



loddon mallee
regional palliative care consortium

Annual Report

2022



Acknowledgement of Country

The Loddon Mallee Region Palliative Care Consortium acknowledges the first peoples of the Millewa-Malee, Latji Latji, Ngintait, Nyeri Nyeri, Dadi Dadi, Jarijari, Wadiwadi, Wemba, Wergaia, Baraba and Dja Dja Wurrung - as the traditional owners and custodians of the country that the Loddon Mallee Health Region is located on, and pay our respects to their Elders past and present.

We proudly acknowledge the First Peoples of Victoria and their ongoing strength in practising the world's oldest living culture.

LMRPCC Contact Details

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A message from the Consortium Chair.

Welcome to the Loddon Mallee Regional Palliative Care Consortium Annual Report 2022.

Supporting a person and their families through end of life care is a beautiful area of medicine and I would like to take a moment to say 'thank you' to all of the healthcare employees that choose to improve both comfort and quality of life during palliation in their career. Without the expert Palliative Care workforce, compassionate care provision within the home coupled with supported transitions into health services where needed, would be compromised. As a Consortium, the priority for the year has been 'caring for the workforce' through self-care initiatives, to ensure burnout risk is mitigated and sustainability is strengthened. Self-care has become ever more imperative within the currently strained workforce climate, where service demand pressures have escalated, as a direct result of the global COVID-19 pandemic that is known to have delayed access to care across all facets of health.

Moving forward, a stronger emphasis will be placed upon supporting workforce capacity building through the ongoing provision of Professional Development Scholarships and an increase in the Specialist support provided to the region. A total of 18 Scholarships have been awarded to Palliative Care staff across the Loddon Mallee over the past 12 months, indicating that there is a strong appetite for continuous learning. Furthermore, a new Palliative Aged Care Resource Nurse position has been funded to deliver training and development to staff within Residential Aged Care Facilities.

Key to the success of Palliative Care is knowing whether the care delivered is evidence-based, contemporary and importantly, meets the needs of the people experiencing it. Across the Loddon Mallee there is a firm commitment to ensuring consistency in the delivery of safe, high-quality palliative care and bereavement through a long-standing partnership with the University of Wollongong, whom support the collection of health indicators known to enable effective monitoring of end of life care. Consistent data collection enables an opportunity to identify where increased support is required or potential gaps in knowledge and skills exist.

It is with great pleasure that I have been appointed the Chair of the Loddon Mallee Palliative Care Consortium, a role that is incredibly heart-warming, knowing the high levels of value placed upon end of life care across the region. I would like to take the opportunity to acknowledge and thank former Chair, Diane Senior, for her three year appointment and commitment provided to the Consortium, we all wish you well in your retirement.

I look forward to the ongoing successes well into the future.

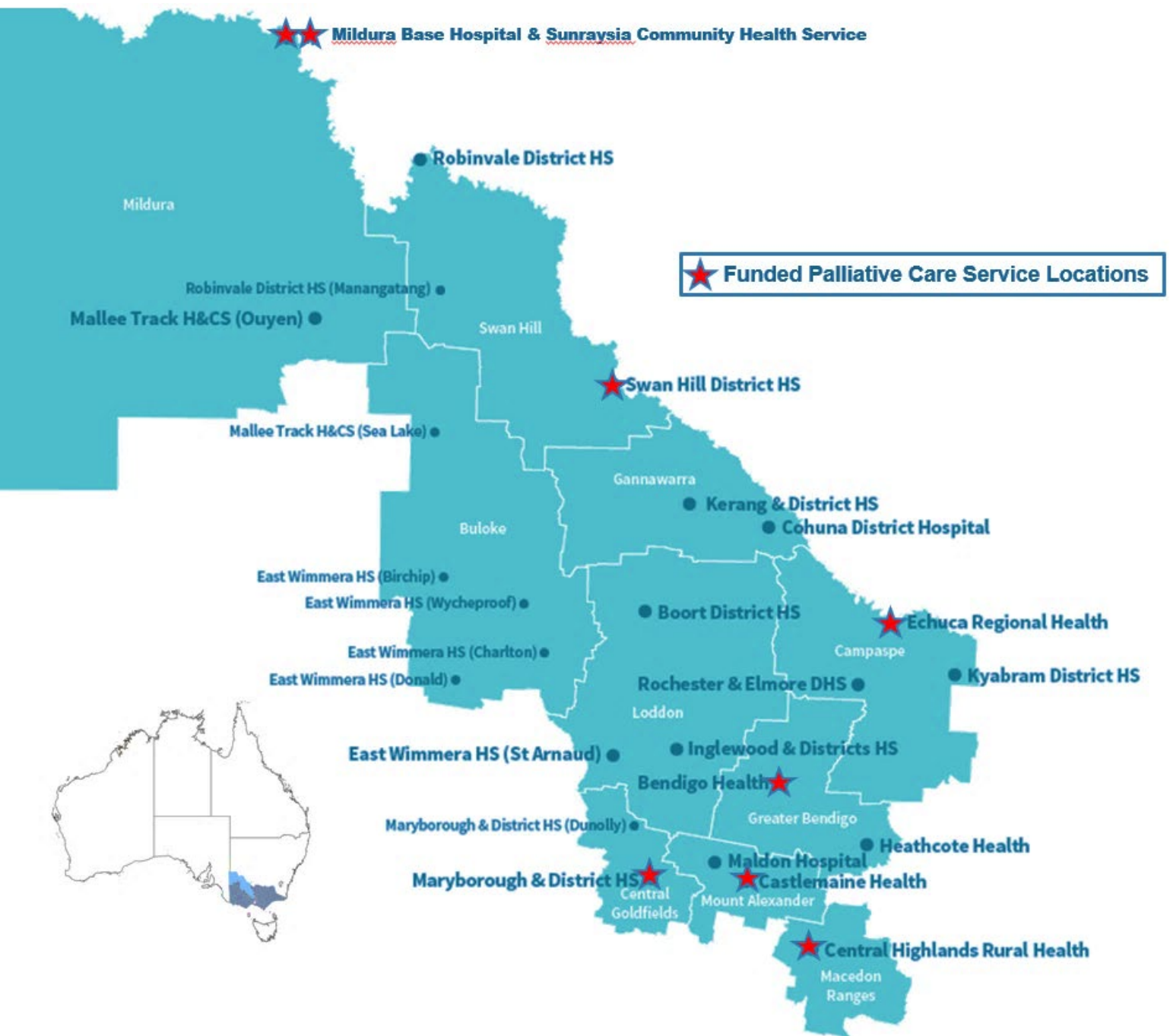
Warm wishes for another year ahead.

