



Mercy Health
Care first

Aged care Residential In-Reach Collaboration at Mercy Palliative Care (MPC)

Authors: Dr Annie Chiu, Val Crane, Deanne Layton, John Stafford.

ISSUE

Community palliative care service referrals for residential aged care residents are not always appropriate or timely, and result in poor end of life outcomes.

AIMS

- To increase access to specialist palliative care, and improve outcomes for residential aged care home residents.
- To build the capacity and capability of residential aged care staff to identify deteriorating residents and provide ongoing care and timely referrals to appropriate services.
- To build and strengthen relationships with GPs who service residential aged care.

METHODS

- MPC and Clinical Nurse Consultant partnered with Residential In Reach Clinical Nurse Consultant at Werribee Mercy Hospital (WMH).
- Targeted residential aged care homes in the WMH Wyndham catchment.
- Provided face-to-face education, including point of care.
- Provided an information package (ISBAR, Supportive & Palliative Care Indicators Tool, and Memorandum of Understanding).
- Implemented Clinical Needs Rounds.

CLINICAL NEEDS ROUNDS RESULTS

49%

Required review of the Advance Care Plan and Goals of Care.

24%

Required a referral to MPC.

23%

Required a referral to other clinicians.

CONCLUSION

The unique partnership of specialist palliative care, and Residential In-Reach, has led to more residents staying in familiar surroundings, and the place they know as home.

References

1. *Palliative Care Needs Rounds: The Implementation Guide* © Little Company of Mary Health Care Limited and University of Stirling 2020



Feedback on Clinical Needs Rounds

“It helps identify and build our staff’s confidence in dealing with family and managing care concerns.”

“We had group discussions to decide the best approach that benefits residents most.”

“This has been a good program with a supportive team.”