their families and carers have access to a high quality palliative care system that fosters innovation and provides coordinated care and support that is responsive to their needs.

Emrpcc is one of eight regional palliative care consortia. The consortium manager role is hosted by EPC. The three funded specialist palliative care services make up the Consortium Executive and oversee the implementation of the palliative care policy direction of the Victorian Department of Health.

The Emrpcc Executive met on 3 occasions during 2021-2022. The Consortium members (executive and Associate) met on 5 occasions. All meetings were held by Zoom. The Emrpcc members are listed below.



Regional Profile



The Eastern Metropolitan Region encompasses the Local Government Areas (LGAs) of Boroondara, Knox, Manningham, Maroondah, Monash, Whitehorse and Yarra Ranges. There is a significant difference in the demographic, cultural and geographic profiles of the inner and outer areas of our catchment. The region particularly features inner suburban LGAs as well as Outer LGAs where service access and delivery is often affected by issues associated with rurality. People in the interface LGA of Yarra Ranges experience particular issues with access to services due to distance and isolation.

Collectively the region embraces cultural and linguistic diversity; with the municipalities of Manningham, Monash and Whitehorse currently having the greatest number of people who speak a language other than English at home.

The Eastern Metropolitan Region is experiencing the broader Australian trend of an ageing population. The percentage of the population aged 65 and over is expected to continue to grow. Residents of the Eastern region also have the highest life expectancy of any region in Victoria.



Throughout this year, one LGA in the Eastern Metropolitan Region embarked on a recovery process. On 9 June 2021 Yarra Ranges was hit by the worst storm in the region's history; one that left a trail of destruction, massive disruption to the lives of the local community and a multi-million dollar damage bill.

In one night, 177 properties were damaged (76 of which have been deemed uninhabitable). Tens of thousands of trees fell blocking roads and bringing down telephone and powers lines and which left thousands of people without water, heating, phone or an internet connection for weeks. To the great credit of the services involved, palliative care continued to be provided to families in the area throughout this time when there continued to be lockdowns and associated restrictions.

Moving on



Jeanette Moody
CEO Eastern Palliative Care

In April 2021 staff at EPC were informed of a significant change in the leadership landscape. A retirement announcement for Jeanette Moody was shared at EPC and more broadly in the sector. Jeanette commenced her tenure at EPC in January 2008 and went on to offer leadership to EPC and the palliative care sector over the next 14½ years. EPC's Chair, Margaret Stewart shared the following in her announcement of Jeanette's retirement:

Jeanette's leadership of the growth of our service, its evolving complexity, expansion and increased geographic reach, uninterrupted continuity of care during the global pandemic, and prudent financial stewardship amidst continued uncertainty in funding are just the headlines in a litany of successes that hallmark the last 14 years.

As part of her commitment passion for palliative care excellence, Jeanette served as Vice Chair of Emrpcc as well as on a range of clinical working parties convened by stakeholders in the sector, including the Department of Health and Safer Care Victoria. Jeanette is well known and highly regarded for her excellence in leadership, great sense of humour and clearly visible respect for staff, volunteers, carers and colleagues who contribute to the care of people with life limiting illness. Jeanette has provided a strong voice for Specialist Community Palliative Care offering insightful contributions from her extensive professional experience to a range of forums.

We have been enriched to share the years with Jeanette. We applaud and celebrate Jeanette's extraordinary contribution to palliative care and our community and extend our very best wishes to her and her family for the new chapter ahead.

Moving on



Associate Professor Bruce Rumbold Director Palliative Care Unit, La Trobe University

At the end of June 2021, Associate Professor Bruce Rumbold retired from his work at La Trobe University. Bruce has been a leader in Palliative Care both locally and internationally for several decades and has combined significant experience in academia with his formative training in theology and pastoral care. His early published works drew readers' attention to the importance of spiritual care in palliative care. Spirituality and palliative care: social and pastoral perspectives was published in 2002. He has been an author and/or collaborator of more than 100 articles. His works have offered reflections on how we can better provide for our dying community by remembering the centrality of community to both life and death.

In his role as Director of the Health Promoting Palliative Care Unit at La Trobe University, Bruce and his colleagues have lead research and projects which bring to the forefront the need to situate dying, death and bereavement in a community context. By taking a perspective that palliative and end-of-life care is a community responsibility which is met effectively through creating respectful partnerships between the community and services, health promoting palliative care works to integrate all aspects of care from the practical and medical to the numinous and spiritual.