Cynthia Opie

Loddon Mallee Regional Palliative Care Consortium Chair



The Loddon Mallee Health Region



The Loddon Mallee Region is one of eight DH regions and it encompasses 26% of Victoria. The population as recorded in 2020 is 342164. Approximately half the population are concentrated in Mildura and Bendigo. There will be variation in growth across LGA's and the City of Greater Bendigo is expected to increase by 31%.

20% of the region's population are aged 65 years and over, in contrast to the state average of 15.6%

The region has a strong cultural heritage, large Aboriginal population, and new skilled migrants are an ever-growing demographic in the region.

The map shows the boundaries of the region and the locations of the 23 health services. All deliver generalist palliative care services and our eight members deliver specialist palliative care services.

Consortium Membership

| Service | Service Profile | Staffing (EFT) |
|--------------------------------------|--|---|
| Bendigo Health Care Group | Community Palliative Care Service including Chum House Day Hospice | 8.66 |
| | Palliative Care at Home | 2.5 |
| | Specialist Inpatient Palliative Care Service | 29.89 |
| | Loddon Mallee Regional Consultancy Service (LMRPCCS) | 5.92 |
| Castlemaine Health | Community Palliative Care Service | 1.6 |
| Echuca Regional Health | Community Palliative Care Service | 2.5 (+ 0.7EFT Palliative Care Inpatient liaison role) |
| | Specialist Inpatient beds | 0.6 |
| Kyneton District Health Service | Community Palliative Care Service | 3.3 |
| Maryborough District Health Services | Community Palliative Care Service | 0.2 |
| Mildura Base Public Hospital | Specialist Inpatient Palliative Care Service | 3.3 |
| Sunraysia Community Health Service | Community Palliative Care Service | 4.2 |
| | LMRPCCS | 0.8 (+0.8 EFT hospital liaison role) |
| Swan Hill District Health Service | Community Palliative Care Service | 3.1 |

Governance

The LMRPCC Structure is based on template “Role Statements” development and managed by DHHS. The peak governance group for the Consortium is the Board. Its primary responsibilities are to set and monitor the delivery of the Strategic Plan, ensure that the financial affairs of the Consortium are managed, promote and enable the work of the Consortium across the region. The Consortium Board meets bi-monthly

The Consortium is supported by the Clinical Operations Reference Group (CORG), and special projects or working groups.

| Consortium Member | Service |
|----------------------|--|
| Cynthia Opie (Chair) | Echuca Regional Health |
| Chloe Keogh | Swan Hill |
| Susan Kennett | Dhelkaya Health |
| Bec Broadbent | Bendigo Health |
| Susan Whitfield | Central Highlands Rural Health (Kyneton) |
| Lisa Evans | Maryborough District Health |
| Janet Hicks | Mildura Base Hospital |
| Norry Elder | Sunraysia Community Health Services |
| Wendy Lunghussen | Cohuna District Health (non-funded member) |

| Clinical Operations & Reference Group Member | Service |
|--|--|
| Alison Lowe Chair | Kyneton District Health Service |
| Merridee Taverna | Swan Hill District Health |
| Susan Andrews | Castlemaine Health |
| Katherine Formica | Echuca Regional Health |
| Alison Smith | Bendigo Health |
| Anne Jones | Maryborough District Health |
| Tracey Tonkin | Mildura Base Hospital |
| Mel Livens | Sunraysia CHS & Palliative Care Consultancy Service (northern) |
| Tanna Taylor | Cohuna District Health |
| Anita Wild | LMR Specialist Palliative Care Consultancy (NP) |
| Angela Munro - | LMR Specialist Palliative Care Consultancy (CNS, MND) |
| Jo Lane Walsh | LMR Specialist Palliative Care Consultancy (NP) |

