# Annual Report 2023/2024



Eastern Metro Region Palliative Care Consortium 630 Mitcham Road, Mitcham 3132 phone: 0413 264214

email: consortiummanager@epc.asn.au

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# A Message from the Chair

Michael Bramwell
Acting EMRPCC Consortium Chair



On behalf of the members of the Eastern Metropolitan Region Palliative Care Consortium, I am pleased to present the 2023/2024 Annual Report. The Report highlights the collaboration between services for the enhancement of palliative care services to the community we are part of.

We have had a busy year with a number of activities promoting skill development in palliative care throughout the region. This focus has built the capacity of the health professionals in our region to deliver the best possible palliative care to support the patients/clients and their families. It has also provided our staff with an opportunity to reflect, refresh and re-engage after a difficult period through COVID. The EMRPCC funded a Self-compassion for Palliative Care Communities course; through our education bursaries program we funded 28 staff from our services to attend the 2023 Oceanic Palliative Care Conference and 12 staff received funding to attend the biennial Palliative Care Nurses Conference in 2024.

We have been actively involved in multiple networks in the region including Victorian Palliative Care Networks, the Eastern End of Life Care Network and a number of other local groups and networks. The Consortium and its member agencies who make up the Consortium have a high profile within the eastern metropolitan region of Melbourne and take every opportunity to promote the benefits of palliative care.

The EMRPCC has been well supported over the past year by the significant contribution of Sarah Kleinitz, our Consortium Manager. Sarah is a very organised and skilled Consortium Manager who brings her natural warmth, project management skills and encouragement to all of us involved in the Consortium. Sarah's commitment to the shared vision of the Consortium has allowed us to achieve what we have in a period of uncertainty.

A big thanks to Professor Leeroy William who chaired the Consortium from July 2023 to April 2024; special thanks also to Gaylene Coulton, CEO of Eastern Palliative Care; and Dr Yok-Yin Lee, Acting Clinical Director of Supportive and Palliative Care at Eastern Health who together form the EMRCC Executive and have provided a wealth of expertise and knowledge around the palliative care sector in eastern metropolitan Melbourne.

The EMRPCC Advisory Group have provided sage advice and contributed to the work of the Consortium over the past 12 months. Special thanks to Janeen Cato (Bolton Clarke); Mark Boughey (St Vincent's Health Melbourne); Samantha Trevaskis (Eastern Health); Andrea Lockwood, Meg Boyle, Anne Gravette & Sonya Imbesi (Eastern Melbourne Primary Health Network); Tania King, Christopher Cliffe, Maria Logan (Eastern Palliative Care); and Linda Nolte (North Eastern Melbourne Integrated Cancer Service).

I look forward to working with you over the next twelve months as the members of the Consortium strive to improve the development and delivery of palliative care services in this region.

# **From the Consortium Manager**

Sarah Kleinitz
EMRPCC Consortium Manager



This year the EMRPCC has concentrated on upskilling and building capacity in the workforce in the Eastern Metropolitan Region. We have encouraged specialist and non-specialist palliative care health workers to increase their palliative care knowledge and skills to further their careers and build capacity in their workplaces. This has included offering Conference Place Bursary programs and a Self Compassion for Palliative Care Communities online training course to individual staff working in palliative care settings within the region. The Consortium has also shared information about education courses, study days and webinars on the EMRPCC website.

The EMRPCC's key focus areas continue to be:

- Working together to implement the standards of care outlined in the Victorian Government's end-of-life and palliative care framework
- Meeting regularly to plan and review how services can meet our collective goal of providing the highest standard of palliative care to our community
- Engaging in research to keep learning and developing best practice
- Listening to community members and leaders to learn how our care and services can maintain excellent cultural safety, respect for cultural traditions and social diversity
- Providing information to community and health professionals on palliative care and how to access services.

EMRPCC is an active participant in the Victorian Palliative Care Network, and I have had the honour of chairing this network in 2023/2024. We also regularly meet and communicate with the other Regional Palliative Care Consortium Managers and our key stakeholders in other forums.

I would like to acknowledge and thank all of the members of the EMRPCC Executive for their professionalism, collegiality and supportive approach to the Consortium partners and me as the Consortium Manager. It has again been a privilege to work with Michael Bramwell, Adjunct Professor Gaylene Coulton and Professor Leeroy William. And with our newest member, Dr Yok-Yin Lee.

Thank you also to the EMRPCC Associate Member organisations and their representatives: Janeen Cato at Bolton Clarke; Andrea Lockwood, Meg Boyle, Anne Gravette and Sonya Imbesi at the Eastern Melbourne Primary Health Network; and Linda Nolte at the North East Melbourne Integrated Cancer Service. It is an ongoing pleasure to work with you all.

### **EMRPCC Governance**

EMRPCC is one of eight one of 8 Palliative Care Consortiums in Victoria who are each a collective of representatives from palliative care services within their respective health regions. These are then represented across the State and connected to peak bodies through the Victorian Palliative Care Network. The palliative care consortium are critical to the Victorian health system and play a key role in implementing palliative care policy and supporting effective palliative care service delivery, including quality end-of-life care in community and inpatient and RACF settings.

We connect the clinicians and practitioners providing the clinical services to the community and deliver access to information, opportunities and forums that respond to identified needs. We act as a conduit between the funded state and federal bodies that influence palliative care and regional stakeholders.

The three funded specialist palliative care services comprise the Consortium Executive and oversee the implementation of the palliative care policy direction of the Victorian Department of Health. As the auspice organisation, Eastern Palliative Care Association Incorporated is the funds holder for the Consortium and hosts the Consortium Manager.