Greatly loved and respected by so many of us in palliative care, Bruce will be missed for all he is and all he has offered to the work we all do. Emrpcc wishes him well in his future endeavours.

Building capacity in the Eastern Region

Throughout this last year Emrpcc has retained its focus on building regional capacity across several domains. A strong focus has been on establishing relationships with and working alongside those who are leading initiatives which improve our collective capacity for inclusive practice at both community and organisational levels. With the sector under significant pressure, it was a good time to strengthen existing developments and refrain from asking more of our colleagues who were managing high levels of exhaustion and stretched resources.

Networks

Emrpcc is an active member of the Victorian Palliative Care Consortium Managers Network. Meetings are held bi-monthly with representatives from a range of key stakeholders in the palliative care sector gathering to discuss emerging issues and enhance coordination and communication across the State.

Throughout the initial stages of the COVID-19 crisis, EPC was host to a regular online partners and service provider meeting. Facilitated by Dr. Chen Lee, the meeting provided a forum for all collaborating partners to communicate unfolding changes in their services in response to COVID-19. These meetings resumed in October 2021 and were discontinued in December 2021.

Emrpcc contributes to a range of networks/groups including:

- ♦ Be the Ripple PRG
- ♦ Boroondara Aged Service Providers Association
- CarerHelp Diversity National Reference Group (NRG)
- ♦ Eastern Heath Rainbow eQuality Working Group
- ♦ Eastern Sector Development Team forums
- The Healesville and District Service Provider network
- Yarra Ranges Council Indigenous Advisory Committee

In addition to attending meetings, presentations are requested on topics related to end of life and palliative care, advance care planning, the role of and support for carers, living well until we die and emerging social issues.

Education / Training

With circumstances remaining in a fluctuating state regarding pandemic management, educational activities remained online. Emrpcc sponsored a series of online workshops which were delivered by Jane Bourke from EPC. The program was well received by participants and their managers, with additional enquiries and enrolments being received for 'Introduction to Palliative Care for RNs and Personal Care Assistant' courses. The participant feedback from the previous year showed a positive impact for learners and was the basis for continuing to support the activities in 2022.

Emrpcc continued to work with Nora Fernandez at PCV on a collaboration that has led to the delivery of workshops for Personal Care Assistants and Case Managers. Recent workshops have been offered with a Chinese cultural focus. Two workshops were offered in November 2020 to the Southern Migrant Resource Centre and Chinese Community Social Services. Jane Bourke from EPC arranged for a Mandarin speaker to address the grief and loss aspect of the training session. This was greatly appreciated and feedback was very positive.

Building capacity in the Eastern Region

The success of this work led to an influx of requests from multi lingual communities. It also identified a gap in capacity. Our excellent Palliative Care Educators need support in delivering training with specific tailoring for cultural considerations. A request from the Vietnamese community further highlighted the resourcing needs to provide speakers from within the attending communities.

Feedback was sought from participants and a summary of the main points are below:

Participants stated they would:

- · have more confidence to initiate interventions from a sound knowledge base thanks to this training
- be able to recognise the symptoms and will be able to apply all the information given on the course and adapt to their EOL residents

What will the participants implement in their workplace from the session?

- Recognize and understand some of the normal symptoms when toward the end stage of life and how to manage the symptoms effectively.
- · Where to ask for help.
- · Have more confidence when talking to family and how to look after family after death.
- · Paying greater attention to assessment of non-verbal signs of pain.
- · Advocate for options in pain management.
- Teach all staff greater diligence with mouth care.
- · Comfort care and other sides of Palliative Care

To explore options for strengthening our capacity in this area, Emrpcc commenced working with colleagues from Southern and North West metro regions to identify how we can collaborate to meet education needs which include delivery in language of preference. A meeting of representatives across the regions and services was held in December. Emerging Issues highlighted areas which could be further strengthened with an integrated and systemic approach to community education.



Every participating organisation was structured and resourced differently. Given the geographic spread, there was an expected wide range of cultural differences in the local demographics. Some organisations have a community outreach or engagement focus, some do not. The use of translators is not the simple solution to meeting diverse cultural needs in palliative care education. To translate effectively, those offering this service require a sufficient understanding of palliative care and medical terminology.

The excellent resources available at PCV provide one level of support for community education, however there are gaps which remain. This will require a systematic review of resources available, which will include educators; translators; held visual materials; as well as input from the sector about the most effective way forward from both a community perspective and resource efficiency.