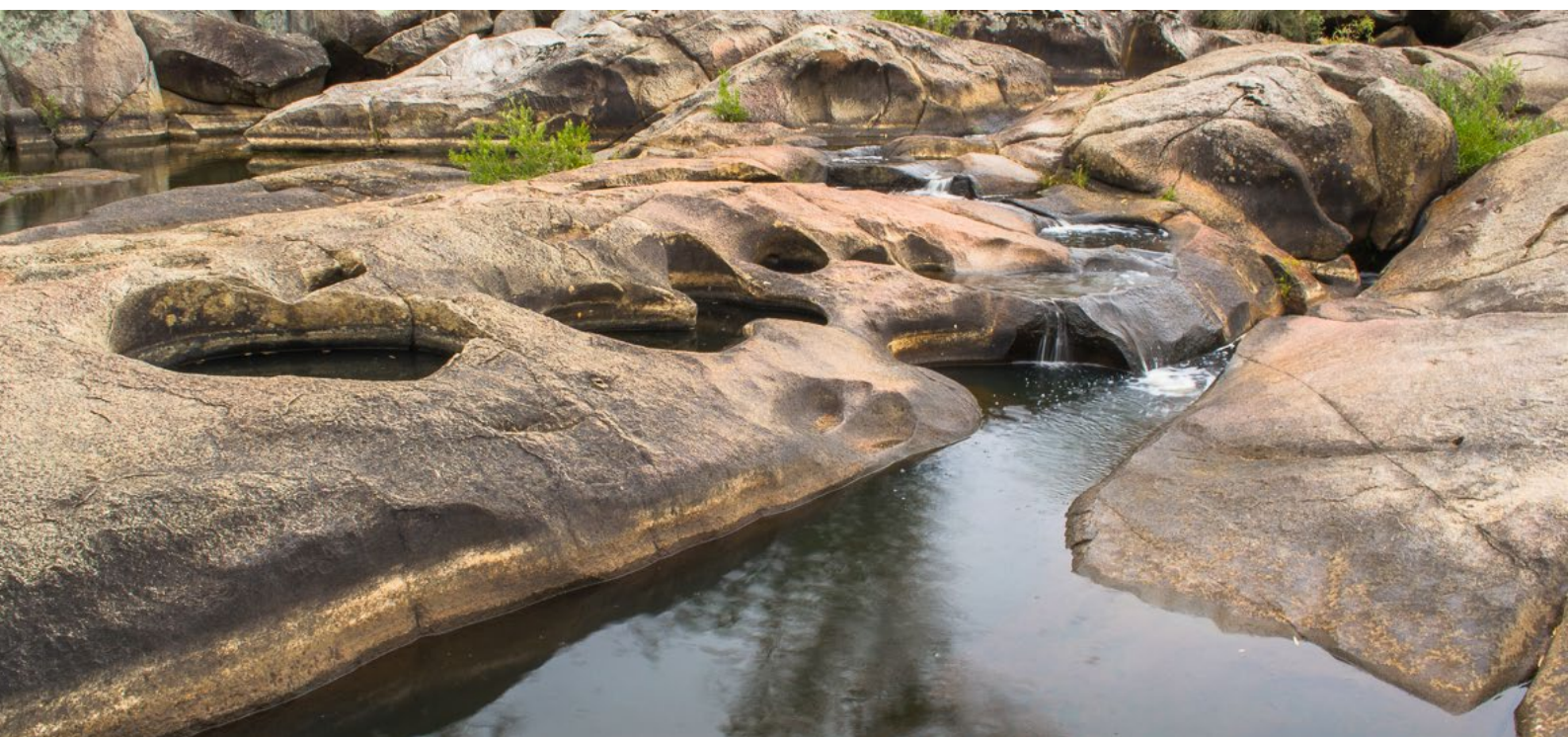
Strategic Plan

In 2018 the Loddon Mallee Consortium developed a strategic plan in line with Victoria's End of Life and Palliative Care Framework. Within the Five priorities set out by the framework, 52 specific goals were created by the consortium to address opportunities for improvement of end of life and palliative care in the Loddon Mallee Region.

Some of these goals have been achieved and realised in the 2 years since the creation of the strategic plan, and others have been prioritised for the year to come.

In the 2021/2022 period, the following projects and activities were undertaken;

- Caring @ Home Packs for Aboriginal and Torres Strait Islander families
- Paediatric Palliative Care National Action Plan Project
- Early Access Program
- Palliative Care Liaison Nurse
- Integrated Motor Neurone Disease out-patients clinic
- Increased Palliative Care at Home beds
- Effective Clinical/therapeutic Communication workshops
- LMRSPCC Online education series
- ConqUer Breathlessness Program (CURB)
- Program of Experience in the Palliative Approach (PEPA) placements
- Palliative Clinicians Network
- Loddon Mallee Region knowledge and skills self-assessment of nurses working in Specialist Palliative Care (Training Needs Analysis)
- Grants and Scholarships program
- Mindfulness for Palliative Care Clinicians



Priority 1: Person-centred services

Early Access Program

The Bendigo Health Community Palliative Care Service, in conjunction with the Day Respite Centre, have implemented a new medical and social model for patient care called the Early Access Program.

The team has developed an early referral and access program that allows patients and carers to prepare for the months ahead of them with advanced care planning empowerment and knowledge to make decisions about timing to re-connect back into the palliative care services.

The early access program was on hiatus for much of 2022 due to visiting restrictions to health services. With these restrictions being lowered, the Early Access Program will continue to benefit the Loddon and Greater Bendigo communities from October 2022.

ConqUer Breathlessness Program (CURB)

Based on the Cambridge breathlessness intervention service that has been widely researched and tested, Bendigo Health will soon be facilitating their own ConqUer Breathlessness Program for the Loddon Mallee Region.

Having had positive feedback for the program from the consumer reference group, the biggest issue voiced by breathless patients was inconsistent information.

The clinic is an 8-12 week program where patients are educated on strategies to manage their breathlessness, but has been significantly interrupted by the pandemic. Nine patients have completed the program to date and have reported they have been able to rehabilitation clinics for exercise programs (which they had previously failed). Other reported benefits of completing the program include; the ability and confidence to resume activities of daily living (independently), and a reduced calls to ambulance services – due to self-managing their breathlessness.