EMRPCC members work together to implement, review and improve services so people in the Eastern Metropolitan Region of Melbourne who are living with a life-limiting condition, their families and their carers have access to a high-quality palliative care system that is innovative and responsive to their needs.

#### **EMRPCC Members**

**Executive/Voting Members:-**







**Associate Members:-**







Role	Responsibilities
Ensure the Consortium regional plan is implemented  Support the Consortium Chair and Consortium Manager to implement the policy in the region  Ensure financial accountability of the Consortium  Provide quarterly financial reports to the Consortium  Support the Consortium Chair to undertake staff recruitment and performance management	Make decisions outside of Consortium meetings as delegated by th Consortium     Monitor and report outcomes and achievements against the regional plan to the Consortium     Make decisions on matters that fall within the priorities stated in the regional plan     Report on all decisions for ratification by the Consortium     Make decisions on matters that fall within the priorities stated in the regional plan     Ensure performance management of the Consortium Manager     Promote the profile of the Consortium in the region
EMRPCC Advisory Group	
Role	Responsibilities
<ul> <li>Inform decision making, planning, implementation and care coordination related to policy and strategic planning within the region</li> <li>Build and maintain relationships with service providers in the region</li> </ul>	Provide advice to the Consortium on relevant issues in a timely manner     Champion the policy and palliative care/palliative approach in own agency

# **EMRPCC Governance**

St. Vincent's Health Melbourne	Bolton Clarke			
Michael Bramwell (Acting Chair April-June)     Dr Mark Boughey	Janeen Cato			
Eastern Health	Eastern Melbourne Primary Health Network			
<ul> <li>Professor Leeroy William (July-April / Chair July-April)</li> <li>Dr Yok-Yin Lee (from June 2024)</li> <li>Samantha Trevaskis</li> </ul>	<ul> <li>Andrea Lockwood - by invitation (ex-officio) (June-October)</li> <li>Meg Boyle - by invitation (ex-officio) (October-May)</li> <li>Anne Gravette - by invitation (ex-officio) (May-June)</li> <li>Sonya Imbesi - by invitation (ex-officio)</li> </ul>			
Eastern Palliative Care Assoc. Inc.	North Eastern Melbourne Integrated Cancer Service			
<ul> <li>Gaylene Coulton</li> <li>Tania King</li> <li>Christopher Cliffe (to August 2023)</li> <li>Maria Logan (from September 2023)</li> </ul>	Linda Nolte			
EMRPCC				
Consortium Manager (ex officio): Sarah Kleinitz				
KEY: Executive Committee & Advisory Group Executive Committee				
FOCUS AREAS:				
<ul> <li>Regional Service Coordination</li> <li>Referral and communication systems</li> <li>Workforce upskilling and capacity building</li> <li>Emerging issues for clients and carers</li> <li>Palliative Care and VAD interface</li> <li>Community engagement</li> <li>COVID-19 management and coordination</li> </ul>				
	<ul> <li>Member research updates/findings and implications for practice</li> <li>Stakeholder engagement and updates</li> <li>Member project initiatives</li> <li>Member strategic planning directions</li> <li>Conference and webinar attendance &amp; information sharing</li> <li>Workforce and staffing issues</li> </ul>			

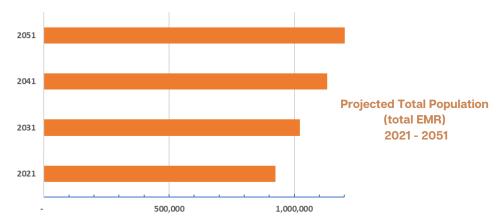
- The EMRPCC Executive met on 5 occasions in 2023/2024.
- The EMRPCC Advisory Group met on 6 occasions in 2023/2024.
- Meetings were held in a hybrid format.

# **Regional Profile**

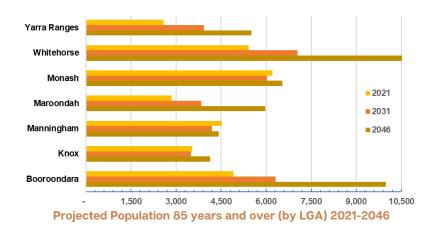


The Eastern Metropolitan Region covers just over 2,025 square kilometres, stretching from the inner suburbs to townships in the Yarra Valley and Dandenong Ranges. The region includes the Local Government Areas of Boroondara, Knox, Manningham, Maroondah, Monash, Whitehorse and Yarra Ranges. People in the outermost local government area experience particular issues with access to a range of services including for their health, due to distance and isolation. There are suburbs of high affluence and pockets of entrenched socioeconomic disadvantage.

At the 2021 Census, the Eastern Metropolitan Region's population was a little over 1.15 million people. And so, the region is home to just below 18% of the Victorian population and around 24% of Victorians who live in the capital city area of Greater Melbourne. The population in the Eastern Metropolitan Region is projected to increase by just over 1% by 2051.



By 2051 the Victorian population will have aged by proportion. The median age is projected to reach 40 by this stage with almost one fifth of the population aged 65 years or older. People aged 65 years and over will almost double to 2 million people and the number aged 85 years and over almost triples to 400,000 people.





Projected Population 85 years and over (total EMR) 2021-2046

#### **Traditional Owners**

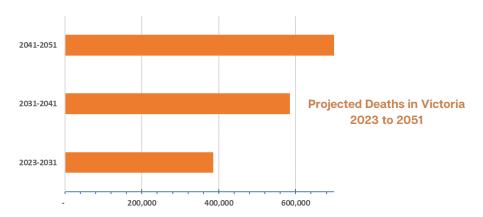


The Eastern Metropolitan Region is situated on the traditional lands of the Wurundjeri people of the Kulin Nation. The Eastern Metropolitan Region Palliative Care Consortium members provide services on the traditional lands and waterways of the Wurundjeri people and offer our respect to their Elders past, present and emerging. We acknowledge all Aboriginal and Torres Strait Islander Communities who live in the Eastern Region.



