



Government of Western Australia
WA Country Health Service

WACHS-GOLDFIELDS



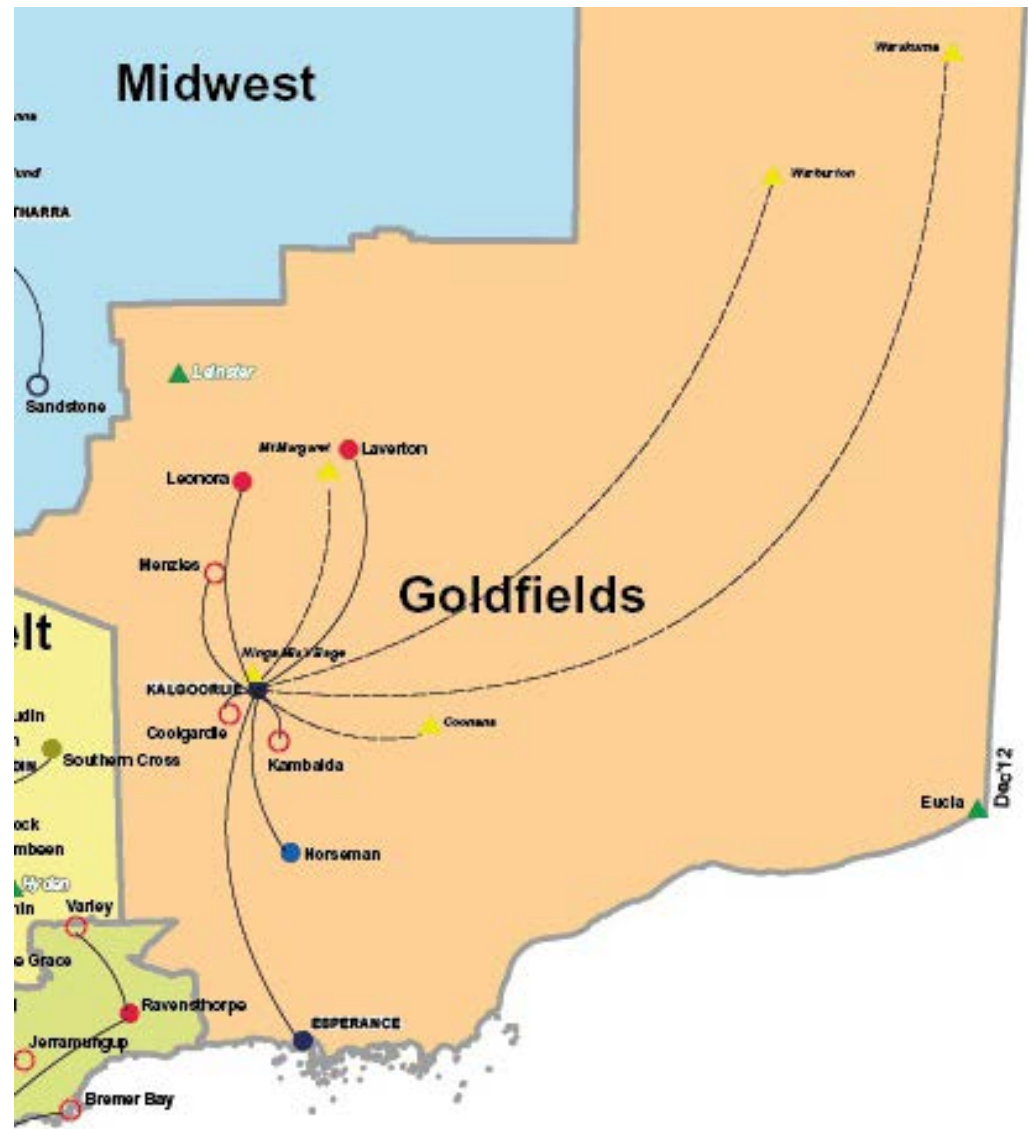
PALLIATIVE CARE

2015

The Goldfields

The Goldfields region covers almost one third of Western Australia's total land mass, an area of 770, 488 square kilometres and is the largest health region in Western Australia.