Patient literature and promotion materials have been developed for the local region – and are currently being implemented within regional palliative care services. With standardised language and clinical approach to breathlessness – people living in the Loddon Mallee Health Region, afflicted with this distressing symptom, will benefit from these efforts.

Palliative Care at Home

Following a review of their model of care, Bendigo Community Palliative Care increased their capacity for Intensive Palliative Care at home.

Increasing from 6 to 20 “Palliative Care at Home” beds has allowed greater autonomy and choice of people who have been referred to their service. Adopting this person-centred approach in service development has enabled their team to meet the growing needs of the Loddon and Greater Bendigo community.



Priority 2: Engaging communities and embracing diversity

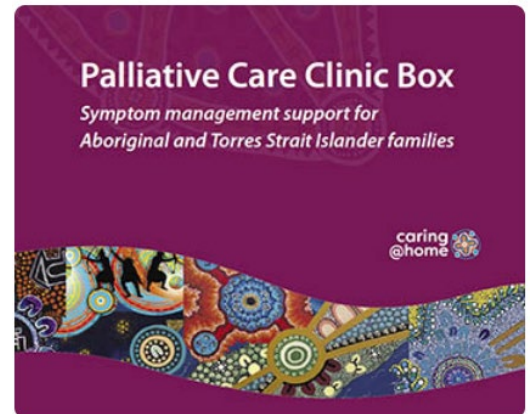
Caring@home for Aboriginal and Torres Strait Islander Families

At the beginning of 2022, the Loddon Mallee Region Palliative Care Consortium was approached by Caring@home to help evaluate a new resource under development for Aboriginal and Torres Strait families. Following consultation with members of the Bendigo Health Aboriginal Liaison team and the Bendigo & District Aboriginal Co-operative, the resource was approved for distribution.

The resources are free, evidence-based and facilitate high-value care; they support person-centred outcomes and improve service performance efficiency and effectiveness.

In 2022 the community palliative care services within the Loddon Mallee Region provided many of the Caring @Home packages to their patients, because they allowed greater freedom of choice for the dying person and their carer(s).

The caring@home project is funded by the Australian Government and led by the Brisbane South Palliative Care Collaborative.



Paediatric Palliative Care National Action Plan Project

The Loddon Mallee Region Palliative Care Consortium was approached by the Paediatric Palliative Care National Action Plan Project to participate in developing a Paediatric Palliative Care National Action Plan. As part of the planning process, it is consulted with a large number of people and organisations to seek their feedback on issues relevant to the plan. This work will continue in 2023, and the consortium will offer to participate in;

- Developing a National Paediatric Palliative Care Action Plan
- Developing an online resource hub for Paediatric Palliative Care (website)
- Establishing a Paediatric Palliative Care Education Special Interest Group
- Providing information services for parents/carers and health professionals
- Undertaking research to provide a national snapshot of children with high medical needs and life limiting conditions



Priority 3: People receive services that are coordinated and integrated

Palliative Care Liaison Nurse

A joint-project between the Loddon Mallee Integrated Cancer Service (LMICS) and Bendigo Health has seen the creation of a new role (the Palliative Care Liaison Nurse).

The new role has been developed to streamline referrals and access to Palliative Care services at Bendigo Health and the region from inpatient wards and oncology services within Bendigo Health. The Palliative Care Liaison Nurse role is pivotal in supporting people admitted within inpatient units to transfer care to their home.

Development and recruitment of this role has been on hiatus during 2022 due to staff demands, but will continue 2022-23.

Murray PHN & Loddon Mallee Palliative Consortium Partnership

The Murray PHN will be working with Loddon Mallee PCC to conduct various projects as part of a 4-year Palliative Care program funded by the Federal Department of Health with the *Greater Choices At Home (Palliative Care measure)*. Some of the work will include Professional Development opportunities for GPs and Practice Nurses, linking to established palliative care networks to inform project actions, and to review Palliative Care referral pathways.

To date, GPs in the Loddon Mallee have not been provided with a consistent referral pathway to the Specialist Palliative Care Consultancy. Utilising the “*Health-Pathways*” system already in place, The Loddon Mallee Region Palliative Care Consortium will be working with the Murray PHN to create decision making and referral tools, along with the appropriate contact information. This work will continue into 2023.

Integrated Motor Neurone Disease out-patients clinic

Dr Buddy Mudugamuwa (Consultant Palliative Care Medicine) and Angela Munro (Motor Neurone Disease CNC) have progressed with the Integrated Motor Neurone Disease out-patients clinic and have been working with Nikita Piroddi & Dr Faraz Jeddi (Consultant Rehabilitation Medicine) to finalize the documentation, quality process and patient literature.

This new regional specialist clinic will be a joint venture between the Bendigo Health Outpatient Rehabilitation Services and the Loddon Mallee Region Specialist Palliative Care Consultancy Service. Plans to launch later in 2023, the clinic will provide more coordinated care for MND patients and encourage earlier involvement with a palliative care service.

It is expected that combining the clinics will not only facilitate better communication of care needs, but will also discretely introduce the person and their carers to Palliative Care services earlier in their disease process. Earlier involvement with Pall Care services in this non-clinical setting will offer additional support, and help to reduce stigma associated with Palliative Care and – advance care planning for people with an early diagnosis of MND.

Palliative Aged Care Resource Nurse Program

Currently under recruitment, the Palliative Aged Care Resource Nurse Program, is a project funded by the Southern Loddon Mallee Region Specialist Palliative Care Consultancy.

