Mercy Palliative Care (MPC) Psychosocial Spiritual (PSS) Aged Care Collaboration

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Mercy Health

Care first

BACKGROUND

Mercy palliative care Psychosocial Spiritual (PSS) referrals for Residential Aged Care Facility (RACF) residents are not always appropriate or timely, resulting in poor end of life outcomes. A significant gap in staff being able to identify PSS support and less than 4.33% of residents being offered bereavement support due to lack of knowledge and resources was indicated with limited appropriate referral pathways.

AIMS

- To provide a snapshot of the current level of PSS support being provided across RACF's in the Mercy Palliative Care catchment and determine the potential role of community palliative care within RACF's.
- Identify barriers to the provision of PSS supports.
- Identify education needs for staff and families in specialist palliative care approaches.
- Improve communication between RACF staff and patients/families during the palliative journey.

METHODS

- To develop a need's analysis via surveying 24 RACF's staff in their ability to meet families needs in the provision of PSS services and identify potential barriers.
- To complete a pilot study based on qualitative approaches that determine an intervention plan to address the top needs identified in surveyed results.
- Training was delivered to staff in two RACF's on effective communication in palliative care which included managing expectations, responding to emotional distress, the role of advance care planning, culture and existential distress at end of life.
- Provided education to carers and families on types of grief, advance care planning, end of life care and appropriate referral pathways

CONCLUSION

The results strongly concluded there is a significant gap in the current level of PSS supports being identified and addressed. There is a strong need for PSS involvement to upskill staff in communicating with patient's and families in palliative care. Further work is warranted in identifying patient's/families needs and providing appropriate support and education to RACF staff on specialist palliative care approaches.

KEY SURVEY RESULTS

13 responses received out of 24 RACF's

75%

Do not have direct access to PSS supports

75%

Do not have direct access to spiritual care

100%

Felt they would benefit from information about specialist palliative care approaches

50%

Do not have access to advance care planning