

Palliative Care

V I C T O R I A

Specialist health care and practical support

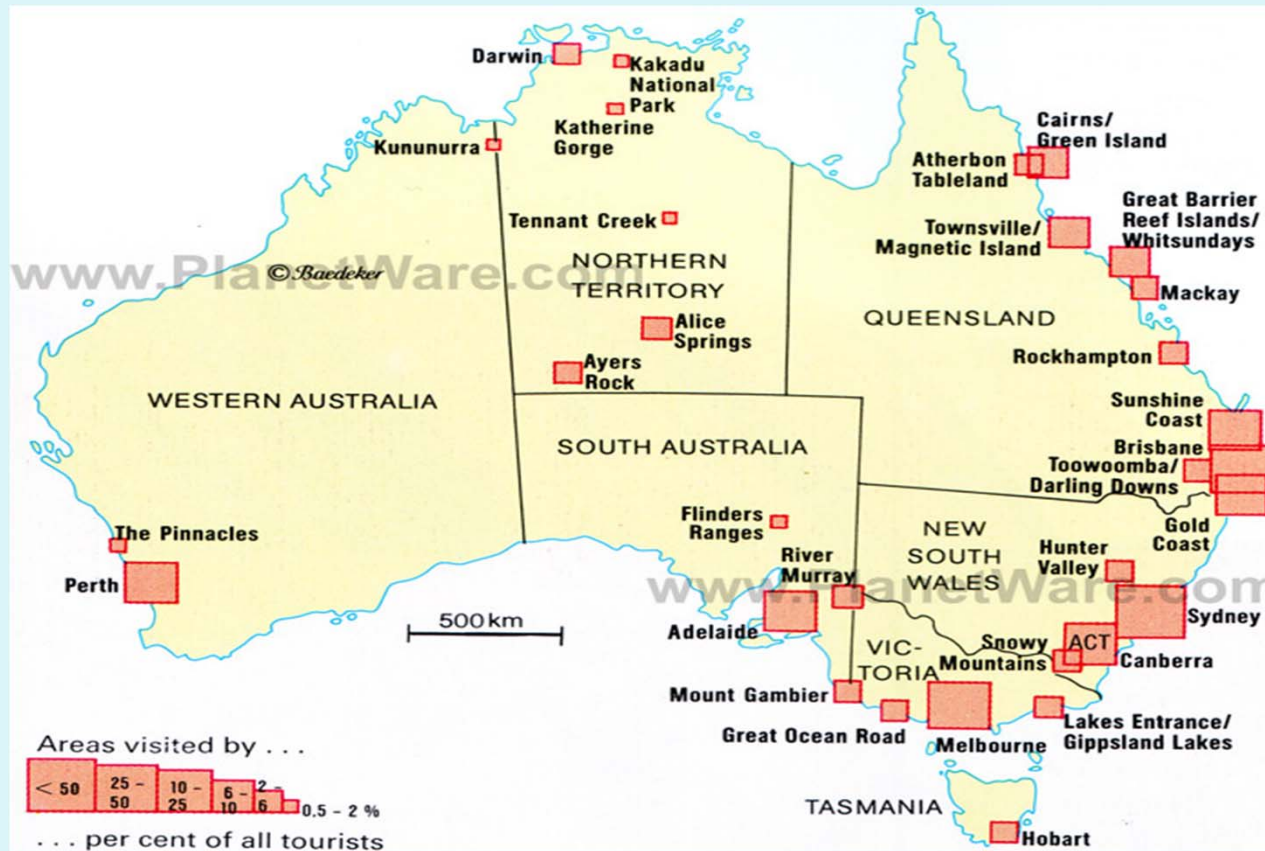
Development of an Australian Palliative Care Volunteer Strategy

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2011

Key Presentation Elements

- Churchill Fellowship
- Overview of Australia and Victoria's palliative care provision
- State of the nation -palliative care volunteers 2010
- National Palliative Care Volunteer Strategy 2011-2014
- Future collaboration
- Questions



AUSTRALIA 2010

Population	Australia	22.2 million
	Victorian	5.2 million
Area	Australia	7.6 mill. sq kms
	Victoria	227,600 sq kms



