Palliative Care Consortium

www.gha.net.au/pc



GRPCC Newsletter

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Year in Review & Plans for 2008

Message from the Chair, Anne Curtin

Welcome to this second edition of our newsletter. The Gippsland Region Palliative Care Consortium represents both community and acute palliative care services in the region.

Throughout 2007, the Consortium has focused on developing effective communication and relationships with our member services and stakeholders including the Department of Human Services.

A highlight of the year was the launch of our communications resources package in Mav.

The publication Growing Through Loss: Stories of Palliative Care in Gippsland has been very well received with over 700 copies distributed throughout the region. All local libraries, the State Library of Victoria and the National Library in Canberra have also been sent copies. Filled with moving stories from carers, volunteers, nurses and family members the book captures their experiences and reflections of the palliative care journey. All the stories reinforce the need for equitable access to multi disciplinary palliative care teams.

We have also launched our website (www. gha.net.au/pc) as a gateway for information about palliative care services in Gippsland. The site includes a comprehensive service directory and a range of resources and useful links on topics relating to palliative care.

Education has been another key area for the Consortium in 2007. With the invaluable assistance of Sue Salau from Palliative Care Victoria the GRPCC published a Volunteer Trainers Manual which has been extensively utilised in the region. The appointment of Maggie Goss as the Volunteer Support Coordinator has enabled the Consortium to assist many services to run volunteer training courses. There are plans to run another three training programs at Omeo, Orbost and Yarram in 2008.

More recently the Consortium has appointed Kate Graham as a Project Officer to assist GPs to undertake post graduate training in palliative care. Part of this DHS funded project also includes the purchase of specialist palliative care physician hours for Gippsland.

As you can see 2007 has been a busy and productive year and this activity will continue in 2008 with the roll out of the specialist program, a greater emphasis on workforce training and a review of our Strategic Plan. Importantly we are keen to continue to build strong partnerships with GRICS, local GPs, allied health services and all those with a commitment to the provision of quality palliative care services in Gippsland.

GP Training Scholarships

The GRPCC is committed to financially assisting GPs in Gippsland access post-graduate palliative care education. GRPCC will consider applications for the Medical Practitioners Scholarship Fund which has been established to support the training of rural medical practitioners in palliative care.

In partnership with the The Department of Human Service (DHS) and Palliative Care Victoria, GRPCC has the resources to assist GPs to explore educational opportunities available and to assist with applications for a scholarship.

Interested GPs are encouraged to contact Kate Graham GRPCC Project Officer to find out more. Contact Kate via 0417 551 211 or kategraham@dcsi.net.au or visit www.gha.net.au/pc

Growing
Through Loss:
Stories of
Palliative Care in
Gippsland
A GRPCC
publication written
by local people



The members of the GRPCC are "committed to working with each other, Governments and the community so all Victorians with a progressive life threatening illness and their families and carers will have access to a high quality service system which fosters innovation and provides co-ordinated care and support that is responsive to their needs".

Our vision: "to establish a framework for promoting and delivering high quality palliating clients, carers, families and the community into the next decade and beyond for the

Volunteer Training Local Programs

Maggie Goss is Coordinator, Bereavement and Volunteer Service at Gippsland Lakes Community Health Service

What an exciting project! Since early June when I started supporting the coordinators of palliative care volunteers to implement the new Facilitator's Guide for Palliative Care Volunteers Training Manual, I have been

overwhelmed by their willingness to discuss and share information around their local volunteer programs. All coordinators agree that a standard process of recruiting, training and maintaining volunteers in palliative care is appropriate which allows them to still retain the local flavour of their individual region.

Several recent tours have given me a greater insight into each individual service and what they provide to palliative clients; as well as understanding how I can assist each service

For my first tour I visited Bass Coast Health Service in San Remo and met with Jo Kelly, Palliative Care Coordinator and Tony Cafini the Coordinator of Volunteers. Then onto a warm welcome by Lyn Yeamans, Coordinator of Volunteers at Gippsland Southern Health Service at Leongatha and Gail Mann, Coordinator of Volunteers from Bass Coast Regional Health in Wonthaggi. Even as I was preparing to leave we were still sharing information from the car window. I arrived at Yarram & District Health Service later in the afternoon, to another warm welcome from Karyn Craighead, their Manager of District Nursing and Palliative Care.

During two more tours I visited Kerrie Marriott, Coordinator of Palliative Care Volunteers at West Gippsland Health Care Group in Warragul. Kerrie generously shared information about her program and we spent valuable time formulating plans for the training program. While there I received a phone call from my husband Julian, to let me know that I needed to start my trip home as the flood waters were rising rapidly and I may get blocked from getting home. A few weeks later I visited Richard Froomes, Coordinator of Volunteers and Gayle Van Putten Grief, Loss & Bereavement Coordinator from Wellington Palliative Care in Sale. Their organising for the training program was well advanced and they shared with me an innovative way of introducing volunteers. More details when it is approved by their service.

