

BALLARAT HOSPICE CARE INCORPORATED & THE BHS RENAL PROJECT

The prevalence of end stage renal disease (ESRD) is rising 7% a year in developed countries worldwide. Diabetic Nephropathy is now the most common cause of primary renal disease. The over 75 year age group is the fastest growing incident population, often with multiple co-morbidities. There is increasing evidence that suggests the elderly with multiple co-morbidities do not benefit from dialysis. This group are more likely to benefit from conservative medical care, including advance care planning, effective pain and symptom management, functional support for daily living and psychosocial and spiritual support. (Chambers, Brown & Germain, 2010)

Integrated Renal and Palliative Care Project:

Background:

In January 2009, awareness was raised around poor outcomes for patients with ESRD requiring end of life care. Ballarat Hospice Care Incorporated (BHCI) received initial feedback from patients, carers and staff (renal and palliative care) around gaps in delivery of end of life care and planning for patients who are either ceasing dialysis, not commencing dialysis (conservative medical treatment option), deteriorating despite dialysis or patients with a dual diagnosis, for example cancer.

Project Objectives:

- To improve outcomes for patients with ESRD at end of life and their families/carers.
- To improve collaboration with renal and palliative care providers
- To integrate palliative supportive care early in the disease trajectory on a needs basis, including advanced care planning.

So what did we do?

BHCI applied and secured funding through The Ballarat Foundation to fund a palliative care nurse to commence preliminary project work to identify and address the identified issues. A preliminary literature search was undertaken on the link between quality of life and patients with ESRD. BHCI networked with key players locally, metropolitan and interstate. BHCI and Ballarat Health Service's (BHS) Dialysis Unit began working collaborating and building on relationships. A working party was established. BHCI and BHS funded the pre dialysis co-ordinator, a dialysis nurse and a palliative care nurse to attend the Advance Care Planning facilitators program - "Respecting Patient Choices" at the Austin Hospital.

Outcomes:

A proposed implementation plan was developed to integrate the palliative care approach across three identified areas- pre-dialysis, dialysis and post dialysis. Also, a pilot referral algorithm was developed on a needs basis at any stage of the ESRD trajectory. A shared care model was also implemented resulting in regular multidisciplinary meetings. There is also a commitment to undertake cross speciality training between renal and palliative care providers. Most importantly there are improved relationships between renal/palliative care physicians, nursing and allied health staff across the two organisations.

Where to from here?

It is recognised that this project is in the first stages of a process that requires more development in terms of implementation for practice. However the plan is to integrate a renal palliative support pathway with an identified sustainable system, resulting in a collaborative approach to clinical care and improved outcomes for patients and families. Further research into quality of life for patients commencing a renal palliative support pathway would be a priority. There are also plans to implement a pilot study on quality of life tools for identifying patients' needs for palliative care.

This project has been presented at the Victorian Renal Nurses Conference in October 2010 and an abstract has been accepted for the Renal Society of Australasia in Adelaide, June 2011.

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NURSE TRAVEL SUPPORT GRANTS

The Australian Lung Foundation's Australia New Zealand Lung Cancer Nurses' Forum (ANZLCNF) is pleased to announce that three travel support grants of \$500 each will be awarded to send nurse representatives to Sydney to attend the 14th Cancer Nurses Society of Australia (CNSA) Winter Congress on 21-23 July 2011.

These travel grants will support up to three nurses who have a specific interest in lung cancer/mesothelioma, from within Australia, to attend this national conference which includes a half day lung cancer workshop.

It is the intention of this funding that the successful grant recipients will increase their knowledge and understanding of lung cancer, and establish new networks with nurses within the Australian lung cancer nursing community.

The successful grant recipients will be required to attend a half day lung cancer workshop on Thursday 21 July 2011 which will deliver informative sessions on the latest in lung cancer research, treatments, symptom management and supportive care.

Applications close on Monday 6th June 5pm (EST)

For more information please contact Kerrie Callaghan on 07 3251 35641.

<http://www.lungfoundation.com.au/our-initiatives/travel-grants-cancer-nurses>

DIARY DATES – SPECIAL INTEREST GROUPS

Palliative Care Grief and Bereavement Special Interest Group

Thursday 9th June

Thursday 11th August

Thursday 13th October

Thursday 8th December

Contact: Kathy Wells - kathyw@griefline.org.au or kathyw@bethlehem.org.au

Palliative Care Day Centres Special Interest Group

Wednesday 6th July

Monday 14th November

Contact: Margaret Mudford - margaret.mudford@svhm.org.au

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