EPC and EMPHN collaborated to provide a series of GP education webinars between May and July. The four sessions focused on: Dying well at home; Managing Urgent Palliative Care Issues in the Community: Decision making at end of life; and Opioids in Palliative Care.

Building capacity in the Eastern Region

An invitation was extended to Boroondara Aged Services Provider Association (BASPA) to make an online presentation with Leanne Davey from Bolton Clarke and Barb Dobson from Emrpcc as guest presenters on the topic of End of Life. Questions from participants provided an excellent insight into the information and further education needs of those who provide important support to community in the chronic care to palliative care to end of life care continuum. This is an opportunity to bring together the leaders of aged care teams with the Councils of the Eastern region. This could augment regional aspirations to achieve stronger integration across the sectors that contribute to the fabric of palliative care.

PEPA Workshops

Throughout the COVID-19 lockdowns, PEPA continued to offer online experiences and training. Possibilities for face-to-face events re-emerged in May with a reduction of restrictions on social gatherings. Opportunities to attend PEPA events are advertised on the Emrpcc website.



PEPA manager, Tracey Mander has moved into a new role so that there will be a vacancy from mid-July. Emrpcc have appreciated Tracey's commitment to PEPA over several years and wishes her all the best.

Eastern Metropolitan Palliative Care Consortium Website

With the considerable recent uptake of electronic communication, the opportunities for online learning have expanded significantly. Many organisations now offer units specific to palliative care learning needs. To support those who are looking for additional training or further education, the Emrpcc website has added a new page to the Training Tab. This takes readers to some of the major online learning tools offered by the Centre for Palliative Care; PCC4U; End of Life Essentials; and Caresearch.



Diversity

Emrpcc member organisations have been working on and/or supporting initiatives which aim to heighten awareness of inclusive practice.

National CarerHelp Diversity Project

The CarerHelp Diversity project is a nationally funded project running from 2020-2023 and maintains the CarerHelp website and aims to support carers from all groups and sectors to be better prepared for caring for a person at the end of life.



Emrpcc contributes to the Carer Help Diversity National Reference Group for the CarerHelp Diversity project. The Reference Group is comprised of representatives from a range of groups across Australia that support people from diverse groups or those with advanced diseases and their carers. This group provides feedback during all stages involved in developing CarerHelp and assists with promoting the project and website resources.

The National Reference Group met several times throughout the year. A range of strategies are in place to promote awareness of the website and to advance the range of resources available. The membership list can be found **here**.

LGBTQI+ palliative care

Emrpcc members continued to be aware of and to (wherever possible) support the work of LGBTQI+ Health Australia. Members completed and distributed a survey focusing on LGBTQI+ palliative care to palliative care practitioners and/or LGBTQI+ people to inform future education and advocacy in this area. Following the survey period, invitations were extended for people to be interviewed. A presentation on the findings was included in the LGBTIQ+ Palliative Care **webinar** in May.

Working Groups



Eastern Health and EPC each run an internal working group to explore how to strengthen and promote inclusiveness for both staff and clients. This includes looking at communication styles, external messaging, internal information management systems, resources, signs, symbols and facilities.

Wear it purple day

The original plan to come together to support the launch of the film <u>Still Me</u> for Wear it Purple day was shifted online. Members shared an online morning tea featuring a colourful display of many shades of purple. The project was proudly supported & funded by Knox City Council, YACVic & the Victorian State Government.



The theme for 2021 focused on the important and necessary conversations we have in our daily life around sexual orientation and gender identity. A reminder that issues pertinent to Wear it Purple Day should not only be considered on that particular day... but every day. Our rainbow youth exist in the world every day, and therefore require our support for both their living and dying, each and every day.

Diversity

Deeper Connections

Deeper Connections is an ongoing project focusing on strengthening member relationships with Aboriginal and Torres Strait Islander peoples. This encompasses contributing to local networks, being involved in key Reconciliation and NAIDOC week events and working with Community on initiatives which encourage conversations about and access to resources related to the life-death-life cycle.

Reconciliation Week 2022



Emrpcc participated in the project steering group for Reconciliation Week 2022. Our Country, Our Future featured a Welcome to Country by Brooke Wandin, an interview with Paul Roos, didgeridoo storytelling performance by Ash Dargan and a refreshed, more inclusive version of Advance Australia Fair by Uncle Archie Roach. Similar to the previous year, the event attracted thousands of online views. Further information is available on the Yarra Ranges Council website.