The most recent tour was travelling with Anthony Hooper and Verona Beasley to Nowa Nowa, Orbost and Mallacoota. At Nowa Nowa Community Health we spoke to Bush Nurse Sue Ogilsvie about their palliative care patients and services. We then drove on to Orbost Regional Health, where we met Lesley Murray, Manager of HACC services and nursing coordinator Debbie Hall. We had lengthy discussion about formulating a volunteer program and further education for community nurses. Scones and jam and cream primed us for our long drive to Mallacoota where we discussed consortium pilot projects and offered our support. Next day we set off for Omeo and District Health where we met Io Caville and her team. A large number of staff attended a very exciting and informative meeting. There were lots of laughs and a few tears whilst we planned their volunteer program implementation and education for the health care team.

Overall, these tours were most beneficial and as a result some strong connections have been made; and a sense of trust as we begin a connected team approach to palliative care in Gippsland.

If you wish to contact your GRPCC counterparts, or your local palliative care service, please use the directory at www.gha.net. au/pc or telephone West Gippsland Healthcare Group (03) 5623 0614.

Central Gippsland Health Services Profile

Mary Hartwig, Manager Home Nursing, CHGS writes about The Certainty of Change One of the few things we can be sure of is change. Some of us find this confronting or frightening. Others welcome it with an embrace. Like

dying, it is an unknown journey which is travelled in a very individual way by each one of us.

Currently Wellington Palliative Care Service at CGHS is experiencing a period of change. This is nothing new to the service which in the last few years has experienced relocation, restructuring, new staff, and gone from being part of District Nursing to being a standalone service with designated staff. We are now commencing a process of maintaining the core Palliative Care staff which consists of a clinical co-ordinator position shared by two staff, two registered nurses who work part time, a Volunteer Co-ordinator and a Grief loss and Bereavement Co-ordinator both of

whom work part time, and orientating all District Nurses to Palliative Care.

The driving force behind this change is to increase the pool of people able to deliver quality palliative care and to reduce the nurses' on call and overtime hours. A process of data collection is assisting this aim. Along with this upskilling we have introduced a Primary Nursing model where each nurse takes responsibility for the case management of a number of clients. A new Nursing Care Plan has been introduced and a pilot has begun to trial client records in the home, encouraging all care providers to use the document as a means of updating and communicating care needs and provision.

One of the greatest challenges we face is to deliver a consistent, high quality of care around the clock. Like most rural Palliative Care providers all our staff work part time and we are keen to set a standard that is maintained by all without the risk of 'burn out'.

Our recent planning day examined our philosophy of care and created a model

that will give us clear direction by having standard ways of communicating within the team and to other health care providers, a standardisation of the documents needed in a client folder and a pathway of care that includes introduction of the Volunteer Co-ordinator and the Loss, Grief and Bereavement Co-ordinator.

Teams are made up of a group of people with different backgrounds, experience and skills much the same as the clients we care for who all come with their own stories which influence the way they live their dying process. We each have our skills and experience to bring to that care while maintaining a standard that delivers consistent high quality. To maintain that standard we must be able to live with and implement change.

Mary would be happy to share information about the structure and change management issues she has encountered. Contact Mary via www.gha.net.au/pc and follow the links to CGHS

Gippsland Region **Palliative Care** Consortium

Website Upgrade

Steve Kirkbright is contracted to redevelop our website as well as improve communications for resources and

As highlighted in Anne Curtin's report, GRPCC identified its website as a priority gateway

information. I was contracted to redevelop the website as well as act as a conduit to improve the Consortia's on-line and publications communications. Members and staff have been offering their ideas for creating an effective on-line resource which will assist the Consortium achieve its goals and I thank them for their valuable input.

GHA as host to the GRPCC website

As a member of Gippsland Health Alliance (GHA) the Consortium uses what GHA calls the 'GHAnet'. This is an electronic infrastructure network linking all health services in the Gippsland Region; including access to the Content Management System which controls on-line content. Practically speaking the GHAnet allows the Consortium to link to all health services in the region, share resources and transmit information to other websites on GHAnet.

Reciprocal links to GRPCC website

I encourage you to note that the GRPCC

website has links to each of the consortium member organisations' websites. We are currently asking all members to include on their websites, a link to the GRPCC website. I will contact each member organisation to discuss and assist them achieve this. A reciprocal link will increase the likelihood of finding the site (using search engines such as Google etc) and increase website useability.