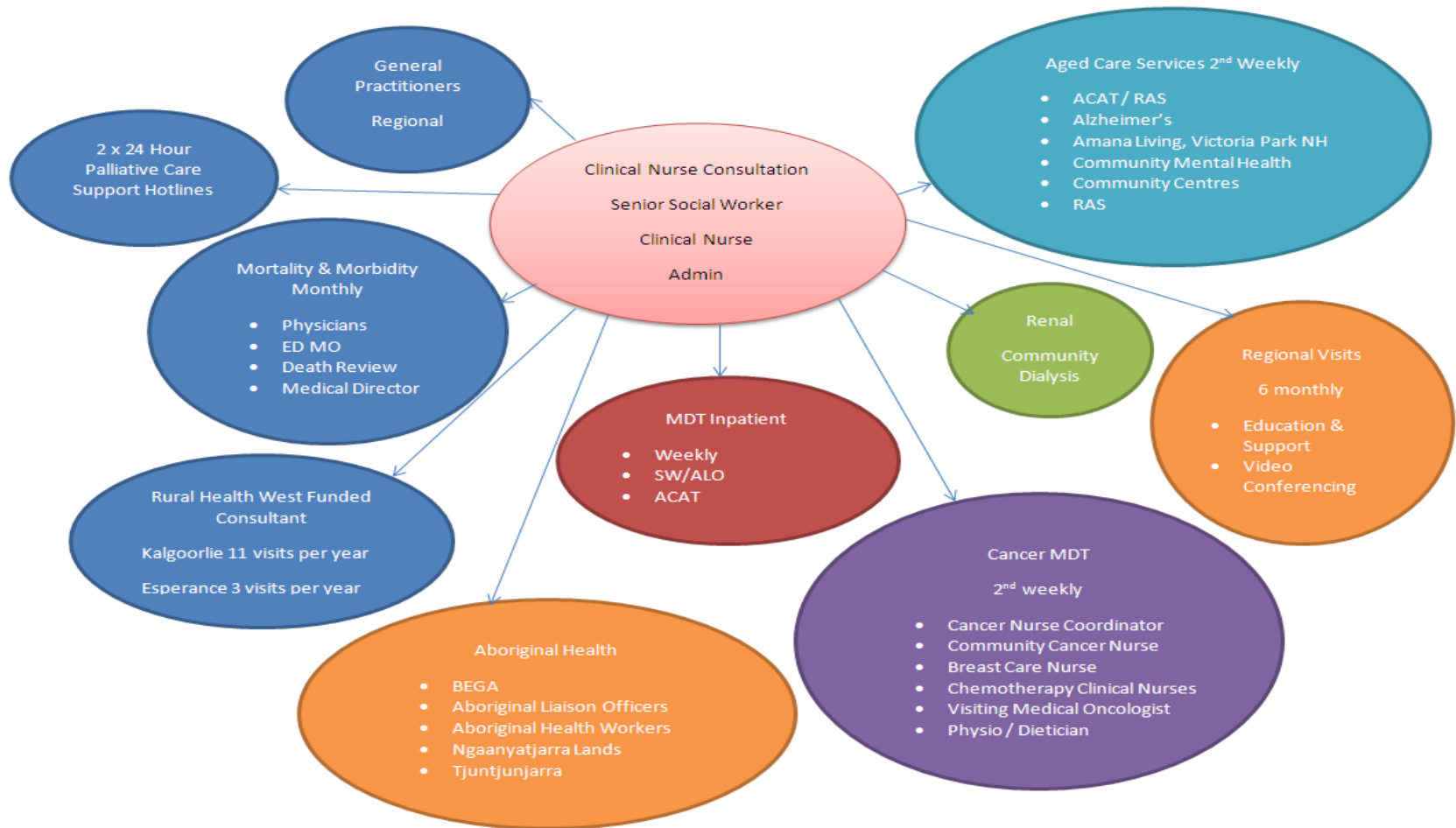
The region includes the Shires of Coolgardie, Esperance, Dundas, Laverton, Leonora, Menzies and Ngaanyatjarra, and the City of Kalgoorlie/Boulder.