EPC has been actively involved in initiatives which improve the visibility of their commitment to Reconciliation and culturally responsive Palliative Care for Indigenous Community members. EPC's email signatures reflect the Aboriginal name of the workplace location: Wurundjeri Country Naarm. Staff wear beautiful lanyards which reflect Aboriginal culture.

Caring at Home (CAH) project



The caring@home project and its extension for Aboriginal and Torres Strait Islander families (2017 - 2023) is funded by the Australian Government and led by the Brisbane South Palliative Care Collaborative.

It aims to improve the quality of palliative care service delivery for all Australians by developing resources that support carers and families to safely manage breakthrough symptoms using subcutaneous medicines for a person at home. CAH are developing tailored packages for Aboriginal and Torres Strait Islander peoples. Extended lockdowns in Victoria impacted on consultation opportunities with these communities. The draft Aboriginal and Torres Strait Islander package is undergoing a feedback process with the packages looking quite different to the original. Emrpcc has been working with the CAH project manager to facilitate consultation opportunities for Eastern region Community Controlled organisations.



Eastern Palliative Care

Eastern Palliative Care Association Incorporated 2021-2022

EPC's focus is on the Eastern region community and we work each year to support clients and their carers and also the General Practitioners in our community to provide the best available specialist palliative care.

2021-2022 has been another challenging year for people who are told they are nearing their end of life.

With limited services available face-to-face in the first 6 months of the year and the high incidence of COVID-19 in the community from January 2022, it has been difficult for people to get to the services they need.

Community palliative care has experienced unprecedented growth since COVID-19 first emerged. This growth continues today with the increase in referrals being around 9% in the past year. People are being referred later and sometimes dying more quickly.

This has provided interesting challenges for a community service. Health professional fatigue has been recognised across the health care workforce and EPC has experienced continuous high rates of sick leave. In saying this, our services have remained business as usual and we have deeply appreciated all our staff efforts to support people in the community who are dying.

Service collaboration has increased our understanding of the resources issues and assisted us to direct clients to where we know services are available.

In this year, EPC:

- ♦ Cared for and supported 1850 new clients, up from 1696 in 2020-2021
- ♦ Received 3151 referrals, a 9% increase
- → Had an increase of 136 deaths on the previous year

24 Hour Service

EPC has continued to have nurses on duty from 8:30am to 11pm Monday to Friday and 8:30am to 5pm Saturday and Sunday. EPC has an After-hours call service (a Triage Service) that supports clients and EPC nurses visit clients out of hours as needed.

The purpose of the Triage Nurses and On Call Nurses are to:

- ♦ Provide a responsive service to clients and carers 24 hours per day
- ♦ Answer questions that arise outside business hours from EPC clients
- Explain medications, particularly when medications or symptoms have changed
- Support clients and their carers as symptoms progress/change or there is general deterioration.
- ♦ Advise on unexpected medial issues that arise
- ♦ Support family members following the death of the client

The Triage Service is designed to prevent clients and carers from calling an ambulance or attending a hospital emergency department, unless this is required. The service also provides education and support to carers as needed.

In the past year:

- ♦ We received 3,631 calls, consistent with the previous year.
- ♦ 32% of calls came from the partner of the client, up by 4% in the last year
- ♦ 40% of calls came from a son or daughter of the client, down from 44% last year
- ♦ 51% of calls came between 5pm and 9pm and were responded to by the evening shift of nurses
- ♦ 513 clients needed a nurse to visit out of hours, up from 439 the previous year
- ♦ 34% of visits occurred because the client had died, consistent with the previous year.

Jeanette Moody CEO



St Vincent's Hospital Melbourne (SVHM) Palliative Care Services 2021-2022

After-Hours Telephone Triage Service (Nursing)

The After-Hours Telephone Triage (AHTT) Service which is based at the new Caritas Christi site in Kew has expanded over the past 12 months. This service provides after-hours support to the registered palliative care patients of Banksia Palliative Care, Melbourne City Mission, Peninsula Home Hospice, Eastern Palliative Care and all member agencies of the Barwon, Hume and Grampian palliative care Consortiums. The service has approximately 2,000 community patients at any given time with approximately 680 calls received per month.

The AHTT utilises an electronic medical record supplied by each of the respective services to ensure that any advice is informed by the care plan and current medication list. The service provides support between 4.30pm and 7am week nights and across 24 hours on weekends and public holidays.