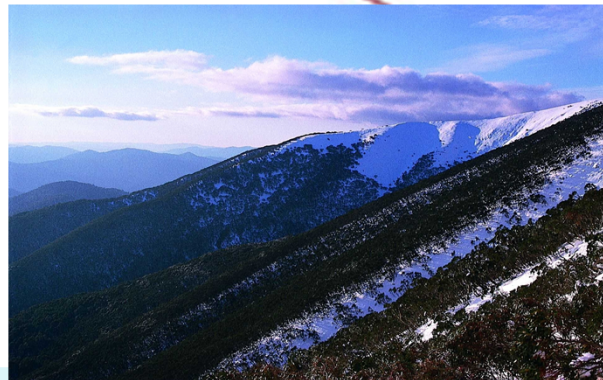
Australia



Rural City of Wangaratta



Victoria









Black Saturday



Brisbane Business district 2011



Cyclone Yasi – Queensland





Volunteering with palliative care in the Hume Region of Victoria, Australia



It's more than you might
think!

Specialist palliative care teams provide support to people living with a life threatening illness. This includes their families and carers.

Benalla Home Nursing Palliative Care Team



Trained Family Support Volunteers are a part of this care team.

Family support volunteer roles are varied. Following training they may:





Provide practical and emotional support with families in their home



Drive people to appointments or for a social outing





**Listen
Reminisce**

**Read the paper
Play games**



Visit with people living in aged care homes



Provide hand and foot massage



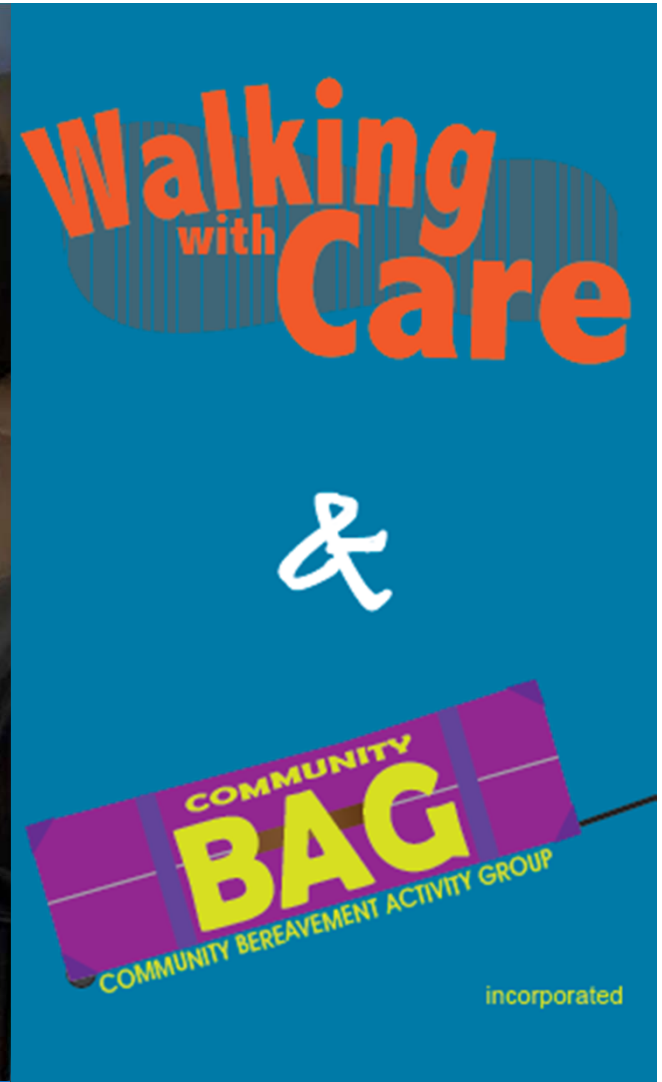


Provide a memoir service



Help out with bereavement craft groups





Help out with bereavement activity or walking groups

Help organise opportunities for community members to talk about end of life issues



Café conversations on death, dying, grief and palliative care

Assist with activities that promote death and dying as a normal part of community