This project seeks to improve the quality of Palliative, and End of Life care delivered to residents and their families by working with representatives of RACFs and connecting their organisations to Palliative Care Specialists and existing services.

Following an audit process, the project team will work with representatives of the RACFs to create a quality improvement program tailored to their organisation that addresses gaps in both organisational governance and workforce knowledge & skill.

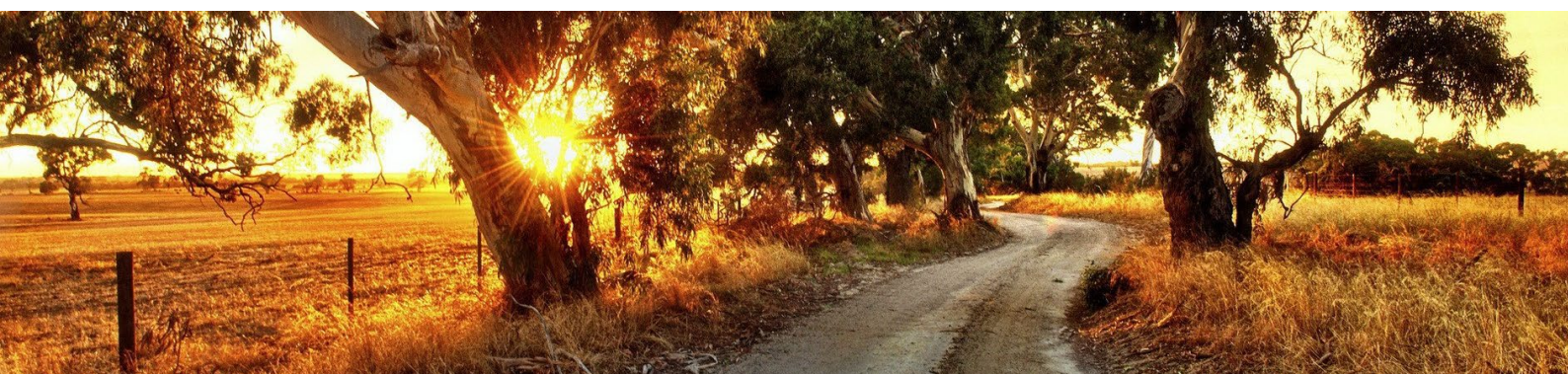
While providing guidance, clear goals for governance (policies and procedures), quality, and improving staff capability & confidence, participants will also benefit from;

- Incorporating “Palliative Care needs rounding” into practice. - This rounding practice facilitates better communication with RACFs staff, GPs and family members. It improves documentation of advanced care plans and help to identify resident with complex palliative care needs for referral to the Palliative Care Consultancy
- Becoming familiar with the use of PCOC assessment tools. The Palliative Care Outcomes Collaboration (PCOC) are well established as best-practice tools for ongoing assessment of people palliative care. Users of this tool also become familiar with the standardised vernacular/clinical language of palliative care.
- Becoming a part of a professional network specifically for Palliative and End of life care in RACFs. All participants will be invited to join the Loddon Mallee RACFs Palliative Care Network, which will be supported by the Residential Aged Care and Disability clinical support role within the Loddon Mallee consultancy.

Based on each Training Needs Analysis, RACF’s will be provided with recommendations (based on workforce capability) that may include;

- PEPA placements or reverse PEPA placements
- Online training through recommended sites (based on RACF training budget)
- Consultancy led in-services
- Palliative Care Specific Workshops/webinars
- Support for enrolling in Post-graduate studies

Effectiveness of the program will be measured by audit, referral activity and client survey. Following the project conclusion, the data collected will be utilised for future strategies to support better outcomes in Aged Care.

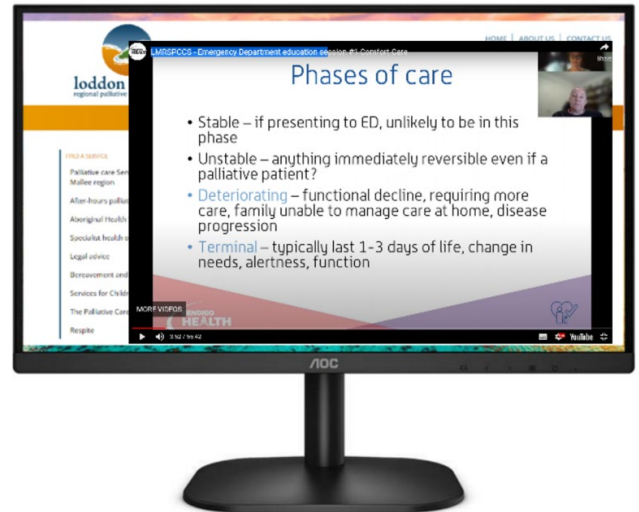


Online Education Series

The Southern Loddon Mallee Region Specialist Palliative Care Consultancy Service (LMRSPCCS) have developed a series of 5 online education sessions specifically for non-specialist palliative care clinicians. The five sessions are titled; *Comfort Care*, *What to expect with a dying patient*, *Palliative medications and dosage*, *PCOC (assessing phases in the inpatient setting)*, and *Motor Neurone Disease –an overview*.

This content will be helpful to any clinicians who need to plan care for people diagnosed with a life-limiting illness, or for those who require end-of-life care and covers the management of;

- pharmacological and non-pharmacological approaches to managing pain, airway/secretion management, restlessness and agitation,
- emotional support
- self-care for staff and carers
- trajectories of different palliative diseases
- End of life care and immediate after death care.
- consideration of the appropriate setting for the dying patient
- anticipatory prescribing in context of patient choices
- aetiology and Management of MND



Website Update



The Loddon Mallee Region Palliative Care Consortium's website:

"<http://www.lmrpcc.org.au/>" has continued to service the region with 1,915 users, and 2,385 sessions.