Education Services at Centre for Palliative Care



The education team at the Centre for Palliative Care specialise in developing and providing quality, tailored education suitable for all healthcare professionals across Australia and increasingly, internationally. Our team of highly skilled educators partner with expert clinicians to deliver contemporary, evidence-based and bestpractice education that is immediately relevant to clinical practice.

We recognise that healthcare professionals have different levels of experience and involvement in their day-to-day care of people with palliative care needs. To ensure clinicians find a learning experience suitable for them, we offer our highly successful advanced practice Masterclasses and our interactive, accessible and affordable Clinical Skills Updates.

These education offerings are suitable for those working in the community, primary, acute or aged care sectors who are caring for people with a life limiting illness or indeed those who are dying whether it be every day, once a month or once a year.

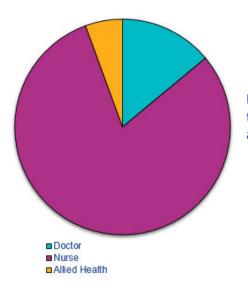
Our advanced practice Masterclasses include:

- Advanced Communication Skills
- ♦ Physical Assessment
- ♦ Caring for The Dying A Guide for Healthcare Professionals
- ♦ Clinical Ethics
- ♦ Pain Assessment









In the last twelve months, despite the challenges they have faced from COVID-19, 180 clinicians attended our education offerings.

Our Clinical Skills Update (CSU) sessions include:

- ♦ Referral to Palliative Care Services
- ♦ Symptom Overview
- ♦ Refractory Pain
- ♦ Refractory Dyspnoea
- ♦ Delirium in Palliative Care
- ♦ Gastrointestinal Symptoms
- ♦ Oncological Emergencies Part Two
- ♦ Cultural Care in Palliative Care
- ♦ Team Communications in Palliative Care

- ♦ Ethics in Palliative Care
- ♦ Pain Management
- ♦ Respiratory Distress
- ♦ Neurological Overview
- ♦ Existential Distress
- ♦ Oncological Emergencies Part One
- ♦ Complementary Therapies
- ♦ Post Death Care



The Centre also offers quarterly free online webinars.

These focus on a wide variety of pertinent, timely palliative care topics and include our annual lecture.

The education team look forward to expanding our Masterclass and CSU offerings in 2023.

The new Caritas Christi



Founded in 1938 by the Sisters of Charity, Caritas Christi has been redeveloped to become the newest inpatient palliative and supportive care service in Victoria. After many decades of providing wonderful hospice care, in early 2019 Caritas Christi began a rebuild to improve amenities and facilities for patients, staff and visitors ensuring we can continue to provide the excellent care that our patients need and so richly deserve. After 2½ years of construction, Caritas Christi Palliative Care Service is scheduled to return to Kew in September 2021 with a formal opening of the new facility held on 5 May 2022.

This brand new purpose-built facility has a capacity to provide care to 20 patients in single rooms. Sadly, with the current COVID-19 restrictions, capacity allow to full access to some of the spaces in the building, such as the Creative Arts Room; the Patient/Family Dining Room and the family lounges is expected to be. Despite this, the redevelopment will cement the future of Caritas Christi and improve amenities and facilities for patients, staff and visitors.



Michael Bramwell
Operations Manager, Palliative Care Services





Eastern Health 2021-2022

In 2020, the Eastern Health Supportive & Palliative Care service (SPCS) mapped out a Service Plan to support palliative care in the region. Using a public health approach and collaborating with internal and external stakeholders, the SPCS aims to support high-quality service delivery, education, and research in palliative care. This vision continued into 2021-2022 as we managed the many issues we faced as a service.

Overview

As with other healthcare services, COVID-19 continued to hamper our work. Volunteers and pet therapy remained absent, making psychosocial and existential care more problematic. We acknowledge the challenges we all faced in Victoria and welcomed the return to some normality. Once again, I want to praise the clinical and non-clinical members of our team, who continue to demonstrate great resilience, professionalism, and compassion in their work. They are the reason we have achieved the outcomes listed in this report.

We remain optimistic that our service will be able to use our Innovation Grant to implement PalCare. There is still a clear need for palliative care outpatient services in our region, especially for early palliative care involvement in cancer care. We continue to explore both formal outpatient clinics and telemedicine options within Eastern Health.