Definition of Palliative Care?

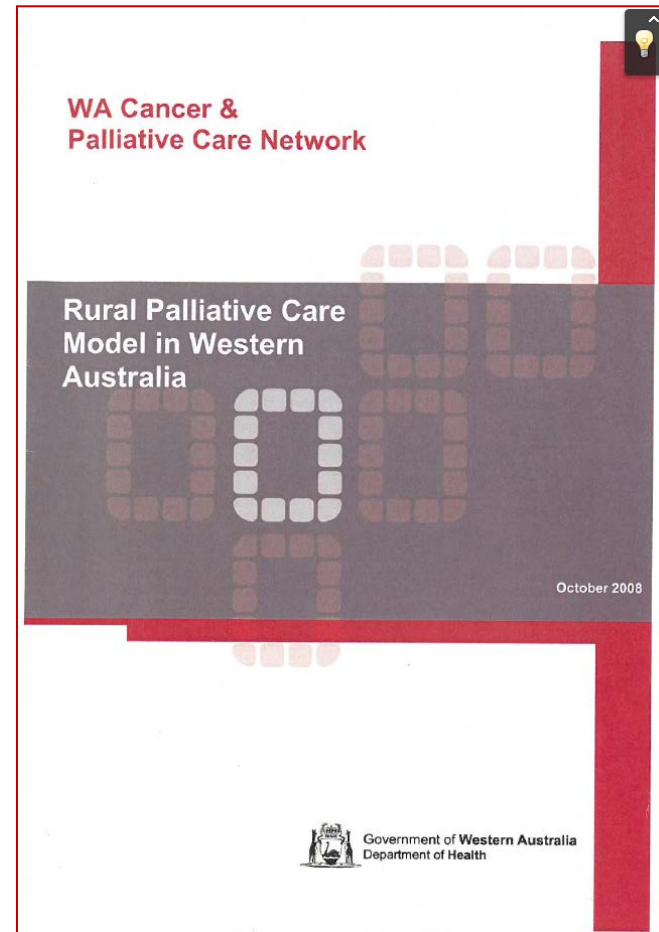
- *An approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. (WHO; 1998):*

Goldfields Model Of Care Shared Care



WA Cancer & Palliative Care Network

- ❑ Regional Governance
- ❑ Regional coordinator
- ❑ Local care coordination
- ❑ PRN approach(once off needs)
- ❑ Access to medical care
- ❑ Regional MDT specialist interest group
- ❑ State wide rural palliative care specialist group
- ❑ Formal links with metropolitan specialist group
- ❑ Indigenous palliative care partnerships



