"No specialist and no out of hours service!" - Audit and experience of end of life care in a rural Australian hospital

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Introduction

Australians, especially Indigenous Australians living in rural areas are disadvantaged in accessing palliative care compared with those living in urban areas, with a lack of specialist input affecting the quality of palliative care provision in rural areas. There is little evidence to inform palliative care policy and service developments in rural settings.

Kempsey District Hospital is a local community, rural hospital within the Mid North Coast Local Health District, in New South Wales, Australia. It serves a population of 30,000 people over an area covering nearly 4,000 square kilometres. The fastest growing age group in Kempsey are over 65’s and this group is projected to increase, making 30% of the total population. Indigenous Australians make up 13% of the population in Kempsey compared with 3% of the total Australian population. Kempsey has an Index of Relative Socioeconomic Disadvantage (IRSD) score of 880, placing it in the most socioeconomically disadvantaged areas in the country.

Current palliative care provision consists of a specialist nurse led consultancy service, a monthly satellite clinic from Sydney, no designated inpatient beds and no after-hours telephone support service or weekend service. There is no specialist physician cover. Local GP’s estimate that 40% of palliative care patients require end of life care in a hospital.

Our aims were to audit end of life care practice compared with state guidelines and assess staff opinions on hospital inpatient end of life care.

Methods

A retrospective casenote review of all in hospital deaths between July and December 2014 identified via coding.

A 9 question survey was distributed to all staff involved in direct and clinical patient care and completed anonymously.

Results - Audit

- 8% of patients Indigenous Australian
- Diagnoses – 11 malignancies (85%), 3 subarachnoid haemorrhage, 1 sepsis

Results – Staff Survey

- Nearly 70% of Nurses reported a new end of life care pathway was required.
- 85% requested more education and support in palliative care practice.

Conclusions

- This group of patients have a diverse range of conditions requiring end of life care.
- A redesigned end of life care pathway is being introduced to improve standards not currently being met. (See below)
- Our findings highlight the need for developing innovative educational programmes on end of life care for rural nurses, & video conferencing is being explored as a means of delivery.
- Lack of out of hours & specialist support are recognised barriers to rural palliative care.
- In response to the current lack of specialist service in Kempsey, locally designed and tailored educational programmes are being developed aimed at strengthening current hospital and community expertise.

References