#### **Palliative Care Services**

It is predicted that the increasing demand and expectation for end-of-life care in the home will continue in this region which has fewer hospitals and outpatient palliative care services than others across Melbourne. For both specialist inpatient services and specialist community palliative care services, people are being referred later than was the case prior to the COVID-19 pandemic and are at times dying more quickly.



Eastern Palliative Care Association Incorporated (EPC) is Victoria's largest single provider of specialist community-based palliative care services and offers a full range of support programs. The volume and complexity of the work undertaken by EPC to keep clients in their own homes, safe and supported by high-quality care has multiplied with the number of people who wish to die at home.

The Eastern Metropolitan Region has five publicly funded hospitals and three health services. The Inner East has one hospital and three health services: Peter James Centre, Caritas Christi Hospice and St George's Health Service. The Outer East has four hospitals: Maroondah Hospital, Angliss Hospital, Wantirna Health and Healesville and District Hospital. There are designated palliative care beds across the 2 funded inpatient specialist palliative care health services: Wantirna Health Specialist Palliative Care Unit and Caritas Christi (SVHM). Doctors and nurses also provide specialist palliative care advice to patients being cared for elsewhere in these health services.

#### **GP Services**

The Eastern Metropolitan Region has around 310 General Practices. The distribution of these may not strongly correlate with population numbers or demand for primary health services including for palliative care.

# **Building Capacity in the Eastern Metropolitan Region**

#### **Self-Compassion for Palliative Care Communities online training**

EMRPCC funded a Self-Compassion for Palliative Care Communities online training course for staff from its member organisations in August to September 2023. Those who attended learnt practical skills for self-care including calming the mind and body and handling difficult emotions with greater ease; avoiding compassion fatigue; understanding and applying mindfulness and self-compassion concepts; and reconnecting with what gives purpose and peace in their lives.



Summary of feedback from participants

#### Funded Places to Conferences Programs

#### 28 places funded to attend the 2023 Oceanic Palliative Care Conference

EMRPCC funded places for 28 nurses and allied health staff from its member organisations to attend Palliative Care Australia's Oceanic Palliative Care Conference in Sydney in September 2023. They represented Eastern Palliative Care, Eastern Health, Eastern Melbourne PHN and St Vincent's Health Melbourne. This opportunity upskilled and built palliative care capacity in this workforce. None of these staff would have otherwise been offered a place to attend a multi-day palliative care conference.



Representation of EPC staff who attended

#### 12 places funded to attend the 2024 Palliative Care Nurses Australia Biennial Conference

EMRPCC funded places for 12 palliative care nurses from its member organisations to attend the 2024 Palliative Care Nurses Australia Biennial Conference which will be held in Melbourne in August 2024. None of these staff would have otherwise been offered a place to attend a multi-day palliative care conference.

#### **GP Registrars**

EMRPCC funded a 12-month GP Registrar position for a collaboration between Eastern Palliative Care and Eastern Health from February 2024. This registrar position has received provisional accreditation from the Royal Australasian College of Physicians (RACP) for 2 years.





GP Registrars: Dr Jack Wang

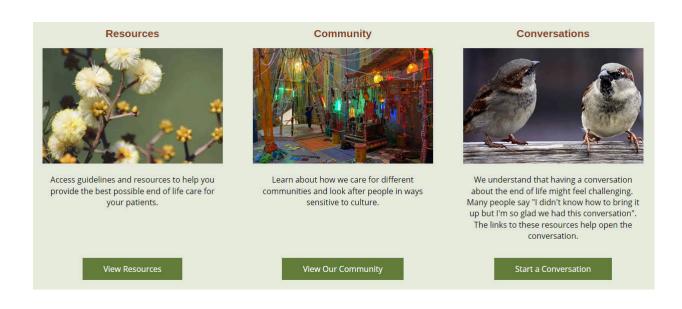
Dr Carolyn Wicks

# **Building Capacity in the Eastern Metropolitan Region**

#### **EMRPCC** Website

The EMRPPCC website provides a range of resources and information for health professionals, palliative care patients and their families and carers, as well as the general community. Regular updates include links to education and professional development opportunities and useful resources and newsletters. The EMRPCC website also provides a forum for feedback and enquiries.





# **Building Capacity in the Eastern Metropolitan Region**

#### **Networks**

#### **Victorian Palliative Care Network**

EMRPCC is an active member of the Victorian Palliative Care Consortium Managers Network and the Victorian Palliative Care Network. Both of which meet bi-monthly.