Referral Process



WA Country Health Services
Regional Palliative Care Services

Guidelines for Referral



Working together for a healthier country WA



Government of Western Australia
WA Country Health Service

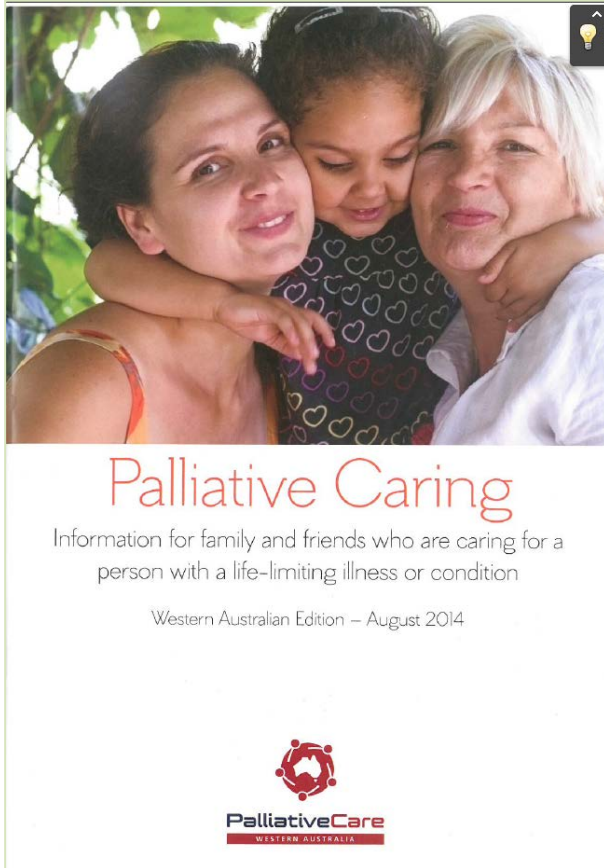
Regional Palliative Care Service Referral Form

Date Referral Sent:		Date Referral Acknowledged: <small>Office Use Only</small>	
Client Details		<input type="checkbox"/> Urgent <input type="checkbox"/> Non Urgent	
Surname:		Given Names:	
Date of Birth: / /	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Lives Alone: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:		Post Code:	
Home Phone:	Work:	Mobile:	Religion:
Patient location: eg. Hospital, Home, Town, Nursing Home			
<input type="checkbox"/> Indigenous Status: <input type="checkbox"/> AB <input type="checkbox"/> TSI <input type="checkbox"/> CAB & <input type="checkbox"/> TSI <input type="checkbox"/> <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> DVA <input type="checkbox"/> No MEDICARE			
Preferred Language:		Interpreter:	
Support Person / Next Of Kin Details			
Name:		Relationship to Patient:	
Address:		State:	Post Code:
Home Phone:	Work:	Mobile:	
Referrer Details			
Name of Referrer:		Contact Number:	
Position/Organisation:		Ward/Unit:	Discharge Date:
General Practitioner:		Contact Number:	
Is the GP/Physician aware of the referral? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Diagnosis Details <small>(Attach Relevant Medical Information)</small>			
Date of Diagnosis:		Primary Diagnosis:	
Reason for Referral:		Family/Carer Support	
<input type="checkbox"/> Palliative Care Assessment		<input type="checkbox"/> Symptom Management	
<input type="checkbox"/> Symptom Management		<input type="checkbox"/> Care Coordination	
<input type="checkbox"/> Care Coordination		<input type="checkbox"/> Complex Psychosocial Issues	
<input type="checkbox"/> Complex Psychosocial Issues		<input type="checkbox"/> Terminal Care	
		<input type="checkbox"/> Other _____	
Consent			
Is patient aware of diagnosis? <input type="checkbox"/> Yes <input type="checkbox"/> No		Has the patient consented to referral? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the carer/family aware of the referral? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Does the patient have an Advance Health Directive? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know			
Is there an Enduring Power of Guardianship? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know			
Please Forward Referral To Regional Palliative Care Service			
	Email	Fax Number	Telephone Number
Great Southern	gs.palliativecare@health.wa.gov.au	9892 2590	9892 2380
South West	wachs-swpalliativecare@health.wa.gov.au	9722 1079	9722 1487
Wheatbelt	wheatbelt.palliativecare@health.wa.gov.au	9690 1801	9690 1780
Goldfields	goldfields.palliativecare@health.wa.gov.au	9080 5295	9080 5290
Midwest	Palliativecare.midwest@health.wa.gov.au	9956 2244	9956 2431
Pilbara	WACHS-Pilbara.PalliativeCare@health.wa.gov.au	9143 2374	9143 2453
Kimberley	KHR.PalliativeCare@health.wa.gov.au	9194 2282	9194 2325

Services - What's Our Role?