The consortium had recognised that the website is providing needed support to the region, and offers many opportunities to connect to people in the Loddon Mallee for better broadcasting of services.

In 2022, the consortium website was updated and optimised for mobile devices, as well as incorporating Google analytics.

Updates included an interactive region map to assist users to find palliative care services in their local area, and updated education content for clinicians, including education sessions from the consultancy, links to external education facilitators and recommended literature.

Priority 5: Specialist palliative care is strengthened

Loddon Mallee Region knowledge and skills self-assessment of nurses working in Specialist Palliative Care (Training Needs Analysis)

This self-assessment has been designed to understand and measure how nurses (working in specialist palliative care services) self-rate their capability, knowledge, and skills in identified domains in the delivery of end of life and palliative care.

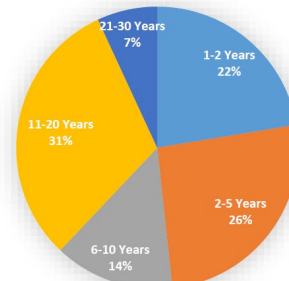
Participation in self-assessment was offered to all of the members of the CORG, who then forwarded an invitation to their staff. 132 invitations were sent and 58 participants completed the self-assessment from January to May 2022.

In addition to some questions related to workforce, the clinicians were asked to self-rate themselves against 97 areas of knowledge and skill related to Palliative care assessment and intervention (see example table below).

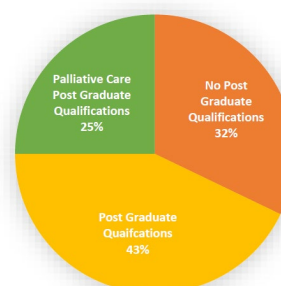
Analysis of the results provided feedback on relevant professional development opportunities for the individual, for the department manager, for the organisation and the region. These results will assist in coordination of individual, departmental and regional palliative care education by targeting the identified skill gaps. The results will also inform managers of the self-perceived skill mix of their nursing teams who provide palliative care and will assist in organisations in developing the capacity of nursing teams to provide enhanced palliative care.

The data generated by this work will help healthcare organisations and universities within the region to understand the skill and knowledge challenges that lie ahead of this specialised group of health professionals, and work towards a sustainable succession plan for this workforce.

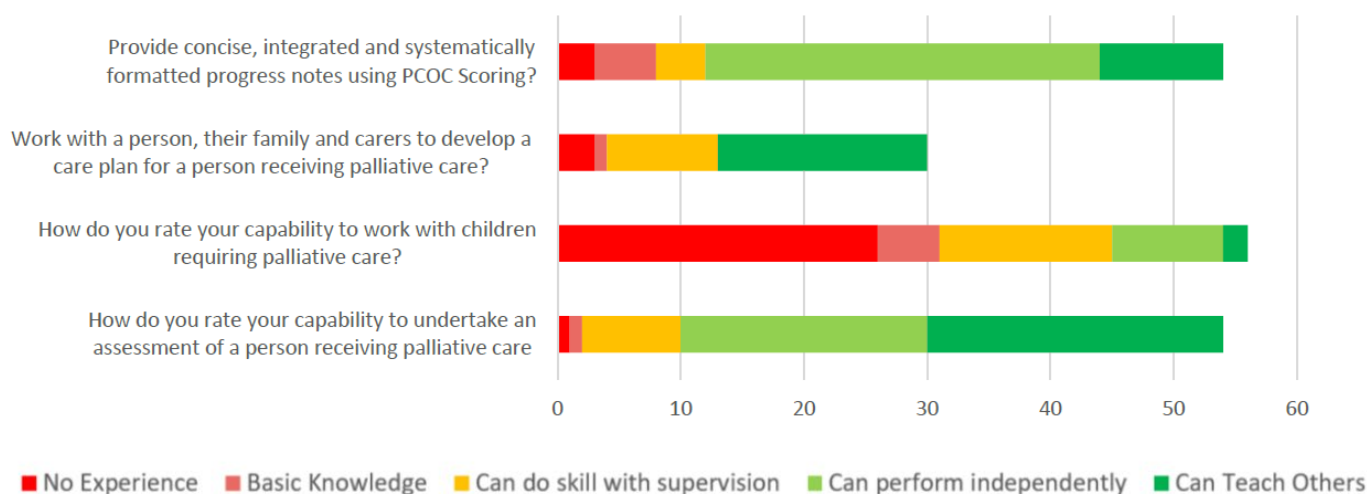
Years of experience working in Palliative Care



Post Graduate Qualifications



*Regional data showing 4 of the 97 questions asked in the self-assessment



Effective Clinical/therapeutic Communication workshops

In 2021, Jo Lane Welsh, NP and Angela Munro CNC (Loddon Mallee Specialist Palliative Care Consultancy) had undertaken “Effective Cancer Communication facilitator” training with the Cancer Council of Victoria, with the aim of providing workshops in the region.

This year, 2 x full day workshops were facilitated in the region for Specialist Palliative Care Clinicians, with more in development. Participants from across the Loddon Mallee region benefitted from Jo and Angela’s tuition.

The Effective Cancer Communication (ECC) program is a suite of workshops that teach best practice communication skills to health professionals, non-clinical staff and volunteers.

Through experiential learning with a simulated patient (actor), participants explore and recognise emotional reactions to cancer and apply evidence-based communication frameworks to respond effectively.