The Victorian Palliative Care Network has representation from a range of key stakeholders in the sector who meet bi-monthly to discuss emerging issues and enhance coordination and communication across the State. This Network also assists the Department of Health in implementing policies and programs that support people with a life-limiting illness and their carers, families, friends and communities. The EMRPCC Consortium Manager is the current Chair of the Victorian Palliative Care Network

#### **Eastern End of Life Care Network (EELCN)**

The Eastern End of Life Care Network provides an interactive and informative forum for people working and volunteering in end-of-life care and promotes and supports the development of compassionate community initiatives. Meetings represent:

- Bolton Clarke
- · Buddhist Council Victoria
- Community Houses Association of the Outer Eastern Suburbs (CHAOS)
- EACH
- Eastern Health
- Eastern Melbourne PHN (EMPHN)
- Eastern Palliative Care Association Incorporated (EPC)
- Homelnstead
- Inspiro
- · La Trobe University
- Monash Health
- Mullum Mullum Indigenous Gathering Place (MMiGP)
- Natural Grace
- Palliative Care Victoria (PCV)
- Social Health Australia
- Yarra Ranges Council

#### **Other Networks and Groups**

EMRPCC supports a range of other networks and groups including:

- Boroondara Aged Service Providers Association
- CarerHelp Diversity National Reference Group
- Eastern Sector Development Team forums
- Valley Service Provider Network
- Yarra Ranges Council Indigenous Advisory Committee

# **Diversity**

EMRPCC member organisations have been working on and supporting initiatives that aim to heighten awareness of inclusive practice.

EMRPCC has partnered with Palliative Care Victoria on the Dignified and Respectful Decision project (Disability and Aged Care Response) which aims to enhance palliative care delivery for people with disabilities and older individuals by improving care coordination and service integration.

#### LGBTQI+ palliative care

EMRPCC members continue to be aware of and support work to promote LGBTQI+ awareness and rights in palliative care, health care and beyond. EMRPCC connects with other organisations in the region to promote professional and educational opportunities that upskill and build capacity in the workforce in LGBTQI+ awareness and actions.

#### **Eastern Health**



The past year has been challenging, with many changes happening in Eastern Health and within the Supportive and Palliative Care Service (SPCS). Eastern Health also underwent a major organisational restructure earlier this year and the unit is now aligned under Cancer Services, alongside Medical Oncology, Haematology, Voluntary Assisted Dying (VAD) and Advance Care Planning (ACP). In the last 12 months, Eastern Health SPCS has continued to perform exceptionally, consistently meeting the Palliative Care Outcomes Collaborative (PCOC) benchmarks. This is a testament to the dedication and resilience of all members of the team.

#### **Clinical Care**

Last year we reported that the Palliative Residential Aged Care Consult Service (PRACCS) transitioned into the Palliative Ambulatory Care Consult Team (PACCT). Unfortunately, despite gains made in this space PACCT will end in August. On the bright side, we are introducing two new palliative care clinics to cater for the needs of residents in our catchment. These clinics will be integrated alongside oncology clinics at Box Hill Hospital on Tuesday afternoons and Maroondah Hospital on Wednesday mornings. These are our first palliative care clinics which is extremely exciting. They are planned to commence in mid-October and will continue the focus on ambulatory service provision.

As PACCT wraps up, we thank Dr Katie Tham for all her hard work and the positive impact that she has had on the Hospital Admissions Risk Program (HARP) and General Medicine team. We look forward to having Katie back in the consult team where she hopes to build on the relationships made with the Eastern Health ambulatory teams to integrate this work into the outpatient setting through a different model.

We have had a few bittersweet staff departures. Dr Eswaran (Es) Waran, who was Consult Lead at Box Hill Hospital for 5 years left our service at the end of last year to return to work in Darwin. His time here passed so quickly. He did an amazing job to bring the team closer and build close relationships with other units. Dr Lucy Kernick is now the Consult Lead at Box Hill Hospital. Lucy was previously the Consult Lead at Maroondah Hospital and has worked at all Eastern Health sites. Dr Andrew Ng and Dr Nisha Nadarajan who joined us as new consultants last year continue to provide specialist palliative care consultation advice for the Maroondah Hospital and the Angliss Hospital (and other sites) respectively. Samantha Trevaskis our consult nursing team leader is now on maternity leave. Sarah Lindsay-MacFadyen is covering as the team leader. After an extended period of leave, Professor Leeroy William resigned from Eastern Health and moved to Warrnambool to lead that palliative care service. This is a great loss to us but a fantastic gain for a growing regional service. No doubt, Leeroy will continue his incredible leadership and advocacy for palliative care wherever he goes. All the best to Es, Sam and Leeroy as they move into the next chapter of their lives.

The Wantirna Palliative Care Unit remains under the leadership of Aliesha-Jane Feigl (Nurse Unit Manager), Lyndal Greenwood (Senior Social Worker) and consultants Dr Yok-Yin Lee and Dr Grace Walpole.

The Eastern Health-EPC community registrar funding that was received from EMRPCC led to the employment of Dr Jack Wang as the registrar for the first half of this year and Dr Carolyn Wicks as the registrar for the second half year. We are excited that this registrar position has received provisional accreditation from the Royal Australasian College of Physicians (RACP) for 2 years. We are very grateful for all the effort that Jack has put into this role across both organisations. The feedback received from both Eastern Health and EPC has been overwhelmingly positive. The ongoing registrar position will be co-supervised by consultants who work at Eastern Health and EPC.

We are pleased to further develop the working relationship with EPC, as validated by Dr Katie Tham's positions across both organisations. The ongoing registrar position will be co-supervised by consultants who

#### **Eastern Health**



work at Eastern Health and EPC. We are pleased that we can further develop our working relationship with EPC, as validated by Dr Katie Tham's positions across both organisations.

Eastern Health expects a short-notice accreditation National Standards assessment this year. While the SPCS received a special mention at the last accreditation, we can't be complacent. The team remains resilient and focused on patient-centred care while adapting to change. Meeting the healthcare demands of our population is a challenge that all services face within the constraints of financial budget and other resources. It is important for us to work collaboratively and efficiently to maintain a high level of care.