- Consultancy
- Monthly visiting specialist clinics
- Psychosocial support and family support
- Education and support to regional staff
- Liaising with GP for care in patients best interest
- Liaising with Metro centre for patient care
- Culturally appropriate Palliative Care
- Preparing family and patients for end of life
- Bereavement and follow up care

A Patients Journey.....



Hi My name is TED.

I am 42 years old and I am living in a donga 30 km from Coolgardie - in the Bush.

I got sick 2 months ago the doctor said “it’s the flu”.

I lost 15 kg in the last 3 months, and one morning I started coughing blood.

At the emergency department the doctor said “you have lung cancer and it has spread throughout your body. We are sending you to Perth for further treatment and investigations”.

I spent 3 weeks in Perth and now they are sending me home because there is nothing they can do.

They said the Palliative care team, in Kalgoorlie, will look after me.

“What does palliative even mean?” Does it mean I’m going to die?...

The palliative team came see me regularly, coordinated my care and they sat down and explained palliative care to me and then they organised for me to visit my house to finalise things.

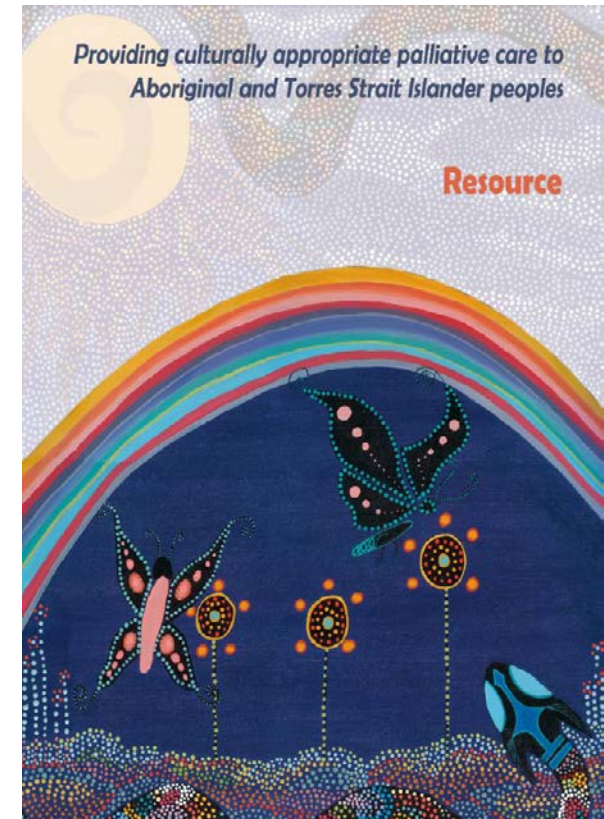
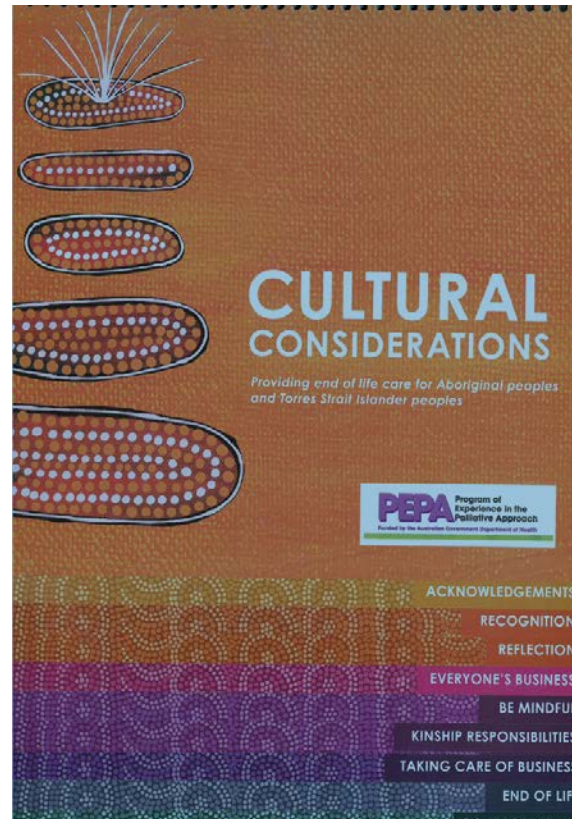
I chose the clothes I wanted to be buried in and I got the 2 pennies for the ferrymen when I die. They will make sure the pennies are placed on my eyes, as I know nobody will claim my body.