Participants are also provided with tools and language to build trusting relationships for better patient experience and health outcomes.

Clinicians who have participated in this training have enjoyed the benefits that ultimately lead to better patient experiences and outcomes.



PEPA

The Program of Experience in the Palliative Approach (PEPA) has provides an ideal opportunity to learn from experienced specialist staff to enhance skills, knowledge and experience in the palliative approach. With visiting restrictions in place it has been difficult to facilitate PEPA placements in the region, and as a result our region has only facilitated two PEPA placements in the past year. However with easing of restrictions, our consultancies and community palliative care services are looking to re-invigorate the program in 2023.

Grants and Scholarships program

Recognising the need to encourage more clinicians to develop their knowledge of specialist palliative care, the consortium allocated \$20,000 to a grants and scholarship program for our region. The grant and scholarship program was created to share in the costs for any specialist palliative care education undertaken by our clinicians. Our clinicians could apply for a Scholarship of up to \$2000 for Post-graduate study in Palliative Care or \$500 for Specialist Palliative Care training events and Travel or Accommodation costs associated with specialist palliative care education.

To date, over \$13,000 has been awarded to clinicians in our region. The following palliative care courses were undertaken by the 18 applicants:

- Bereavement Counselling
- Banksia Palliative Care Course
- Grad Dip Cancer Care ACU
- Grad Cert Pall Care (ACN)
- Pain Assessment Masterclass (CPC)
- Grad Dip Pall Care (Flinders University)
- MND Health Professional Webinar
- Shapes of Grief
- Physical Assessment Masterclass (CPC)
- Masterclass Clinical Ethics

"In my clinical management class, I learned the early and late signs of death. Whilst giving handover to the oncoming shift, I was able to use these learnings to educate one of our new staff members which enabled her to identify and prepare for the imminent death of her patient. Being able to share my knowledge was a big motivator for me enrolling in the diploma so this was a very rewarding outcome!"

A Reid RN

"I have greatly improved with my communication skills towards patients and family, being able to help them understand the (end of life process), and be able to take some of the fear and uncertainty that they may have.

J Cawling RN

Mindfulness

"The session that meant the most to me was the 3 strategies for meeting difficult emotions. - Name it to tame it, feel it to heal it..... I will continue to utilise these always." Participant

"The program highlighted the importance of caring for myself the same way I care for patients and their families at work as well as my loved ones at home." Participant

Demands on service and high rates of personal leave in 2022 have challenged our frontline staff personally and professionally. The consortium chose to respond proactively to threats of burnout and compassion fatigue by implementing a range of mindfulness activities for Palliative Care Clinicians in the region. During Palliative Care week, the consortium hosted a Mindfulness (face-face) workshop facilitated by Jo Gibbs (TREAT Health Care), which was well attended and highly regarded. Additionally, the Loddon Mallee and Southern Metropolitan Palliative Care Consortium sponsored a 6 week mindful self-compassion course facilitated by Suzanne Peyton (the mindful well), which was also well attended.

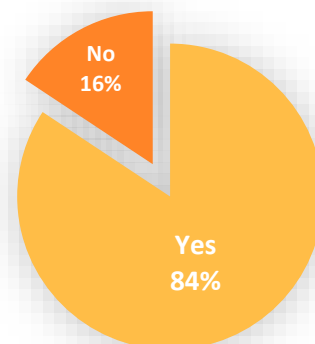
Loddon Mallee Palliative Clinicians Network

In 2022 the Loddon Mallee Palliative Clinicians Network was created to allow Palliative Care clinicians from all of the Specialist Palliative Care services to share experiences and professional support. In our first meeting the members discussed the results of our recent Knowledge and skills survey that demonstrated a desire of palliative clinicians to participate in clinical supervision with the following definition;

“Clinical supervision is regular, protected time for facilitated, in-depth reflection of clinical practice. It aims to enable the supervisee to achieve, sustain and creatively develop a high quality of practice through the means of focused support and development. The supervisee reflects on the part she plays as an individual in the complexities of the events and the quality of her practice. This reflection is facilitated by one or more experienced colleagues who have expertise in facilitation and frequent, ongoing sessions are led by the supervisee’s agenda. The process of clinical supervision should continue throughout the person’s career, whether they remain in clinical practice or move into management, research or education’ (RCN Institute 1997).”

The consortium is now in the process of investigating models that could help facilitate clinical supervision in nursing, and across services. A small working group has been established for this project, and potential resources are being sought.

Another innovation that has emerged from the Palliative Clinicians Network is the development of a regional case review. The group plans to use their meeting time to host a regional complex case review, facilitated by specialist palliative care services across the region. Members of Allied Health teams, the Consultancy (including Palliative care physicians and Nurse Practitioners), community Palliative care and hospice/ward staff will be invited to attend a de-identified case review. Benefitting from this learning and networking exercise, services will be able to use these opportunities to benchmark their practice and knowledge with others in the region.



Do you think that regular clinical supervision would be helpful to your work?

Noala Flynn AM Excellence in Palliative Care Nursing Award 2022.

The Swan Hill Community Palliative Care Team were the recipients of the first Noala Flynn AM Excellence in Palliative Care Nursing Award, presented by Palliative Care Victoria (during Palliative Care

Noala Flynn AM was a passionate palliative nurse and leader who worked tirelessly to support those in palliative care. Her amazing contribution resulted in her being awarded the Member of the Order of Australia in 2005 for services to palliative care.