Publications

Part of my communications role with the Consortia includes the publication of their print material. Most of them are also available in pdf format for download from the website. Publications via the link on the website home page include: Grief and Loss Bereavement Booklets, Past and current Newsletters, Palliative Care Volunteer Training Manual - Facilitators Guide (GRPCC Intranet only). Go to the GRPCC online Publications for more detail.

Website visibility

Through GHAnet the website visibility can be limited to 'public' and 'private' viewing. Setting a document event or page of information for 'Public' visibility means the world can view it whilst 'Private' restricts its visibility to Consortium members and/or GHA member organisations only via a login.

Viewing the 'private' material is only available when using a computer on the GHA network (a computer at your work site).

Future on-line developments

Some developments being considered as a result of member input include:

- discussion forums which facilitate working group communication.
- library resource sharing including library catalogue access.
- · agendas and minutes of meetings.

Updates, comments or questions

Steve Kirkbright is responsible for website additions and developments through the GRPCC Chair, Anne Curtin and GRPCC Project Manager, Anthony Hooper.

If you have any comments, questions or contributions please contact me on 041 202 6522 or by email steve@propagandaworkshop.com

GRPCC ON-LINE

GRPCC Publications

These publications are available through the website.

rief &

2. Helping Children Grieve

ereavement

mation Booklets

1. Ten Things to Know about Grief

Grief and Coping with Challenges
 Dealing with Grief: A Guide to understanding Your Reactions

Difficult Grief and Multiple Losses
 Suicide Grief

- 10 Grief and Loss Bereavement Booklets.
- Palliative Care Volunteer Training Manual
- Facilitators Guide (Intranet only)
- · Growing through Loss: Stories of Palliative Care in Gippsland.
- Past and current Newsletters.

Gippsland Services Directory

Find your local palliative care service information using the website directory for the Gippsland region.

gippsland region

Events Calendar

Find upcoming palliative care events on the website. These are shared across the GHAnet and the internet.

Visit GRPCC on-line at: www.gha.net.au/pc

Regional Roundup

Dr Anthony Hooper is Project Manager for **GRPCC**

As detailed in this newsletter, there are many exciting developments occurring across the region and it is pleasing to see that the

Consortium has been able to contribute to the continuing development of accessible palliative care services in Gippsland.

A particular highlight was the launch of the communications resources package in May 2007. Over 80 people attended the launch at the CGHS in Sale which featured the website, the Growing Through Loss publication, the volunteer training manual and a set of information brochures on dealing with loss and bereavement.

The roll out of volunteer training programs across the region has been a particular highlight. To date, six local services have been supported by Maggie Goss, Volunteer Support Coordinator for the GRPCC in all aspects of recruiting and training palliative care volunteers. By June 2008 most of the services who are members of the Consortium will have conducted a training course. Volunteers play a vital role in the provision of palliative care services and a number of services

do not currently have access to volunteers to support patients and their families.

The GRPCC enjoys a productive partnership with the Gippsland Regional Integrated Cancer Services (GRICS). This is evident in the substantial financial support provided by GRICS that enabled the Consortium to employ Kate Graham as Project Officer for our specialist services project. The GRPCC has applied for further funding to assist with a number of projects including the purchase of resources for palliative care volunteers and staff. The resources collection will be housed in a health services library and items will be available on loan to all member services.

Many local services took advantage of the subsidy offered by the Consortium to enable staff to attend the recent Palliative Care Conference in Melbourne - the 9th Australian Palliative Care Conference: Partners Across the Lifespan. A report on the conference by Toine Boville, WGHG Palliative Care Team Leader is included in this newsletter. Feedback indicates that the conference was an invaluable experience for all those who attended.

Partners across the Lifespan Conference Report

Toine Bovill is **Palliative Care** Team Leader at WGHG and reports on the 9th Australian Palliative Care Conference. Melbourne August 2007.

I recently attended a four day Palliative Care conference in Melbourne that featured many notable experts from Australia and overseas. Along with other representatives from services in Gippsland I was fortunate enough to

hear many informative speakers. Particular highlights included:

- Kevin Larkins from PCV opened the forum with a sensational rendition of "Welcome" with ukulele accompaniment.
- The synergy in the room and the buzz of networking.
- · The opportunity to extend and share knowledge and awareness.
- · The inspiration to do more and try and improve the service.

Representatives from rural and metropolitan centres Australia-wide and internationally discussed topics commonly encountered in the palliative care sector. Awakening and clarity, isolation, loss of potential, recognising the important, helplessness and acceptance being universal themes.