The service has been able to recruit to the three new Registrar positions - one joining the consult team at Maroondah Hospital, and the others working with Eastern Health ambulatory services to promote early palliative care. This service, the Palliative Ambulatory Care Consultancy Team (PACCT), replaces our service into aged care. Unfortunately, the Palliative Residential Aged Care Consultancy Service (PRACSS), spearheaded by our Nurse Practitioner Louise Thai had to cease and its funding was used to extend the SPCS.

The new Eastern Health nursing home has opened at the Wantirna site and will utilise community palliative care support for its residents. The Wantirna palliative care unit is working to optimally utilise its 30 beds, but COVID-19 and staff shortages have limited this progress. The SPCS has reviewed its model of care and we are anticipating National Accreditation in the next few weeks. We continue to screen carefully for COVID-19 and voluntary assisted dying (VAD) issues on admission.

Clinical Care

The focus of the 2021-2022 year continued the development of the service. Dr Lucy Kernick did a sterling job in covering Dr Katie Tham's maternity leave. Katie has now returned, after we welcomed her new daughter (Alana) to their family in September 2021. Keeping on the maternity front, Aliesha-Jane Fejgl (WPCU NUM) also had a daughter (Zosia) in July 2022. Marama Robinson has been doing an excellent job holding the WPCU fort in Aliesha's absence, and we look forward to Aliesha's return this year. After the year we have all had, it was great to receive another PCOC report with all the benchmarks met again!

Huge congratulations to the WPCU team are in order; led by Dr Yok-Yin Lee, Dr Grace Walpole, our NUMs and Lyndal Greenwood as the Senior Leadership Team on the WPCU.

Our consult service continued to support over 2,000 patients (and their families) this year. Once again, despite the many issues we faced, the consult team achieved all but one benchmark in the last PCOC report, and credit must be given to the whole team. Special thanks to Marama Robinson (Nursing Team Leader), Dr Eswaran Waran, Dr Heidi Gregory, Dr Lucy Kernick and Dr Kathryn Tham. We also congratulate Sam Trevaskis, who took on the Nursing Team Leader role in Marama's absence.

The PRACCS team achieved another PCOC report that met all the benchmarks, and we are hoping to publish this work soon. We are still planning to revive PRACCS, given the success of the service and the huge need for palliative care in aged care.

We said farewell to one of our CNCs, Donna McGregor, after 18 years with us. Donna has been an integral part of the consult service but has taken up an opportunity in Mount Isa to be part of their palliative care service. We wish her well in her new adventure and all agree that her experience and skills will hugely benefit the population there.

We continue to work collaboratively with Eastern Health services to advocate for the palliative care population in our region. This has involved working with ambulatory services, medical oncology, radiation oncology, renal services, geriatric services, and advance care planning. Furthermore, we have been working with external stakeholders in addition to our work with other members of the consortium.



Donna McGregor,
Palliative Care CNC

COVID-19

COVID-19 mainly affected our service via the visiting restrictions and isolation precautions. We tried to adopt a flexible approach to visiting restrictions, balancing protocols with compassion and will continue to do so. Based on our experiences, we were also able to contribute to a publication in the academic literature.

Education

Over the course of 2021-2022, we continued to promote the need for more education, especially via the Comprehensive Care Standard of the National Accreditation Standards.

Our team has been involved in the promotion of online educational resources in palliative care for Eastern Health staff, whilst also supporting specialist professional development; for example, PCOC education, CPCER education and in-house case-based training.

Our links with Monash and Deakin Universities allow us to contribute to medical student education, mainly at third and final year levels. Dr Grace Walpole has established an important communication skills program for Monash University students. We have been able to incorporate some of this expertise into the final year Monash University medical student teaching via Zoom this year.

We were delighted to contribute to the EMPHN Webinar in 2021. Our team is looking forward to contributing to more educational activities in the region during 2022-2023.

Research

As with other areas of medicine, the COVID-19 pandemic continued to disrupt our activities during 2021.

Notable highlights include the successful NHMRC Ideas Grant that will involve an international multi-site quality improvement research project into delirium in palliative care. Dr Grace Walpole is a CI, and along with Penny Casey and a funded research nurse, they will collaborate on this important piece of research. Grace and Dr Katie Tham have published on delirium, working with pharmacy, and Grace has published on the influence of hyperactive delirium on PCOC scores in patients who die in inpatient palliative care, collaborating with nursing researchers and Eastern Health junior medical staff.