Week).
care

The team were nominated by a member of the community who received their care. In concluding the nomination they stated *“The Swan Hill Palliative Care Team are my Heroes.*

Consortium Priorities for 2023

Pathways to Palliative Care in Rural Victoria

A project was undertaken by the consortium in 2019 to identify gaps in service provision, and where possible seek standardisation of referral pathways to specialist palliative care. From this work, the consortium set some priorities to improve palliative care pathways that included:

- Work together to standardise (as possible) referral, triage and intake tools.
- Work together to develop and implement a more strategic education strategy for the general health work to strengthen 'a palliative approach' and access to palliative care services.
- Implement PCOC reporting as wide as possible in the region to enable benchmarking. Echuca Regional Health is also working to implement PCOC across the entire health service in an attempt to standardise assessment and care. This is an aspiration for the broader region
- Target our Aged Care capacity building approaches in a palliative approach, as well as to potentially work on ensuring palliative care policy development in the public and private facilities.
- Develop a resource to build awareness in metropolitan health services about 'good discharge' to palliative care services in the Loddon Mallee
- Develop a strategy with our Primary Health Networks to strengthen palliative care service awareness across primary care.
- Continue to advocate and build a common understanding about opportunities/ barriers emanating from commonwealth funding models
- Continue to work with CALD and ATSI communities to remove barriers to service access and utilisation

The consortium has accomplished some work towards these priorities, however, the challenges presented by the pandemic have slowed our progression somewhat. These priorities will continue to guide the work undertaken by the consortia, and the following projects have been prioritised for 2023.

- The Palliative Care Outcomes Collaboration (PCOC)
- Clinical Supervision in Specialist Palliative Care
- Regional Complex Case Review
- Clinical Capability Building in Generalist Care
- Transition to Speciality Practice Program
- National Capability Framework





Palliative Care Outcomes Collaboration (PCOC) Reporting

The consortium continues to prioritise the use and reporting of Palliative Care Outcomes. With two of the funded services reporting their data to PCOC, and the remainder actively using the PCOC assessment tool, the services in the region have committed to greater engagement with the program.

In 2022 the consortium will be engaging with services to identify barriers to PCOC reporting, and support opportunities to connect to the Palliative Care Outcomes Collaboration.

Currently, three additional services are developing and implementing databases, with the aim to integrate PCOC reporting into their work.

Clinical Capability Building in Generalist Care

The 2021 Continuing Nursing Education survey for the Loddon Mallee Region (reported by Bendigo Health), aimed to capture the training and education needs of nurses working in public health across the region. With 2475 responses from staff in all health services of the region, the data was presented with a good degree of confidence. The largest group of staff responding to the survey worked in aged care, and the report revealed that End of Life care was the second-most most specifically-requested topic for education and training. It is anticipated that the Palliative Aged Care Resource Nurses program will work well to meet the education demands of the aged care workforce.

The Loddon Mallee Region Specialist Palliative Care Consultancy will continue to provide support to the region, as they have in the past year, with additional online webinar content, and formal support of the regional Case Review.

Transition to Specialist Practice program

To address the identified gap in specialist palliative care educated nurses, the Gippsland Region Palliative Care Consortium and Palliative Care South East had partnered with the Australian College of nursing to develop the pilot course 'Transition to Specialty Palliative Care Practice.'

This course supported nurses in the Gippsland region to undertake education in specialty palliative care and support the transition to post-graduate level study.

In 2023, the Loddon Mallee and Hume Consortiums plan to work with the Gippsland team to facilitate an additional Transition to Specialty Practice program for nurses in our regions. With a demonstrated need for more clinicians to undertake post-graduate studies in specialist palliative care, the TSP program will be a welcome resource as part of our workforce strategy moving forward.



National Services Capability Framework (Palliative Care Outcomes Collaborative)

The Palliative Care Outcomes Collaborative (PCOC) Services Capability Framework is a six-level framework for national application. The framework creates a common language to describe the capability of health services for providing palliative care and enables the comparison between service level and patient outcomes.

Currently the Services Capability Framework is used by PCOC to assess the capability of services to participate in PCOCs core business of palliative care outcomes data collection, benchmarking of services and reporting on benchmarks towards a service level quality improvement response. However, service capability level classification is also a potential resource for the identification of growth opportunities for service development.

In 2023, member organisations of the Loddon Mallee Region Palliative Care Consortium will be participating in a series of interviews and discussions to assess their services against this framework.

The interviews will be centred on the four domains of the framework;

- Assessment, planning and care provision
- Availability of care
- Transition within and between teams
- Collaboration and linkages with other services

The consortium members anticipate that information gained from this exercise will help us better understand the existing ability of services to provide palliative care at a health service level, organisational level and regional level.

Ultimately, it will help to identify opportunities for quality improvement and service development in our region, and create a common language to describe the delivery of palliative care at an operational level.

Funds Statement for the period ended 30th June 2022

2021-22

INFLOWS

YTD Recognised

DHHS - Funding

Palliative Care Consortium

141,816

TOTAL

INFLOWS

141,846

OUTFLOWS

Hotel & Domestic

(49)

Personnel Costs

(103,547)

Repairs & Maintenance

(38)

Group Charges

(504)

Corporate Charges

(16,956)

Administrative Costs

(10,836)

TOTAL OUTFLOWS

(131,930)

Net Surplus/(Deficit) for Year

9,886

Accumulated Surplus/(Deficit) at Beginning of
Year

65,626

Accumulated Surplus/(Deficit) at End of Period

75,512

Acknowledgements

The Loddon Mallee Palliative Care Consortium would like to acknowledge the fantastic work in palliative care and kind support for our services from all of our professional associates and partner organisations.