ABC Journalist Geraldine Doogue interviewed Professor Irvin Yalom, psychiatrist US psychiatrist, novelist and educator. Professor Yalom spoke of Pain or Grief: confrontation of our own death. When patients are asked what it is precisely about death that terrifies them the answer is often around their perceived view of the loss of their own potential and regret. Professor Yalom questioned the reason for so much unlived life? The quest it seems is for immortality. There were lengthy discussions around facing the facts of mortality and looking at opportunities to change the way we all live. In studies of patients with cancer 30-40% of their experience was learning about themselves and improving their lives, dropping trivia and addressing and identifying what is truly important. Other studies reveal people with a fatal illness often feel isolated and it is important being with someone. Generally people do not want to impose on others.

Similar themes emerged from the presentation made by Sister Veronica Brady University of WA. She spoke of suffering rather than death as the main problem; of dying in the sense of being uprooted from life and the coping mechanisms of Face it, Name it Own it.

Dr. Keri Thomas, a UK GP (keri.thomas@ btinternet.com) highlighted Palliative Care nurse champions in GP surgeries as a key strategy. She quoted 1% of population die per year which equates to approx 20 per GP. She advocated promoting end of life care, living well and not polarizing relationships.

New and/or interesting products showcased at the conference included: Movichol half: half strength and half volume; Various mouthcare products; Data programs like electronic histories; Aromatherapy diffuser; Spirituality package (University of Queensland); s.c. devices for cachectic patients; cardboard coffins.

More of my report will be included in a future issue of the Newsletter.

For more information about the speakers, topics, abstracts and session transcripts, go to www.iceaustralia.com/apcc2007/

The next International Palliative Care Conference "Together" will be held in Perth, 24-28th September 2009.

MND Forum Report by Toine Boville

About 65 people attended the Motor Neurone Association Forum in September at Warragul including nurses, allied health and social work professionals.

Mr Rodney Harris, CEO, MND Victoria welcomed attendees and invited guest speakers who included:

Dr Ravi Subramanya, Neurologist at LRH, who explained what Motor Neurone Disease is: and Dr. Brian McDonald. Director of Palliative Care Medicine. Peninsula Health & Peninsula Hospice Service, spoke passionately about Palliative Care and MND.

A statewide specialist services discussion was delivered by Sharon Sibenaler, Outreach Nurse, Victorian Respiratory Support Service, Dr.Susan Mathers, Neurologist, Calvary Health Care Bethlehem, Jenene Arnel, Manager Family Support Services, MND Victoria.

In the second part of the day a panel of health professionals presented a discussion about various local issues and initiatives with Mr Rodney Harris as mediator. Panel members included: Karen Thomas, physiotherapist, LRH, Jenny Waites, Regional Advisor, MND Victoria, Sarah Harrison, Case Manager, Brotherhood Community Care at the DHS Southern Metropolitan Region and myself - Toine Bovill, West Gippsland Healthcare Group Palliative Care Team Leader.

To round off a very informative interactive day was an overview of services, issues and innovations. Every person had the opportunity to share and discuss matters.

Thanks to Ms.Inez van Polanen, Mr.Rodney Harris, Ms Jenene Arnel, and David, Equipment Manager Extraordinaire, from MND Victoria, for organising this forum. Special thanks also to Ms Jenny Waites, who is our regional advisor and support person.

Information Kits for Health Professionals are available from MND Vic via info@mnd.asn.au or Phone 1800 806 632.

Kate Graham Profile

Kate Graham recently joined the GRPCC as a Project Officer focusing on the Medical Scholarship Fund for GP Education and the Rural Medical **Purchasing Fund**

Originally trained as a Registered Nurse Kate has worked in a range of fields including mental health, alcohol and drug, aged care and forensics. Kate has also worked as a Senior Project Officer on the Complex Clients Project with DHS, managed an Aged Care service in metropolitan Melbourne and before joining GRPCC managed a metropolitan Aged Care Assessment Service.

Kate has completed a Graduate Certificate of Human Resource Management through Charles Sturt University and is working towards completing her Master of HRM. She has many years of experience working in Gippsland and metropolitan areas and has particular skills in areas such as service reviews, quality improvement and accreditation, staff development, project management and policy develop-

Since joining the GRPCC, Kate has:

- Developed an information brochure and flowchart for GPs regarding the availability of post-graduate education in palliative care
- Developed a draft criteria for approving Scholarship funding
- · Commenced discussions and meetings with individual GPs and Divisions of GPs to encourage and assist participation in the Medical Scholarship Fund
- Initiated discussions with tertiary providers regarding flexibility in post-graduate education including offering education within the
- Followed up with metropolitan services regarding the Integrated Clinical and Education model Expression of Interest

If you would like to find out more about the project, Kate would welcome your contact via 0417 551 211 or kategraham@dcsi.net.au