Our research into improving psychosocial and existential assessments in palliative care continues, spearheaded by Rachel Eade (Research Nurse). This work has contributed to a publication regarding the initial findings of this multi-centre research. Our partnership with the Public Health & Palliative Care Unit at La Trobe University continues to evolve, and we hope to build upon the successful grant obtained to explore the understanding of health and social service use during the end-of-life. This study uses data-linkage and observational methodologies to establish an evidence-base.



Dr Grace Walpole and Dr Naomi Gleadle at ANZSPM Conference 2022

At the last ANZSPM conference, Ebony Remyn (Monash Final Year medical student) presented her work on deaths outside the terminal phase in a palliative care unit. Dr Naomi Gleadle also presented and won the Best Project Prize for her work looking at the association between antidepressant discontinuation and delirium with a hyperactive phase at the end of life.

More opportunities arose for presentations and articles regarding COVID-19 and voluntary assisted dying (VAD), and our experiences have certainly helped clinicians to reflect upon and better understand the complexities of current healthcare issues related to these topics. We have also published on the benefits of interprofessional communication skills training and Schwartz Rounds.

We are still involved with research via the My Neuro-Palliative Care Project and are working on projects relating to VAD, virtual reality, renal palliative care and advance care planning.

I would also like to take this opportunity to congratulate Sam Brean (Advance Care Planning) who received a high distinction for her Nursing Honours project. Sam undertook a systematic review of frameworks or guidelines available to facilitate ACP discussions within vulnerable and disadvantaged adult populations. This work will be published soon.

We hope 2022 will provide us all with more opportunities to improve our care through research at Eastern Health.

Professor Leeroy William

Clinical Director of Supportive & Palliative Care | Eastern Health

Adjunct Clinical Professor | Eastern Health Clinical School | Monash University

Adjunct Associate Professor | Public Health Palliative Care Unit | La Trobe University



Bolton Clark 2021-2022

Bolton Clarke works collaboratively with clients, families, GPs and specialist palliative care providers to promote dignity, comfort and choice for people requiring palliative care and approaching the end of life. Our emphasis is on promoting quality of life and supporting the holistic and personalised needs of our clients and their families. The past 12 months have continued to be challenging for all with the COVID-19 pandemic. We remain up to date with ever changing information, guidelines and keeping clients, families and staff safe across At Home Support, Residential Aged Care and Retirement Living.

Of note is the continued implementation and progression of recommendations from the completed EMPHN funded Enhanced Palliative Care at Home project, with the initial focus on Advance Care Planning quality improvement. The development and implementation of a Palliative and End-of-Life electronic care plan has been a significant enhancement to guiding staff in a palliative approach and promoting quality, person-centred care.

We have a commitment to continual development of the working relationship between Specialist and Generalist Palliative Care Providers, focusing on communication, clear definition of roles and responsibilities and providing opportunities for shared learning, education, and care coordination.

Janeen Cato
Manager Clinical Innovation



The North Eastern Melbourne Integrated Cancer Service 2021-2022

NEMICS is one of 9 cancer-service improvement networks in Victoria. Covering the northeastern region of Melbourne and working with health services to improve the outcomes and experiences for people with cancer. The integrated cancer services (ICS) work collaboratively with people affected by cancer and those delivering cancer care to develop, implement and evaluate improvement activities to address the Victorian Cancer Plan 2020-2024 priority action areas.

Linda Nolte has commenced as the NEMICS Manager and has a background in leading national and state health programs including Advance Care Planning Australia and the Australian Cancer Survivorship Centre.

The VICS have developed an <u>implementation plan</u> for their responsibilities under the <u>Victorian Cancer Plan 2020-24</u>. This plan has 9 focus areas for collaborative effort. The COVID-19 pandemic and its impact on cancer screening, detection, diagnosis, treatment, follow up care and research has been woven into this. Effort will be required to address the impacts of people avoiding and deferring care. Use of telehealth and home-based care during the period of isolation and physical distancing is likely to alter future models of cancer care across the continuum.

NEMICS is conducting its annual Service Improvement Grants programs. In 2022, the grants have been increased to \$15-100K and we are working to identify the successful applications.