**Assist with organising public spaces
that honour community loss and grief**



Participate in
research
projects on
end of life care

Learn skills and information , network with others and share ideas

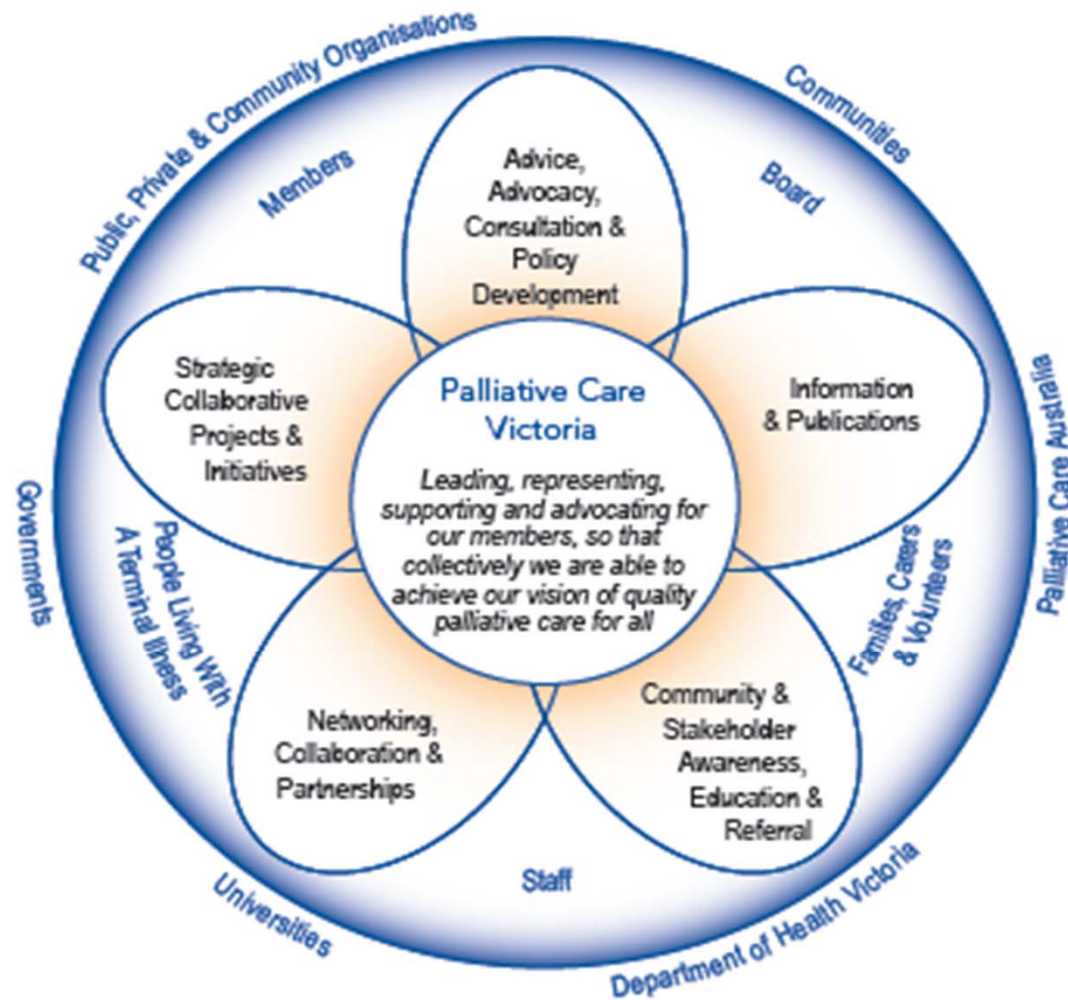


Winston Churchill Fellowship

- Australian Churchill Fellow 2010
- Dr Dorothea Sandars & Irene Lee Churchill Fellowship
- Project Aim
- Key components
- Site visits



PCV Core Business



Background - Victoria

- \$90 million PA- (Top up 34.4 million over 4 years)
- 39 community palliative care services - 7 metro / 32 rural
- 264 palliative care beds - 60 in rural/ 204 in metro
- 17 Consultancy teams - 12 metro / 5 rural
- 6 State-wide services
- 4 funded academic units
- 2 privately funded services & 2 community initiatives
- 8 palliative care consortiums

Background Australia

- Palliative Care Australia , 1990
- 180-200 specialist palliative care services (Levels 1-3)
- In 2008 - 143,946 deaths. $\frac{3}{4}$ could have been expected. 36,000 could potentially be palliative clients
- In 2008 deaths were- Cancer 30%, heart and circulatory disease 34%, end stage organ failure 12%, dementia and Alzheimer's 6%
- Currently most people receiving palliative care have cancer (e.g.85% Vic, 2008/09)
- 90% spend most of their time at home but approx 70 % die in an institution(PCA 2004)