#### **Education**

- Eastern Health has supported online and face-to-face education of hospital staff as part of Comprehensive Care Standard of the National Accreditation Standards. The SPCS has been involved in teaching and promotion of education resources for staff. The online iLearn End of Life Hub was recently launched and includes 3 end of life pathways: VAD, PCOC and ACP.
- Dr Grace Walpole continues as an esteemed communication skills educator and is Lead in Clinical Communication Skills at the Eastern Health Clinical School. Dr Katie Tham coordinated the palliative care education days for final year Monash students to bring together presenters from Eastern Health, Monash and Alfred hospitals to deliver 4 virtual education sessions covering all aspects of palliative care including an innovative communication skills session led by Dr Grace Walpole.
- The Eastern Health ACP initiatives include translating the brochure and poster into 3 languages and improving visibility in clinical areas and TV messaging screens. The ACP referral form has been updated to include psychosocial information, the Aboriginal and Torres Strait Islander identification question and helpful information for staff.

#### Research

- Dr Grace Walpole was the principal investigator for the MODEL-PC study: Driving quality in delirium care through a patient-centred monitoring system in palliative care. This is now complete and written up for publication. The next stage as part of the NHMRC Ideas Grant funding for the international multi-site project is underway.
- Sophie Hatzipashalis, Social Worker at Wantirna PCU was awarded the People's Choice Award for the best lightening presentation at the University of Melbourne Health Sciences Graduate Research Colloquialism for her oral presentation, 'Exploring experiences of suffering for non-English speaking patients living with advanced cancer'. She also published 'A Social Worker's Reflections on Responding to Traumatic Stress in Palliative Care' in the Journal of Social Work in End-of-Life & Palliative Care.
- Linda Ta, Acting Wantirna Site Pharmacy Manager for Bessie Wong, presented a poster, "Trialling a
  weight-based method for confirming the balance of oral liquid-controlled drugs" at the SHPA Medication
  Management Conference. The article was submitted to the Journal of Pharmacy Practice and Research for
  review and publication. Bessie has returned from her maternity leave and has several research projects
  underway.
- Danielle Bach, one of our senior palliative care clinical nurse consultants, submitted an article to the International Journal of Palliative Nursing which was accepted for publication in August 2024. The title of the article was "Creutzfeldt-Jakob Disease: A single institution case series."

Thank you to all of the Eastern Health Supportive and Palliative Care Service staff for their contributions and dedication!

#### **Eastern Palliative Care Association Incorporated**



In the 2023/2024 financial year Eastern Palliative Care experienced a 6% increase in referrals (3,370) and 9% increase in the average monthly number of clients in our service (709). There were 3,000 episodes of care opened (4% increase from previous year).

To address this increasing demand, EPC developed our Value Based Health Care (VBHC) Strategy and took the first steps in a new era of transforming into a value-based healthcare organisation. Value Based Health Care is a set of principles that are being used globally to address the challenges faced with increasing levels of chronic disease, health inequity, a growing and ageing population, rising costs and limited resources. It is about maximising value for clients; that is, achieving the best outcomes that matter to clients relative to the end-to-end cost (social, environmental and financial) of delivering those outcomes.

Our VBHC Strategy, A Case for Change is personalised to our unique operating environment in the community. While EPC has a solid foundation to build upon, the increasing demand for our services in the region requires us to develop innovative and efficient ways to maintain the high quality of care for which we are known.

Over this year we have made significant strides in transforming our operational and care models in allied health and palliative care within residential aged care settings. We have leveraged best available technology to enhance the effectiveness of our clinicians, enabling them to deliver care through various modes. We are also improving our data collection and analysis methods, gaining insights into the costs and value of our services and enhancing our leadership and workforce capabilities through ongoing education and training. Throughout these changes, our focus remains on prioritising our clients' needs, experiences and desired outcomes. Our VBHC Framework is centred around co-design with both clinicians and consumers, and we are fortunate to have valuable input from several consumers on our Consumer Advisory Subcommittee and VBHC Taskforce.



In 2023 we launched EPC Foundations, a 9-day training course delivered over two to three weeks. Foundations is designed to fast-track new palliative care nursing and allied health professionals from novice to advanced beginner ensuring a pathway to the delivery of safe and proficient community palliative care. The course is a comprehensive, multidisciplinary and streamlined education program with the broad aim of supporting reduction of risk, enhanced competence and retention of new staff. EPC welcomed external participants from across Australia over the year with 100% of participants retained over the course duration.

#### **Eastern Palliative Care Association Incorporated**



Our clinical leaders worked collaboratively with other specialist community palliative care providers to develop Novice to Advanced Practice Nursing and Allied Health Frameworks. These frameworks will inform workforce planning, training and development priorities as we find it more challenging to recruit experienced palliative care health professionals.

In collaboration with Eastern Health, EPC welcomed our first GP Registrar Dr Jack Wang, funded through EMRPCC. This initiative proved very successful, and Jack will join EPC in a permanent Palliative Care Physician role after he has completed his term.

In June, EPC launched its new Strategic Business Plan for 2024-2027, *Embracing Value-Based Health Care* which sets out our goals and future directions.

EPC have been fortunate to enter two significant partnerships during the year. Firstly, a research partnership with La Trobe University's School of Psychology & Public Health focusing on network centred care for our clients. Network-centred care is about building informal caring networks as central to the caregiving process, alongside formal care services such as those provided by EPC and general practice. Secondly, an international collaboration with seven health providers across the UK, Wales, France, Scotland, Switzerland and Australia to implement a person-centred value-based health care tool for client goal setting to inform shared decision-making for these clients' care.

Our continued success relies on the hard work and dedication of our 170 staff and 240 volunteers. We welcomed Maria Logan, General Manager for Nursing and Medical Services last September, and she has demonstrated exemplary values-based leadership and operational management. Our nurses, doctors, allied health professionals and volunteers frequently face challenging situations, yet their passion and care for our clients and their families is unwavering.

