

CLINICAL COORDINATOR'S REPORT - AGM 2016 / 17

Our core business remains the same in the provision of high quality, compassionate and flexible palliative care in the home. Our quality nursing staff of Carolyn, Christine, Georgie, Gen, Kathy, Kelly and Narelle were joined by 2 very palliative qualified and experienced community nurses in Amy and once again, a gentle man, Gary. This very capable, compassionate and caring team of nurses continued to very ably offer the care and support required to have allowed 57% of our patients to die in the peace, privacy and comfort of their own homes. For those who chose hospital as their preferred end of life option, 32 of the 54 people did so anywhere from less than an hour to 5 days. We also offer support and care to quite a few single people who don't have a carer, that then requires admission to hospital for their final cares if they haven't been admitted to an aged care facility.

Lisa our social worker assists many of our patients to make their way through *myagedcare.com.au* to source care packages and get approval for aged care facility admission if that is a chosen option plus seek carers' pensions and allowances and also help with advanced care planning. Lisa and Sally give plenty of time and caring attention to their bereavement clients with quite a few of those sadly, being children. During the year they have supported 225 individuals during their passage of grief.

Sue has been focusing on better funding for our service. Since the full introduction of My Aged Care as the portal for aged care services plus the requirement to have advanced health planning in place there has been a greater need for LH nurses and Lisa to spend unfunded time assisting patients and their carers to complete the increasing burden of paperwork. Often hospital or GP referred patients do not have any of this planning in place. LHPC is the only nursing service offering palliative care at home in the Gympie region. Unfortunately, there are increasing requests for equipment loan for people living in Goomeri, Tiaro etc who wish to be cared for by LH but our boundaries cannot stretch like our admission numbers swell as required. We endeavour to get some palliative funding from SCPCS for the very final stage of home care, DVA patients and those privately insured with the Home Support Service.

Maintaining a stable workforce has been challenging at times with Sue away earlier this year plus the flu visiting most of the staff. Add to this the nurses away on leave at times it becomes a tight balancing act, especially when we are on high demand. To help our staff remain physically, emotionally and mentally strong we encourage them to take time out to utilise the complementary therapies (CT) on offer. Our therapists are very valuable volunteers who are now racking up many years of service to LH. The therapies they offer to patients, carers, family, bereaved, volunteers and staff is invaluable in helping all to their best health status and optimal QOL.

Art therapy is one of our newer options that is giving amazing results from young children to 80 + adults as it gently allows unrecognised emotions to surface, to be dealt with in a safe and therapeutic way by Cathy, the therapist. Our other new therapists are Jan who offers ReConnective Healing, Cate with Reiki and Jennifer who comes monthly to do Healing Touch.

As per the recommendations for good palliative care, meeting people earlier rather than later in their disease trajectory allows time for our nurses to form a therapeutic relationship that helps in knowing when extra support and assistance is required and when symptoms are starting to change. Encouraging the use of CT has helped extend and improve the QOL of many of our patients and families as well. Our focus of care and support is always on getting the most out of life and being mindful of preparing for death is just a part of that living experience.

As always, the measure of our service is assisted greatly by the very timely, free and flexible services of Vinnies. These volunteering men do terrific work in putting together or pulling apart the beds, often in difficult situations and sometimes needing to dismantle other beds etc. They also lift the heavy recliners up and down steps if not on wheels. They do all of this with big smiles and open hearts, being always mindful of the grief evident in the patient's home.

Our clinical support volunteers who play such an important role are Fran's group of long standing, dependable and worth their weight in gold respite workers and chemotherapy and renal support volunteers. This is a very valuable part of the holistic care we offer to GGH, our patients and families. As we see an increasing number of patients without carers on our list at any given time, allocating a respite volunteer goes a long way to filling in the gaps of care due to the lengthy delays experienced in getting other services. These magnificent volunteers help them out in so many ways and then continue to provide support and caring during the bereavement phase for those with families.

In the office the nurses just could not manage the flow through of equipment and cleaning, home boxes needing restocking, charts being put together or prepared for filing, provision of information folders and keeping a supply of necessary forms, answering phones, meeting visiting patients and carers with a smile, a cuppa and often homemade treats, plus keeping the whole centre sparkling and inviting. To these wonderful band of quiet achievers, I give my deepest gratitude and thanks for all they do so efficiently and effectively. Their assistance is exceptional, just like all our volunteers and staff who go about their work thinking of others and not themselves.

Our Gympie region is truly blessed for continuing to support our service over the years as they are the ultimate beneficiaries of an exceptional palliative care service.

In much gratitude,

Bronwyn McFarlane - Clinical Coordinator