Current service improvement grants underway at Eastern Health (EH):

- Development of a survivorship care plan for patients who have completed treatment
- ♦ Personalised care plans in early stage bowel cancer to improve the patient cancer journey and enhance GP communication
- Improving patient experience by reducing time to first chemo dose for planned haematology admissions

NEMICS has previously provided grants to implement new models of care for older people with cancer. The aim is to incorporate geriatric care with cancer care for people with lung, prostate and blood cancers. The EH project will facilitate geriatric screening of older men to assist in determining those who need further geriatric assessment. The Box Hill Hospital Uro-oncology Clinic sees approximately 2-3 men aged 70 years and over with newly diagnosed prostate cancer each week. Men with prostate cancer frequently present with comorbidities and often have complex decisions to make regarding treatment. The goal of geriatric assessment is to improve treatment outcomes and assist patients to maintain quality of life whilst receiving cancer treatment. This project has been delayed by COVID-19 and will commence early in 2022.

What we've done so far:

- ♦ A region-wide project steering group has been formed with representation from palliative care, medical oncology, consumers and a community palliative care provider. We have commenced literature searches, medical record audits and local process mapping with clinicians and other stakeholders.
- ♦ Local variations in referral practices to specialist palliative care at NEMICS health services have been found.
- ♦ A pilot has commenced to test a screening tool to systematically identify patients with palliative care needs, with plans for further roll out.
- Several challenges have been identified throughout the project, including data completeness, establishing quality indicators, capacity/intake criteria of palliative care providers; and the huge conceptual shift needed by clinicians, patients and carers around perceptions of palliative care.

What next?

- ♦ Further roll out of systematic needs-assessment for a palliative care referral (screening tool and process).
- ♦ A region-wide palliative care communication skills training program will be delivered for medical, nursing and allied health staff.
- ♦ Wider promotion of palliative care services to clinicians and consumers will take place via grand rounds and developing/improving written consumer information.

Advanced Care Planning

A statewide palliative care and advance care planning project was undertaken in 2021 to understand variation against optimal care. Some interesting results will be released in the coming months, with opportunities to improve palliative care and advance care planning services and interventions for people with cancer.

Access Project

Cancer Council Victoria are delivering the ACCESS project to improve and increase access to psychosocial and financial services for people with cancer. See https://www.cancervic.org.au/for-health-professionals/access-project.

Referrals can be made via https://www.cancervic.org.au/for-health-professionals/cancer-support-referral.

Linda Nolte NEMICS Manager



Eastern Melbourne Primary Health Network 2021-2022

Eastern Melbourne Primary Health Network (EMPHN) is a not for profit organisation funded by the Australian Government to improve the care and support people living in the east and north east of Melbourne receive from community health services.

EMPHN is one of 11 PHNs that were tasked with implementing activities as part of the Greater Choices for At Home Palliative Care Measure. This provided funding for coordinating palliative care through PHNs. Being cared for and dying at home is most people's preference. This initiative aimed to help make that possible.

The four year program commenced on 1 July 2017 and ended on 30 June 2021. EMPHN has received confirmation of a further Australian wide 4 year extension of the Greater Choices For at Home Palliative Care program and is now in the process of redesigning it.

In the first year of the second phase of the Greater Choice program, EMPHN's focus has been on the following:

- ♦ COVID-19 response in Aged Care
- ♦ Digital storytelling
- ♦ Advance Care Planning resources in General Practice
- Palliative Care education sessions
- ♦ Digital Health research in Aged Care
- ♦ Starting the conversations (Advance Care Planning education for Aged Care Workers)

Key highlights

COVID-19 response

The last 2 years have had an unprecedented effect on the provision of health care services in Australia. In Victoria, the impact of the COVID-19 pandemic was felt particularly in the Aged Care sector with considerable pressure being placed on RACFs.

As the pandemic continued, EMPHN played key a role in:

- → Supporting RACF outbreaks including facilitation of GP/RACF and outbreak response team
 conferences and the provision of emergency PPE supplies
- ♦ Support and facilitation of influenza vaccinations in Aged Care in 2021-2022.
- Facilitation and communication with RACFs in the COVID-19 Vaccination rollout.

Starting the Conversation

Initially planned to be face-to-face educational sessions, EMPHN adapted to the impact of the pandemic and developed an e-learning course co-designed with a participating RACF to educate Aged Care workers on key elements of Advance Care Planning and starting conversations with residents.

The course was taken by 40 aged care workers with a clear increase in confidence in starting conversations being shown.

Palliative Care Education sessions

EMPHN partnered with EPC to deliver palliative education webinars to GPs and other clinicians including Aged Care clinicians. Commencing in May, the sessions were supported by Specialist Palliative Clinicians across the region who were able to share their knowledge in key areas including recognising dying and the last year of life, advanced care planning and prescribing at the end of life.

Andrea Lockwood Program Manager - Aged and Palliative Care