They listened to me and reassured me about my wishes for when I die. It made me feel that I still have rights even though I am dying.

TED died shortly after, peacefully, in the palliative care wing of the hospital and was eventually interred in a paupers funeral.

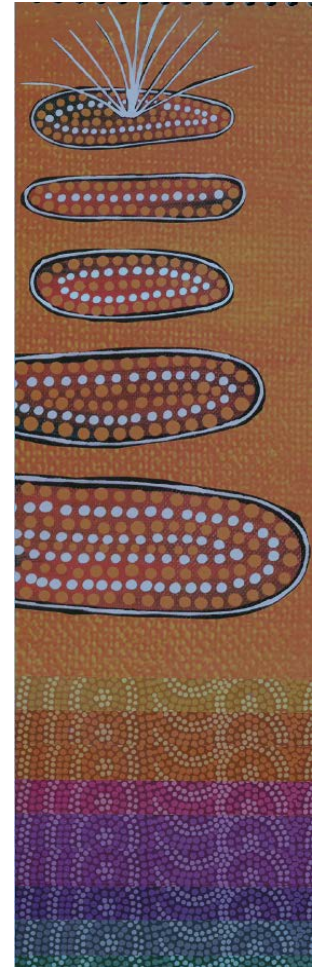
Providing Culturally Appropriate Palliative Care

- BEGA
- The NG-Land
- Tjuntjunjarra
- Menzies
- Mount Margaret
- ALO at KRH



POP ARTHUR- Palliative Care comic for Aboriginal people

- Want to stop treatment, he wanted to die at home. “In Country” under the Boab tree with his mob around him. **Not in the hospital all alone.**
- Palliative Care: Respect his wishes, Pre-emptive medicine to manage his symptoms. Communicate (have a yarn) early like “treatment is failing” what are his wishes?
- Get him **HOME** or get his Mob to the hospital..... (Aboriginal Liaison involved)



Advance Care Planning

Government of Western Australia
Department of Health
WA Cancer and Palliative Care Network

Advance Care Planning

A step-by-step guide for health care professionals assisting patients with chronic conditions to plan for care towards end of life



Advance Health Directive

Notes:

- To make an advance health directive, you must be 18 years of age or older and have full legal capacity.¹
- A person who makes an advance health directive is called "the maker".

This advance health directive is made under the *Guardianship and Administration Act 1990* Part 9B on

the _____ day of _____ 20____

by _____
(maker's full name)

of _____
(maker's residential address)

born on _____
(maker's date of birth)

This advance health directive contains treatment decisions in respect of my future treatment.

A treatment decision in this advance health directive operates in respect of the treatment to which it applies at any time I am unable to make reasonable judgments in respect of that treatment.