Gaylene Coulton
CEO

# St Vincent's Hospital Melbourne Palliative Care Services



St Vincent's Hospital Melbourne (SVHM) is committed to the delivery of best-practice palliative care that enables people to achieve the best quality of life. At SVHM, we recognise that contemporary palliative care is not only for people at the end of their life but for those living with chronic life-limiting diseases. Through clinical care, education and research, SVHM promotes the capacity of people to have early access to information about palliative care that supports them to live well and make informed choices.

#### **Clinical Services**

#### **Caritas Christi inpatient palliative care unit**

SVHM were fortunate to cease all COVID visitor restrictions over the past year. There have been times when visitors were asked to wear masks whilst on the ward as the prevalence of COVID within the wider community had increased. However, this is the first time since the new site has been opened that SVHM have had such freedom with family and carers on the ward.

Caritas Christi was operating with 16 beds for 2023/2024 with the average length of stay being around 13 days. Demand for inpatient care remains strong.

#### **Specialist palliative care clinics**

SVHM continues to provide specialist palliative care clinics across the week for ambulatory patients. These can be accessed by medical referral by private or public patients, known or new to SVHM. Supportive care clinics have been embedded in partnership with other specialty services, including renal, heart failure, respiratory and now scleroderma. This dual approach has led to more timely palliative care input for patients with both malignant and non-malignant life-limiting conditions.

#### **Palliative Care Community Connect & Palliative Care@Home**

This Team have continued their role past the pilot and now fall under the Hospital in the Home Program (HITH). Referrals for Community Connect and/or PalCare@Home can be directed through the HITH Program. The average length of stay was 11 days and clinicians estimated that hospital admissions were significantly reduced with patients choosing to receive their hospital care in their own home.

#### **Palliative Care Consultation Service**

The consultation service provides comprehensive specialist palliative care advice and support across all SVHM campuses, including St John's Ward in Port Phillip Prison. It also extends to St Vincent's Private Hospital Melbourne Fitzroy and East Melbourne. The service continues to be well utilised with 1,093 referrals to the service in the 2023/2024 financial year, a 10% increase from the year before.

#### **Regional Specialist Clinics & Call Line Support (Medical)**

St Vincent's Palliative Care medical team provides face-to-face, telehealth and telephone support to our colleagues and their patients cared for by Goulburn Valley Health and Albury Wodonga Health. The Team are also involved in strategic and service development guidance as requested.

#### **SVHM After-Hours Telephone Triage Service (Nursing)**

2023/2024 has been a busy year for the After-Hours Telephone Triage Team (Nursing) who have managed just over 8,300 pagers from registered palliative care clients of approximately 20 community palliative care

# St Vincent's Hospital Melbourne Palliative Care Services



agencies throughout Victoria. There are nearly 2,000 patients on any night supported by this team in collaboration with their community palliative care team.

These calls commenced from 1630 hours on a weekday afternoon until 0715 hours the next day and 24 hours a day on weekends and public holidays, 365 days per year. Most issues were triaged and resolved within 17 minutes of our nurses responding to the initial call. 10% of the calls resulted in the after-hours nurse being called to do a home visit associated with uncontrolled symptoms or a deterioration in the patient's condition, and a further 10% of calls resulted in ED or ambulance recommendation when symptoms are not able to be controlled or medical intervention required.

This Team supports the patients and carers at home and works with the community palliative care teams to reduce unnecessary admissions to their local ED/hospitals or call-outs whenever they can.

#### **Psychosocial Cancer Care**

The Psychosocial Cancer Care (PSCC) team provides primary and secondary consultation expertise in the identification, assessment and management of complex psychological and psychiatric issues encountered on the cancer and end-of-life journey.

Consultation and management are provided with behavioural, psychological, psychopharmacological and systemic interventions in mind. Alongside this, music therapy can be offered to patients and families so they can experience music-based methods in a therapeutic relationship whilst receiving inpatient care.

The PSCC team has continued to provide clinical expertise in these inpatient and outpatient contexts, furthered by an increase in clinical psychology capacities. Alongside specialist clinical care, the team has continued finalising the empirical analyses of a landmark trial utilising psilocybin-assisted psychotherapy.

#### **Clinical trials program**

Despite recruitment challenges post-COVID, SVHM continues to participate and collaborate nationally and internationally in palliative care clinical trials. Current trials open to recruitment include a medicinal cannabis trial for patients with advanced cancer and an analgesic trial for patients with advanced cancer and neuropathic pain. Both trials ask practical and clinically relevant questions that have the potential to inform and alter practice.

#### CarerHelp

CarerHelp is a National Palliative Care Project from the Commonwealth Department of Health and Aged Care. The CarerHelp website is auspiced from within the Centre for Palliative Care. There have been more than 24,000 users in the 12-month reporting period with a strong reach into the general Australian population of families caring for someone at the end of life and helping to prepare them for the caring role.

#### **Program of Experience in Palliative Approach (PEPA) - Victoria**

The PEPA/IPEPA program has been funded by the Commonwealth Department of Health and Aged Care (auspiced by QUT) for another three years (2023-2026), with St Vincent's holding the contract for Victoria. 32 workshops have been delivered around the state in the first year. 79 clinical placements have been arranged for a range of disciplines. Regional applicants have been encouraged to spend part of their placement with their local specialist service to enable networks to be created and to encourage collaboration.

# St Vincent's Hospital Melbourne Palliative Care Services



Four community engagement activities have been facilitated with Aboriginal and Torres Strait Islander communities in Victoria and we have an IPEPA project officer who will carry on building this engagement process. We have continued our partnership with Ambulance Victoria with paramedics undertaking workshops and placements and a number of regional paramedics have completed Mentor training.

SVHM have established a Host Site Mentor Community of Practice which meets bi-monthly and have just launched our Advocates Community of Practice for post-placement participants who have completed both their placement and their workplace activity. The Communities of Practice will enable ongoing engagement and collaboration among the target groups to facilitate ongoing learning and skills development. PEPA/IPEPA is extremely grateful for the contribution of our Host Sites and Mentors in enabling the program to grow and flourish, building the skills and experience of healthcare workers of all disciplines and designations to establish and promote a palliative approach to care in their own organisations.

#### **Research Services**

SVHM undertakes research that advances the aims of people affected by serious illness and their family carers. This research is conducted by the Centre for Palliative Care and Palliative Nexus Research Group.

#### **Centre for Palliative Care**

The Centre for Palliative Care conducted the following activities over the past 12 months:

- Recruitment site for several randomised controlled trials focused on symptom management and the alleviation of suffering\*\*
- Evaluation of St Vincent's palliative care at home models: Community Connect and Palliative Care at Home\*\*
- Analysis of bed flow trends for palliative patients in response to hospital continuous improvement initiatives to enhance palliative care capacity and streamline referral processes\*\*
- Analysis of after-hours palliative care triage call data for impact and utility\*\*
- Development and trial of a clinical assessment tool to systematically evaluate and report on the expected deaths in hospital\*\*
- Review of the cost and resources required to implement voluntary assisted dying in Australia\*
- Recognising patients at risk of deterioration and dying on general medicine wards\*
- Explored and described the state-wide needs of the first 1,000 calls to the newly established Victorian Palliative Care Advice Service\*
- Evaluating the role of emergency paramedics when responding to callouts from palliative patients in the community\*
- Analysis of national data describing the prevalence, severity and predictors of insomnia among colorectal cancer patients across healthcare settings\*
- Evaluating the impact of outpatient palliative care
- Exploring the association between nausea and quality of life for palliative, oncology and haematology patients, and identifying discrepancies between patient and clinician ratings
- Investigating the impact of early palliative care referral in the lung cancer disease trajectory from diagnosis to death across Victoria
- Investigating changes in demographic and disease characteristics of patients admitted to/ subsequently dying in hospital, before and after COVID
- Supervision of clinical research staff

# St Vincent's Hospital Melbourne Palliative Care Services



Dissemination and translation of research into practice: Centre staff have been involved in multiple conference presentations and publications in peer-reviewed journals.

- \* Projects completed this financial year
- \*\* Projects carried over from the last financial year or commenced this financial year and are either led by staff linked to the funding or conducted in partnership with others.

#### **Palliative Nexus**

Palliative Nexus is one of the research groups within the Palliative Care Service at St Vincent's Hospital and the University of Melbourne. Led by Professor Jennifer Philip, this is a multidisciplinary group with a focus on developing new models of care for those experiencing serious illness including cancer and non-malignant disease. This includes a focus on palliative care provision to people in underserved communities, such as those in prison or who are homeless.

The group has had a significant research output including over 140 publications in the last 5 years; supervision of 7 current PhD students along with undergraduate students; and, as chief investigator on research grants totalling more than \$17m. Most recently, Palliative Nexus has received funding from the Victorian Government to extend a model of early palliative care integration to the care of people with high-grade brain tumours (Care Plus).

#### **Palliative Care Research Network**

The Palliative Care Research Network conducted the following activities over the past 12 months:

- The network comprises approximately 500 multidisciplinary clinicians who through their membership (free to join) commit to help improve the evidence underpinning palliative care.
- Continuation of a state-wide consumer group that comprises a dedicated group of palliative care patients and bereaved family carers who give their time to inform research and service delivery and also serve as a palliative care advocacy group. The group meets monthly and has provided formal feedback and guidance on several new initiatives this year
- PhD student peer support program for current PhD candidates across Victoria (regardless of their university affiliation)
- PhD studentship to help create a much-needed critical mass of palliative care researchers
- Creation of a virtual journal club to enable clinicians to build their awareness of seminal research studies that may enhance palliative care
- Quarterly newsletter which provides updates on funding opportunities, new evidence and opportunities to collaborate
- Lectures/webinars x 3 focused on research methods and consumer engagement (approximately 90 participants).

#### **Education Services**

The Centre for Palliative Care Education and Training Services conducted the following activities over the past 12 months:

- Advanced Practice Master class Series: 77 participants (6 sessions)
- Clinical skills update sessions: 86 participants (13 sessions)
- Consumer-focused webinars: 37 participants (1 session)

# St Vincent's Hospital Melbourne Palliative Care Services



- Annual lecture on health economic impact of palliative care: 414 registrants
- Online introduction to palliative care course freely available to all healthcare professionals
- Multidisciplinary online palliative care modules (being developed in partnership with the Victorian Comprehensive Cancer Centre)
- Externally funded education consultancy work: The Program Experience in the Palliative Approach Program (PEPA) via purchased faculty for workshop delivery and Eastern Palliative Care Communication Skills facilitation
- Governance: Victorian Palliative Care Nurse Practitioner Collaborative
- Committee and advocacy representation: Hume Region Workforce Development; International Collaborative for Best Care of the Dying Person; Membership of Victorian Palliative Care Network (Consortia); Membership of Palliative Care Community of Practice (Safer Care Victoria)

Michael Bramwell
Operations Manager, Palliative Care Services

# **EMRPCC Associate Partner Reports 2023/2024**

#### **Bolton Clarke**



At Bolton Clarke, a generalist/palliative approach to care is provided for people with a life-limiting illness. Care encompasses the philosophy of palliative care whilst working collaboratively with the person, their family, general practitioners and allied health; and when symptoms are complex with specialist palliative care services. Bolton Clarke emphasises enhancing comfort and quality of life, ensuring culturally informed practice and supporting the holistic and personalised needs of our clients and their families.

Bolton Clarke is committed to ensuring a comprehensive and inclusive person-centred approach to care. We aim to improve quality of life by providing physical, psychosocial, and spiritual support and symptom management. During the delivery of care and services, we play an important role in the provision of a generalist palliative care approach. A generalist palliative approach to care includes:

- Supporting clients, their carers and family
- Recognising and responding to clinical deterioration
- Monitoring and escalating physical and psychosocial symptoms
- Working in partnership with specialist palliative care service providers

Bolton Clarke also works collaboratively with the client's General Practitioner, Palliative Care Specialist and Allied Health professionals when their physical and/or psychosocial symptoms are complex. We are committed to focusing on communication, a clear definition of roles and responsibilities and providing opportunities for shared learning, education and care coordination.

The development and implementation of a Bolton Clarke Palliative and End of life care Procedure, Advance Care Planning Guideline, Voluntary Assisted Dying Standard and Procedure and a Grief, Loss and Bereavement Guideline all contribute to supporting staff to provide a palliative care approach.

Janeen Cato Manager Clinical Innovation

### **EMRPCC Associate Partner Reports 2022/2023**

#### **Eastern Melbourne Primary Health Network**



Eastern Melbourne Primary Health Network (EMPHN) is a not-for-profit organisation funded by the Australian Government to increase the efficiency of medical services, reduce fragmentation of care and improve health outcomes for everyone, especially the most vulnerable in our community. EMPHN is one of 6 PHNs in Victoria and 31 PHNs nationally.

#### **Greater Choices for At Home Palliative Care**

EMPHN, like all PHNs nationally, will be funded until 2025 to deliver the Greater Choices for At Home Palliative Care Measure. This program aims to increase awareness of and facilitate access to safe, quality palliative and end-of-life care at home.

#### **Staffing Update**

Over the past year, there have been several changes within our team. Andrea Lockwood, Meg Boyle and Anne Gravette have spent time in the Program Manager role. Currently, Alisha Jackson is the Program Manager. Sonya Imbesi who joined EMPHN in late 2022 has contributed her extensive experience as a palliative care specialist to the team.

#### **Key Highlights for 2023/2024**

Activities over the past 12 months have focused on three key areas: education and training, sector engagement and information sharing and data collection and analysis.

#### **Education and Training**

Building on last year's success, EMPHN partnered with EPC to deliver three face-to-face workshop sessions in May and June 2024 with EMPHN providing RACGP accreditation. Topics included dying well at home, managing urgent palliative care needs, decision-making and opioids in palliative care. A secondary positive outcome from these sessions was the development of stronger relationships among the participating GPs. There was significant engagement with the PHN between education sessions, indicating a high level of enthusiasm and a positive view of the program. One participant shared on LinkedIn:

"I went to this series last year and absolutely loved it - really insightful facilitators and speakers and very helpful for GPs like me who do shared palliative care. Strongly recommend for any GPs in the Eastern Melbourne area interested in shared palliative care, improving palliative care referrals, or learning more about the delivery of palliative care in our practice."

#### **Sector Engagement and Information Sharing**

EMPHN collaborated with South Eastern Melbourne PHN and the Pharmaceutical Society of Australia (PSA) to engage pharmacies in stocking core medicines for end-of-life symptom management. This project expanded Core Medicine List (CML) coverage across metro Melbourne, including a RACGP-accredited webinar for GPs on anticipatory medicines and medication management.

- Developed with input from local palliative care providers, the Core Medicines List (CML) includes essential medicines for managing pain, nausea, and agitation.
- 85 pharmacies across the EMPHN region committed to stocking the CML, with engagement strategies that include direct emails, online hubs and phone outreach.
- Map of participating pharmacies was created to provide resources and educational materials with 12,764 views recorded by June 2024. Hosted webinars on anticipatory prescribing and medication management for end-of-life care received positive feedback.

# **EMRPCC** Associate Partner Reports 2022/2023

#### **Eastern Melbourne Primary Health Network**



- EMPHN partnered with all Victorian PHNs to organise a trade table at the Palliative Care Victoria Summit. This initiative highlighted the collective achievements and innovations in palliative care across Victoria and showcased the valuable contributions made by each PHN.
- EMPHN has partnered with Palliative Care Victoria on the DARD (Disability and Aged Care Response) Program. This program aims to enhance palliative care delivery for people with disabilities and older individuals by improving care coordination and service integration.

#### **Data Collection and Analysis**

EMPHN are finalising a data-sharing agreement with EPC to understand gaps in palliative care service access for at-risk populations. Due to staffing changes and increased workload from broader organisational changes, progress has been delayed. We are actively working with internal data teams to analyse the data and coordinate targeted education and awareness campaigns for underserved communities.

EMPHN remains committed to improving health outcomes for all, particularly the most vulnerable in our community. We will continue to focus on education, engagement and data collection to ensure that everyone has access to the care they need, particularly palliative and end-of-life care at home.

Alisha Jackson

Program Manager – Aged and Palliative Care



Eastern Metro Region Palliative Care Consortium 630 Mitcham Road, Mitcham 3132 phone: 0413 264214

email: consortiummanager@epc.asn.au