Background Australia (cont'd)

- 16% die at home, 20% in a hospice, 10% in a nursing home and the rest in acute care hospitals, emergency departments, intensive care units www.caresearch.com.au
- Residential aged care deaths
 - By 2020 half of all deaths will be in RACF
 - Currently 1/3 die in first 6 months and 61% in first year admitted
- Aboriginal life expectancy 17 years less than non aboriginal
- Ethnic communities not well catered for

Australia is ranked second highest in the world
on the
International Quality of Death Index 2010



3 forms of palliative care

- Palliative Approach
- Specialist palliative care
- End-of-life care



Current policy influences- Palliative Care

- National Palliative Care Strategy, (Com .of Aust(2011)
- Standards for Providing Palliative Care for All Australians, PCA(4th ed.2005),
- A Guide to Planning Palliative Care Service Development: A Population Based Approach, PCA, 2005
- Health System Reform & Care at the End of Life; A Guidance Document, PCA, 2010

Current policy influences- general

- National Health & Hospitals Reform (spotlight on EOL) -2010
- Productivity Commission Inquiry into Caring for Older Australians (2011)
- National Volunteer Strategy (2011)

State of PC Volunteers in Australia: 2010

- Limited national data
- Volunteer importance recognised in the National PC Standards, Planning Guidelines, NSAP, National Palliative Care Strategy
- Inaugural National Volunteer Strategy
- No consistent national palliative care volunteer standards or training
- Little networking or linkage between states. 'Reinventing the wheel'
- Little past research
 - 'Volunteers Contributing to a Palliative Approach in Aged Care'
 - CCP 'Volunteer & Bereavement Support Networks'

Victorian PC Volunteer Data

2005 DH labour force survey

- 1490 vols compared to 986 paid staff(headcount)
- EFT 164 vols to 577.2 paid staff
- 72% > 60 years. 86% female. Most Anglo-Saxon
- Volunteer Coordinators made up 3% of the overall sector FTE (equal to medical specialist & pastoral care)

Victorian PC Volunteer Data

2007 DH Survey of 'active' palliative care volunteers with 'direct' contact with clients

- Response rate 79%
- 97% has a designated manager
- 3 times more volunteers in the community
- Average length of time with palliative care between 1-5 years
- Most common activities- companionship(72%), respite support(49%), assistance with transport(49%)
- Palliative Care Volunteer Survey Findings, , Victorian Department of Human services, 2009

Current Victorian PC Volunteer Data

2010 Survey Questions

1. What is the number of palliative care volunteers currently registered within your organisation?
(includes BOM, admin, fundraising etc.)
2. Of these what number directly support clients?
(telephone or face to face)

Survey Results

- 54 palliative care volunteer services(39 PC services)
- 1730 registered palliative care volunteers,
of these 1329 provide direct client support

No of registered CBPC Clients

- In 2008/09 community palliative care services
cared for 8,547 clients

National PC volunteer development

- Managers of PC Volunteers Networks/linkage to state volunteering peaks
- Incorporate into state palliative care policy- Victoria, 2004
- Research -*Building Rural Community Capacity through Volunteerism*, HPPC,(Young, Salau, Clarke 2005)
- Victorian Palliative Care Volunteer Standards & Templates (2007,DH)
- PCV volunteer briefing paper to PCA, 2007

National PC volunteer development

- PCV Volunteer Training Resource Kit (2008)
- 2010 First national Managers of Volunteers planning meeting
- 2010 – 2011 palliative care volunteer research projects
 1. Cochrane review- Monash and LaTrobe Universities Collaboration (Melbourne)
 2. Self-care - Flinders University ,SA
- 2011 National Palliative Care Volunteer Strategy submission

Key reasons for a national strategy

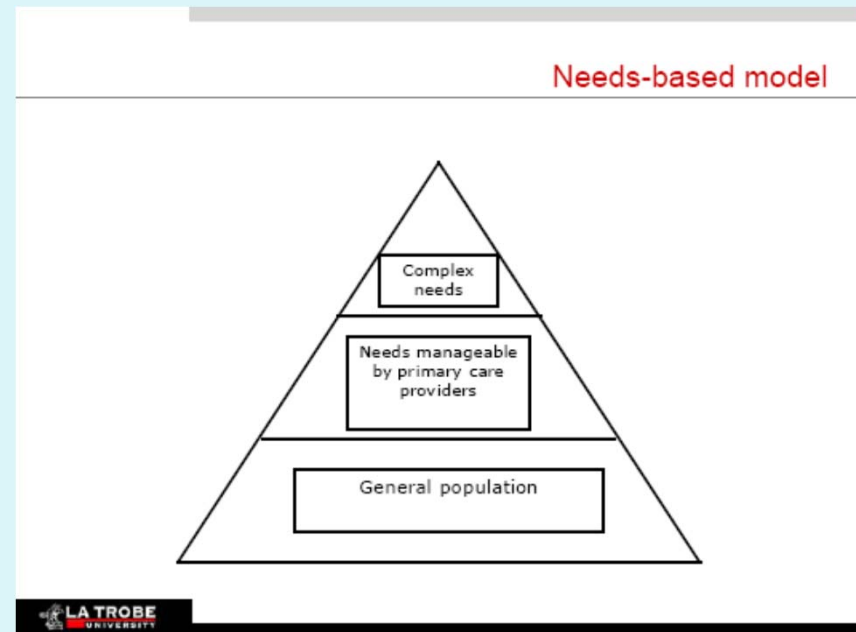
- Volunteers are an essential component of PC
- Volunteers are possibly the highest staffing component
- PC volunteers work with some of the most vulnerable
- Increasing demands on palliative care (Vic. 4.6% pa)
- More people living alone without a carer
- Patterns of volunteering changing

National strategy components

- National Palliative Care M of V Network
- First national palliative care volunteer service data collection
- Systematic review of literature- use of volunteers in palliative care
- Companion guide to the *Australian National Palliative Care Standards*- reflects all aspects of best practice palliative care volunteerism
- Nationally consistent competency based education & training framework for palliative care volunteers

Australian Considerations 'Needs Based Model'

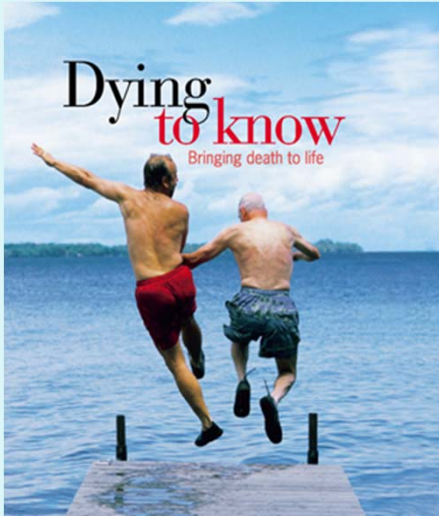
- Where do palliative care volunteers fit?
- What do the community want/need?
- Community Capacity Building



Opportunities

- Recruitment & retention strategy
- Pastoral care volunteers
- Aged care
- Ethnic communities
- Community Capacity Building/engagement
- Community development approach- mentorship
- Baby boomers
- Younger volunteers
- Corporate
- New illnesses

Community Capacity Building



Pilotlight

‘as citizens, people are capable of self-help &, as in other stages of their life aside from death, are able to call upon & use the resources of support, information & power inherent in their communities’

A. Kellehear, *Compassionate Cities*, 2006

‘...enhanc[ing] a community’s capacity to share the responsibility for dying, loss and palliative care in partnership with formal, professional care’

Palliative Care Australia, 2005

Victorian Health Promoting Palliative Care Projects

'Building rural community capacity through volunteering' (2002-2005)

Hume Regional Palliative Care , Ovens & King Community Health Service, Wangaratta

Contact : Barbara Young youngb@ovensandking.org.au

'Strengthening Palliative Care in Victoria through Health Promotion' (2007-2011). LaTrobe University Palliative Care Unit

Contact: Dr Bruce Rumbold, b.rumbold@latrobe.edu.au

Learning from others

- Build a culture of collaboration
- Build an evidence base and outcome measurements
- Learn from/ and develop innovative models



‘Volunteers remind us that care is not a commodity,
a professionally delivered prescription against known problems
of a “service user”;

it is a partnership that we create together as individuals,
communities and societies.’

Barbara Munro
St Christopher’s Hospice, 2009

Questions ?

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