Notes about treatment decisions:

- Treatment is any medical, surgical or dental treatment or other health care (including palliative care and life sustaining measures such as assisted ventilation and cardiopulmonary resuscitation).²
- A treatment decision is a decision to consent or refuse consent to the commencement or continuation of any treatment.³
- A treatment decision operates only in the circumstances that you specify.⁴
- Treatment to which you consent in this advance health directive can be provided to you.
- Treatment to which you refuse consent in this advance health directive cannot be provided to you.
- Your enduring guardian or guardian or another person cannot consent or refuse consent on your behalf to any treatment to which this advance health directive applies.⁵

¹ Guardianship and Administration Act 1990 s. 110P
² Guardianship and Administration Act 1990 s. 3(1), definitions of "life sustaining measure", "palliative care" and "treatment"
³ Guardianship and Administration Act 1990 s. 3(1), definition of "treatment decision"
⁴ Guardianship and Administration Act 1990 s. 110S(2)
⁵ Guardianship and Administration Act 1990 s. 110GJ

Kalgoorlie Regional Hospital 3 Palliative Care Rooms

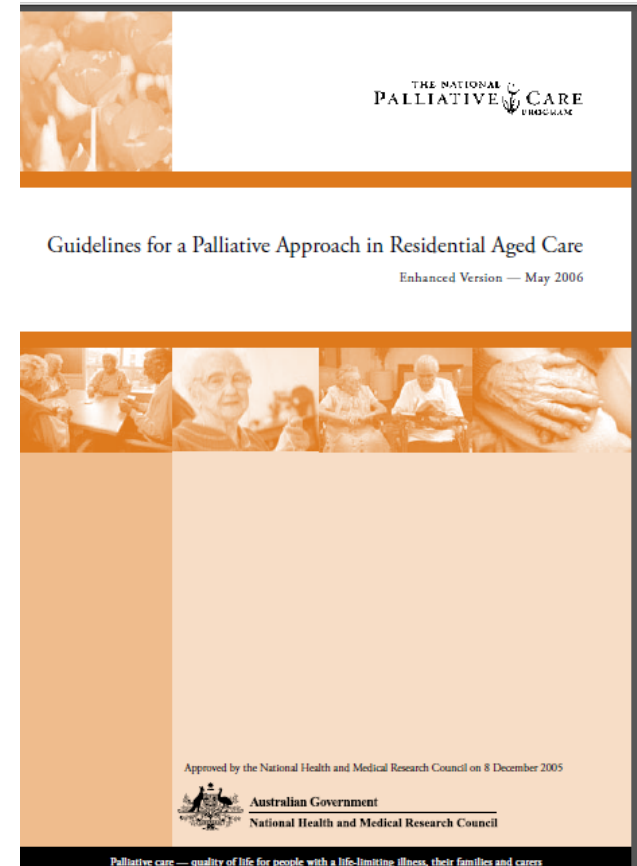


Kalgoorlie Regional Hospital has a 3 bed Palliative Care wing on the Medical Ward. Each room has an ensuite, kitchen facilities for visiting family members, courtyard access and a TV. This helps families to spend time with their loved ones in comfort. There is also a family/lounge room with lots of comfortable seating and a TV and access to a private courtyard.



Guidelines for Palliative Approach in Residential Aged Care

- RAS, HACC, ACAT, FINE, OPI
- Eastern Goldfields Community Centre
- Alzheimer's Australia WA
- Commonwealth Respite & Carelink
- Silver Chain
- Victoria Park NH & Amana NH
- Community Mental Health
- Rehabilitation Coordinator KRH
- Discharged Planner KRH



Rural Health West Program



- ◆ Provide funding for a Palliative Care specialist to visit the region.
- ◆ Patient review, GP and Staff education
- ◆ 2 sessions of 4 hours, per visit
- ◆ 11 visits to Kalgoorlie per year
- ◆ 3 visits to Esperance per year

24 Hour Palliative Care Support

- The national Palliative Care [Phone Advisory Service](#) is available to assist GPs and health professionals working with older Australians. Call **1300 668 908** for the cost of a local call to receive specialist advice on all your patient or client palliative care needs. The phone service can also help with advance care planning information from 8am until 8pm. Call **1300 668 908** today!
- WA Combined Palliative Care Outreach Service (Medical):
- 24 hour support: Call: **1300 558 655**
- Silver Chain Rural Palliative Nursing Helpline: **1800 420 102**

Resources for Clinical Staff:

