

BARWON SOUTH WESTERN REGION PALLIATIVE CARE CONSORTIUM ANNUAL REPORT 2017 – 2018













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INTRODUCTION

The Barwon South Western Region Palliative Care Consortium was established in 1998. Its objectives were determined by the Department of Human Services policy document, *Strengthening Palliative care: a policy for health and community providers 2004-09.* This policy was reviewed in 2009-10 and led to the development and release of the Department of Health, Strengthening palliative care: Policy and strategic directions 2011-2015 in August 2011.

In July 2016 the Victorian Government released the 'Victoria's end of life and palliative care framework – A guide for high-quality end of life care for all Victorians'. The implementation framework developed by the DHHS in consultation with service providers across the sector guides the delivery of the 'end of life and palliative care framework' for government-funded specialist palliative care services, palliative care consortia, state-wide specialist services and the PCCN.

This framework is different to previous policies in it recognises that if we want sustainable and responsive palliative care in Victoria we can no longer leave the responsibility with Specialist Palliative Care Services.

The framework will deliver actions on the following five priorities:

- 1. Deliver person-centred services:
- 2. Engage communities, embracing diversity
- 3. Coordinate and integrating services
- 4. Make quality end of life and palliative care everyone's responsibility
- 5. Strengthen specialist palliative care

The framework articulates clear expectations, enabling a broader range of staff to respond to people's end of life care needs in our diverse community.

The Barwon South Western region palliative care consortiums' key functions in implementing the Framework include:

- Leading the implementation of relevant aspects of the framework in the region
- Monitoring and reviewing the implementation of the framework in the region
- Facilitating the integration of care for people with a life-threatening illness and their carers' and families across the service system
- Working to optimise the community's access to quality palliative services
- Enabling more efficient and cooperative use of resources that supports an integrated approach to care for the patient

The role of the consortium includes:

- Undertaking regional planning in line with departmental directions
- Coordinating palliative care service provision in each region
- Advising the department about regional priorities for future service development and funding
- In conjunction with the Palliative Care Clinical Network (PCCN), implementing the service delivery framework, and undertake communication, capacity building and clinical service improvement initiatives

The function of this annual report is to report the activities of the consortium and detail implementation of the framework by the Barwon South Western Region Palliative Care Consortium over the last financial year.

BACKGROUND ABOUT THE BARWON SOUTH WESTERN REGION

The Barwon South Western Region covers the LGA's of the City of Greater Geelong, Surf Coast Shire, the Borough of Queenscliff, Colac-Otway Shire, Corangamite Shire, Shire of Moyne, City of Warrnambool, Glenelg Shire, South Grampians Shire and Bannockburn and District located in Golden Plains Shire. The total Estimated Resident population (ERP) for the region at 30th June 2017 was 648,187. Estimated Resident Population (ERP) is considered to be a more accurate population figure which is updated annually not every five years as the census data is.

Local Government Areas	Total Population	Increase/Decrease from 30/6/2016	% Increase/Decrease from 30/6/2016
Greater Geelong	244,708	+9,365	+0.04%
Surf Coast	31,324	+1485	+0.04%
Queenscliff	2,934	-135	-0.05%
Colac-Otway	21,436	+1142	+0.05%
Corangamite	16,086	+351	+0.02%
Moyne	16,741	+432	+0.03%
Warrnambool	34,555	+758	+0.02%
Southern Grampians	16,051	+300	+0.02%
Glenelg	19,644	+477	+0.02%
% of Golden Plains Shire	12,862	+430	+0.03%

Figure 1: Data from profile.id.com.au

Geography



Figure 2: Map of Barwon-South Western region and administrative areas, Department of Health **BSWRPCC**

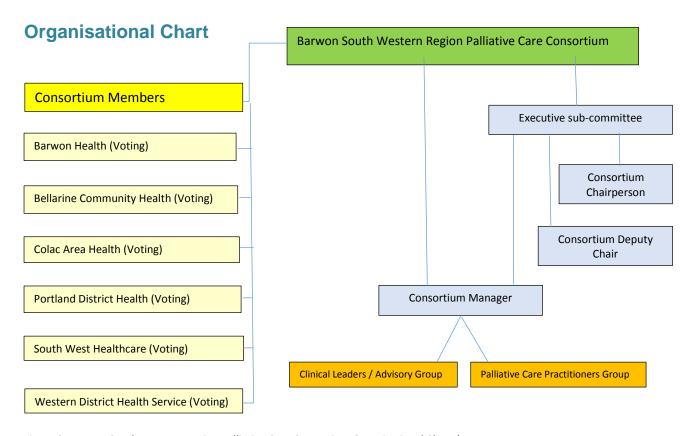


Figure 3: Barwon South Western Region Palliative Care Consortium Organisational Chart (Reviewed July 2018)

Barwon South Western Region Funded Palliative Care Services

Community Palliative Care services are located at Barwon Health (Geelong), Bellarine Community Health (Point Lonsdale), Colac Area Health (Colac), Portland District Health (Portland), South West Healthcare (Warrnambool) and Western District Health Service (Hamilton).

Inpatient Palliative Care beds are located as follows: Barwon Health -16, South West Healthcare -6, Colac Area Health -1, Portland District Health -1 and Western District Health Services -1.

Regional Palliative Care Consultancy Teams – the teams are located as follows: Barwon sub-region team provides services to specialist palliative care teams at Bellarine Community Health, Barwon Health and Colac Area Health. South West sub-region team provides services to the specialist palliative care teams at Portland District Health, South West Healthcare and Western District Health Services. Each team is multi-disciplinary, with a mix of medical, nursing, allied health, psychology, pastoral care and bereavement personnel making up the team. Services involve a mix of primary and secondary consultations to clients and palliative care team members, GP's and acute health service staff both public and private, primary consultations are also available in the form of one to one patient assessments with subsequent advice and/or an opinion being relayed to the referrer.

Hospital Based Palliative Care Consultancy Team – this service is located at the University Hospital Geelong campus of Barwon Health. The team is made up of medical and nursing personnel who provide primary and secondary consultations within the hospital. The hospital based consultancy team received 808 referrals during 2016/17.

CONSORTIUM CHAIR'S REPORT

Consortium Chair Report 2017-18

The 2017-18 financial year has been an extremely busy and productive year for the Barwon South Western Regional Palliative Care Consortium.

This has been my first full year in the role of chair of the Consortium and my second chairs report. The focus for BSWRPCC has been multifactorial and there has been a strong emphasis on strategic and innovative planning, collaboration with other Palliative Care Consortia's across the State and the provision of regional education and clinical support. In particular, the highlights for the year include:

- Volunteer programs are running very successfully across the region with significant growth in terms of volunteer numbers. Services are utilising volunteers in innovative and creative ways to provide a person centred approach to care.
- Subsequent to significant funding growth all Community Palliative Care and Regional
 Consultancy services across the region are strengthening the provision of care. Barwon Health
 and South West Healthcare are working towards the provision of a 7 day per week face to face
 service whilst Western District Health Service is introducing an on call service during weekend
 days with a view to enhancing care and ultimately supporting people to have their terminal
 care in their place of choice.
- A strong focus on the provision of relevant education to both specialist palliative care and generalist health care staff has resulted in a variety of educational opportunities made available across the region.
- Continued active involvement of the Consortium in the *Improving Respite Services in the Barwon South Western Region* project

There do remain a few initiatives, which were not achieved for a variety of reasons, however they do remain on the agenda and work will continue to progress them during 2018-19. These include:

- The ability to be able to externally benchmark our data via the Palliative Care Outcomes Collaborative (PCOC)
- Functional improvements to the regional Palliative Electronic Record Management (PERM) system to support greater access to data

Finally, I would like to thank Myra McRae, Consortium Manager, for her ongoing tireless support to both myself and the consortium and its members during 2017-18.

Jacqui White

Consortium Chair

PRIORITY 1 Person-centred services

- A person's care is individualised
- Families and carers are supported and valued
- People have information that supports decision making
- People have opportunities to develop their advance care plan

The use of consistent validated tools is agreed across the region, as endorsed by the Palliative Care Clinical Network – Safer Care Victoria (PCCN-SCV), Palliative Care Outcomes Collaborative (PCOC) and Victorian Integrated Non-Admitted Health (VINAH) minimum data sets across inpatient, community and consultancy services.

As a region we agreed to embed the reporting of the CSNAT tool to assess carer needs, Resource Utilisation Groups – Activities of Daily Living (RUG ADL), Australian-modified Karnofsky Performance Status (AKPS), Problem Severity Scores, Edmonton Symptom Assessment Score, Phase and a Distress Thermometer into the palliative care software (PERM) used by 83% of community palliative care services in the region. There are no plans underway at the time of this report for Bellarine Community Health to utilise PERM as their electronic management system.

Up-to-date interdisciplinary care plans which reflect the wishes of clients and carers are contained within the PERM software. A Patient Care Plan and a Health Professional Care Plan are created at the completion of each assessment. The number of completed care plans within the region is 100% for all clients. These are a mix of 83% electronic and 17% paper care plans covering all clients. All care plans are provided to the client's GP and other care providers as required. In addition Barwon Health has implemented Symptom Management Plans for specific symptoms to assist patients and carers.

Lists of respite services that may be appropriate for clients with life-threatening illness have been developed and are available in each palliative care service in the region. Information and education on respite availability, including provision of care for children with a life-threatening condition is provided to families and carers by all (100%) community palliative care services across the region as part of standard admission packages for all new clients. All Specialist Palliative Care services have access to the eligibility criteria of the respite services available to clients allowing them to offer tailored advice to clients. During 2017-18 the Barwon South Western Region Palliative Care Consortia were actively engaged in a Department of Health and Human Services funded 'Improving Respite Service' project led by Anam Cara Hospice. The final report for this project has yet to be made available.

Barwon Health continue to support an in-home respite program which is managed by the Multicultural Aged Care Services (MACS) and funded by Hospice Foundation Geelong which makes available palliative care trained staff to provide care in the home when there is a high need. South West Healthcare has maintained their respite in the home service by Warrnambool's not-for-profit hospice service, staffed by volunteers, which provides care for local people who wish to die at home.

In 2017/18 all (100%) of palliative care program staff in the Barwon South Western region received education about appropriate respite services and eligibility criteria as part of palliative care induction programs and ongoing education. As part of their interactions with respite services all (100%) palliative care services in the region report having endeavoured to increase the level of knowledge about caring for people with life-threatening-illness within respite services by advocating on behalf of clients and ensuring their specific needs are understood by respite service staff and met wherever possible.

Volunteer programs are running successfully across the region. In the South West sub-region volunteers continue to provide bereavement support to families and carers and engage in fundraising activities in conjunction with local community groups. Barwon Health have an innovative Volunteer Program which includes bereavement support, Dignity Therapy, Life Stories and Backyard Blitz which offers garden maintenance for palliative care patients, a much needed support. The Backyard Blitz team was a finalist at the Minister for Health Volunteer Awards and The Dignity Therapy team was highly commended for the Safer Care Victoria Compassionate Care Award. Barwon Health has supported Bellarine and Colac palliative care volunteers through provision of specialist palliative care training.

There were several activities for Volunteer week. A National Volunteer Week Breakfast and Award Ceremony was held where volunteers were honoured for years of service as well as special achievements. Volunteer Dianne Johnston was honoured for the work she does with the Life Stories and Dignity Therapy Programs as well as with our Bereavement Groups.

South West Healthcare ran a bus trip for their Volunteers which included afternoon tea and was well attended and appreciated. The Clinical Nurse Coordinator at Portland District Health was interviewed on the local radio station on their Volunteer Program.

At the PCV Volunteer conference Jennifer Walsh, Volunteer Coordinator for Palliative Care, Barwon Health delivered a session on Life Stories with a Patient-Centred approach and also participated on a panel discussing Life Stories together with three other Victorian Palliative Care services.

The Volunteer Teams across the region continue to expand with twenty new volunteers recruited in this financial year. The recruitment of ten new volunteers specifically to support the dignity therapy program was kindly supported financially by the Geelong Hospice Foundation.

The Advance Care Planning clinic at Barwon Health which commenced in 2016 continues to be utilised well. There are two clinics each month, one clinic is held at the Andrew Love Cancer Clinic in University Hospital Geelong, which coincides with Barwon Health's Cachexia Clinic, the other clinic is held at the McKellar Centre.

Training on facilitating Advance Care Planning for Community Palliative Care Nurse Specialists occurs during orientation and refresher courses are offered throughout the year by the Advance Care Planning Team, Barwon Health. Mandated training on Advance Care Planning occurs in the palliative care services throughout the South Western sub region for all Palliative Care Nurse Specialists.

Advance Care Planning as a key process in providing a palliative approach forms part of the education provided to aged care and disability services by the two Palliative Aged Care and Disability Support Nurses in the region.

Strengthening of community palliative care services across the region is occurring with increased hours for community Occupational Therapy, Physiotherapy and Social Work. In Barwon sub-region the regional consultancy team was also strengthened with recruitment of a Registrar, Consultant, Nurse Practitioner plus additional hours for a Clinical Nurse Consultant. In the South West the engagement of a Bereavement Counsellor supplements the multidisciplinary team ensuring specialist palliative care is providing patient centred services from a diverse multidisciplinary team.

Several activities were held across the region for Palliative Care Week and Dying to Know Day this financial year.

In Barwon sub-region a Dying to Know wall was erected in the Geelong CBD which was staffed by members of the Volunteer team. A breakfast was held for the palliative care team in recognition of great teamwork. 'Better Questions Better Answers' communication skills training was offered to staff across the region staff. This training was held over two consecutive days to allow as many staff as possible attend. Professor Fran McInerney delivered two exceptional workshops in Geelong and Warrnambool on 'Dementia and Palliative Care' which were extremely well attended.

Story time for children on death, dying and bereavement was held in the Geelong Library, with a great response from parents and children. Barwon Health and Colac Area Health encouraged all visitor to write down their favourite bucket list activity and pin it to a tree in the foyer of hospitals with the results of the activity publicly announced afterwards, strengthening awareness of death and dying in their communities.

PRIORITY 2: Engaging communities, embracing diversity

- All communities and groups have access to end of life care and planning
- Improved engagement with community leaders to enable them to connect their communities to end of life care
- Communities understand the services available for end of life care and bereavement support

Barwon South Western Region Palliative Care Consortium and its member services have excellent links with local government, community health and primary care partnerships. Local government links are most commonly with Home and Community Care programs which are most relevant for palliative care services. All consortium member services have community health as part of their health services which supports excellent relationships.

Barwon Health, Colac Area Health, Western District Health, South West Healthcare and Portland District Health have volunteers working within the services and these together with clinical staff act as ambassadors in the community helping to ensure people with life-threatening illnesses receive information about the Palliative Care services available to them within the Barwon South Western region.

In rural and regional communities knowledge of palliative care and supportive services for people with life-threatening illness is often higher due to a high degree of stability across medical practitioners and palliative care providers.

Educational strategies have included a significant amount of palliative approach education provided to community nursing, community and residential aged care staff and residential disability staff across the region in the last financial year thus increasing community awareness and understanding of palliative care.

The Barwon South Western Region Palliative Care consortium website lists services, their locations and their services available across the region www.bswrpc.org.au. Information is also available online from Palliative Care Victoria, Palliative Care Australia and the Department of Health and Human Services.

"Aboriginal Cultural Awareness for Staff and "Aboriginal Cultural Awareness for managers" education continues to be mandated for all staff and manager of Barwon Health as part of their Reconciliation Action Plan 2015/16. The smaller services in the region also provide Aboriginal Awareness education to their staff and engage with local Aboriginal Cooperatives.

PRIORITY 3: People receive services that are coordinated and integrated

- People experience services that are coordinated and designed locally
- The primary, hospital, palliative and aged care sectors connect effectively to respond to care needs
- Early discussion, referral, planning and coordination occurs

All specialist palliative care services in the Barwon South Western Region are very closely linked with community nursing services, private hospitals and private community care providers, aged care and disability service providers. All palliative care services in the region have developed and maintained close links with BRACAS.

Links include:

- St John of God Hospital and Epworth Healthcare Radiation Oncology in Warrnambool in the South West sub-region
- St John of God Hospital in Geelong, Geelong Private Hospital and Epworth Hospital in Barwon sub-region.
- Through the Palliative Aged and Disability Support Nurse program links have been established with public and private residential aged care facilities and public and private residential disability services across the Barwon South Western Region.

An After-hours model in all six palliative care services across the Barwon South Western region provides all community palliative care patients and carers access to specialist palliative care telephone triage advice and support after-hours.

All specialist palliative care services in the region have links with at least one and often more community nursing services. While specialist palliative care telephone triage is available to all patients/carers in the region, nursing visits after-hours are not available across the whole region. Availability of visits is dependent on the capacity of the Community Nursing service providing care in a particular area. There are outlying areas where after-hours visits are not feasible or safe predominantly due to lack of mobile phone coverage or because of the significant distances staff on call would need to travel resulting in an inability to respond to other calls. For some smaller services who were able to provide after-hours nursing visits previously have experienced challenges due to staffing issues.

Planning has commenced across the region on the development of a seven day a week community palliative care service including public holidays. It is envisaged that this extended service will significantly strengthen the community palliative care services across the region by providing additional support to patients and their carers and ultimately enable them to be cared for and to die in their own home if this is their wish. It will also provide reassurance and additional support to carers who may be struggling to sustain their carer role.

Work is ongoing to enhance of the regional consultancy services cross the region. In the Barwon subregion the consultancy service will see a Nurse Practitioner to provide mentoring, education, service development and support to the specialist community palliative care services and the generalist services in the sub-region.

During 2017/18 Barwon Health, Colac Area Health, Portland District Health, South West Healthcare and Western District Health Service have continued to use the Palliative Care Electronic Management (PERM) clinical palliative care software. Bellarine Palliative Care service use Uniti software for the recording of clinical information. The St Vincent's/Caritas Christi Hospice after-hours triage contract was renewed in 2018 for a further twelve months (2018-2019) and includes all six palliative care health services in the Barwon South Western Region.

Data indicates after-hours support has been more utilised by clients and carers across the Barwon South Western Region in 2016/17. Total After-hours calls increased from 1809 in 2016/17 to 1862 in 2017/18.

Specialist Palliative Care community services are placed in appropriately sized population centres across the region in Barwon Health, Colac Area Health, Bellarine Community Health, Western District Health Service, South West Health Care and Portland District Health.

Inpatient Palliative Care Beds are located in the following centres: Barwon Health, South West Healthcare, Portland District health Service, Colac Area Health and Western District Health Service.

Clients have access to an appropriate level of specialist palliative care in their region. Community Palliative Care services do not have waiting lists and all referrals are triaged upon receipt utilising an accepted triage tool.

There is clear information about the Palliative Care services available within the region. Information regarding the capabilities of these services is available from a number of sources including the palliative care services, the health services in which they are based, general practice, medical specialists, local government and community health centres.

PRIORITY 4: Quality end of life and palliative care is everyone's responsibility

- Knowledge is increased across the healthcare sector to provide safe, quality care
- End of life care is consistent across the healthcare system
- Healthcare staff are equipped to communicate and deliver the benefits of palliative care
- Organisations actively support their staff in the delivery of quality end of life care

The work of the sub-regional Palliative Care Teams at each end of the region supports clients/carers and specialist and non-specialist Palliative Care staff thus increasing the likelihood that people will die in their place of choice.

The Palliative and Aged and Disability Support Nurses in the Barwon and South West sub-regions provide education on the Palliative Approach Toolkit resources, key processes and clinical care domains. The education is provided to RN's, EEN's, EN's and PCW's aged care and care workers in disability services.

The Palliative Aged and Disability Support Nurses also incorporates the Program of Experience in the Palliative Approach (PEPA) education. PEPA placements are promoted and encouraged at all workshops.

Barwon sub-regional workshop attendance during 2017/18:

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Registered nurses/Endorsed Enrolled nurses/Enrolled nurses	2 workshops	48 attendees
Personal care workers, Disability services	2 workshops	27 attendees
Residential Aged Care Facilities education	12 in-services	144 attendees
Dementia and Palliative Care Workshop	1 workshop	60 attendees
Disability Services Palliative Approach Workshop	1 workshop	25 attendees

South Western sub-regional workshop attendance during 2017/18:

Registered nurses/ Endorsed Enrolled nurses/Enrolled nurses	5 workshops	55 attendees
Personal care workers and Disability services	2 workshops	25 attendees
Residential Aged Care Facilities education	3 in-services	42 attendees
Dementia and Palliative Care Workshop	1 workshop	45 attendees

Education continues to be a focus of the Barwon South Western Region Palliative Care Consortia with the emphasis evolving to focus on the provision of education to also include the generalist providers within the region.

The commencement of a new regional workshop series 'Improving Outcomes in Palliative Care' commenced in 2017-18. The concept is based on previous lectures provided across the region by Barwon Health Palliative Care Consultants. The new series engages presenters from both the Barwon and South West multidisciplinary teams. Topics to date have been Cachexia, Breathlessness, Pharmacology in Palliative Care, MND and Spirituality and many new and exciting topics are being sought for this financial year. The workshops are held in Geelong and Camperdown and aim at supporting the generalist workforce as well as specialist palliative care staff from across the region.

A new model of the Victorian Cancer Council Train the Trainer course was released in June 2018. Two members of Barwon Health Specialist Palliative Care team attended and were accredited for completing the two day training course. The intent is for this new model of Communication skills training in conjunction with the Cancer Council Victoria be provided to staff and managers of Barwon palliative care team initially with the view to extending the training to the regional palliative care staff and generalist workforce across the region.

Regular training opportunities are offered to the staff from Multicultural Aged Care Services (MACS) who provide respite services to community palliative care in the Barwon sub-region. Monthly education sessions are also provided to specialist Palliative Care staff and Community Nurses and have also been open to public and private hospital staff including health professionals in Bellarine Community Health and Colac Area Health. These education sessions are extremely well attended.

A successful monthly education program continues to be provided to Community Nursing teams onsite this financial year. These sessions are provided by various members of the palliative care multidisciplinary team members including Nurse Practitioners, Supportive Care Team and Specialist Community Palliative Care Nurses. Some of the topics this year included Motor Neuron Disease, Hydration and Nutrition at End of Life, Glioblastoma, Pain Management and SOS medications, and Talking about Death and Dying, Terminal Restlessness and Cachexia.

In conjunction with the Primary Health Network, South West Healthcare provide a variety of education sessions on a regular basis for specialist and non-specialist staff from South West Healthcare, Portland District Health and Western District Health Care.

The Motor Neurone Disease (MND) Shared Care Worker for Barwon South Western Region provides education across the region to GP's, Specialist Palliative Care, Community Nurses and Residential Aged Care staff on the assessment and management of symptoms associated with MND.

MND workshops are offered regularly across the region, Colac had approximately ten attendees from Community Palliative Care, Community Nursing, Pharmacology, Harp and Allied Health. Warrnambool held a session in June with 45 attendees, consisting of doctors, Occupational Therapists, Social Workers, Volunteers, RNs, ENs and PCA's in aged care from specialist palliative care and the generalist workforce.

Bruno, an Australian born man of Italian decent was diagnosed with Motor Neuron Disease in 2015. Husband to Vivien and father to two young adult sons, his disease forced him to take early retirement from his very successful fruit and vegetable business. He retired to his holiday home in Torquay.

An active sportsperson, Bruno had played soccer for Australia in his younger years and had maintained his strength and fitness by body building. Therefore, such a debilitating diagnosis left him with many questions regarding death.

When Bruno was first referred to Community Palliative Care he was deeply worried about his disease and its progression. He expected Palliative Care to provide him with assisted dying and on learning this wasn't their role he declined the service. However a re-referral to the Community Palliative Care team six months later opened up renewed interest in the services available to him. Gianni accepted referral to the Supportive Care Team and it was at this point he learned of Dignity Therapy a process he later described as a "magical experience" and "I discovered a will to live longer". Bruno expressed his experience in a video filmed later stating the process had brought him a measure of peace as he approached his final months.

Bruno received support from a number of the palliative care multi-disciplinary team who worked together to assist in addressing his physical symptoms, his existential distress and concerns regarding his wife and sons.

Bruno died at home with his wife, sons and much loved dogs in July 2018.

A link to his video is available here: https://www.youtube.com/watch?v=SM A5q6ucpE

The story above of Bruno is an example of the patient centred care provided to patients and their families receiving palliative care services in our region. The multidisciplinary team provided well-coordinated services to meet the individual needs of Bruno, his wife Vivien and his two sons. Dignity Therapy gave Bruno back some control and improved his quality of life.

PRIORITY 5: Specialist Palliative Care is strengthened

- Models of home-based care are effective and efficient
- The specialist workforce is used effectively
- Specialist palliative care is accessible locally

Regional service planning is aligned with the Service Delivery Framework and supported with a signed memorandum of understanding between all the consortium members listed below.

- Barwon Health
- Colac Area Health
- Bellarine Community Health
- Western District Health Service
- South West Healthcare
- Portland District Health

Specialist palliative care community services are placed in appropriately sized population centres across the region, see the list above.

Inpatient Palliative Care Beds are located in the following centres:

Barwon Health, South West Healthcare, Portland District Health Service, Colac Area Health and Western District Health Service

Regional Palliative Care Consultancy Team: Each team is made up of specialist palliative care medical, nursing and/or supportive care staff. One team is located in the South West sub-region and supports the palliative care services at Portland District Health, Western District Health Service and South West Healthcare. The other team is located in the Barwon sub-region and supports the Palliative Care services at Colac Area Health, Bellarine Community Health and Barwon Health. The recurrent growth funding will support the inclusion of a Nurse Practitioner as part of the Regional Palliative Care Consultancy Team. This role will strengthen specialist and generalist workforce by providing mentoring, education, service development and support to the Barwon sub-region.

The PCCN-SCV consortia representative is a co-Director of Palliative Care at Barwon Health and acts as a conduit between the services, and the consortium. A PCCN-SCV report is a standing agenda item at all consortium meetings, clinical leaders meetings and palliative care practitioners' group meetings. The consortium representative is in a position to table issues raised within the region to the PCCN-SCV for review.

Palliative Care service delivery is consistent and evidence based in the region. The work plan of the Clinical Leaders Group has ensured regular review of the ongoing validity of the evidence based clinical tools used by palliative care services across the region and this is a standing item on the Clinical Leaders Group meeting agenda's.

The Clinical and Advisory groups are combined in the Barwon South Western region. The Clinical Advisory (Clinical Leaders) group role statement, terms of reference, membership, meeting format and frequency are reviewed annually. The format is a mix of standing items and continuing work on

issues supported by the PCCN, meetings are quarterly. The Agenda standing items are based on the following principles:

- Consortium decisions will be based on good clinical practice
- Facilitate collective problem solving in the implementation of Victoria's End of Life Care and Palliative Care Framework
- Develop resources that promote good clinical practice
- Report on issues raised by the Palliative Care Clinical Network

The region also has a Palliative Care Practitioners Group which meets three times per year. This group is supported by the consortium and provides an opportunity for broader discussion by staff from all disciplines of issues arising in palliative care more generally, the palliative care software in use in the region, educational opportunities for staff and any specific issues from each of the palliative care services in the region.

All consortium meetings are face to face and held centrally in Camperdown Hospital.

The region is engaging in capacity building projects supported by funding from the Infrastructure and Equipment Grant received in 2017. Telehealth capability is being utilised and further developed for use in the Cachexia Clinic at Barwon Health to ensure equitable access to specialist palliative care staff for this patient cohort.

A pilot project exploring the value of Personalised Health Care in supporting Community Palliative Care patients was conducted during 2016/17 financial year. The outcome of this pilot is that Personalised Health Care will be implemented as an additional means of monitoring and supporting appropriate patients in the low and stable phase.

Data was collected from a snapshot of a three months period on "preferred place of death' versus 'actual place of death' for palliative care patients in the region.

The results from the six palliative care services in our region are:

