

Improving the Nation-wide outcomes for children and families supported by Paediatric Palliative Care:

A National Quality of Care Collaborative



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AIMS

To promote high quality PC provided to children in close proximity to their home through education initiatives, evaluation and research.

Australia's geography and population distribution requires innovative methods of delivering paediatric palliative care.

The Quality of Care Collaborative – Australia (QuoCCA)

Delivering Paediatric Palliative Care (PPC) received funding in 2015

Methods

Mixed methodology study. Phases:

- 1. Baseline learning needs/capability
- 2. Educational initiatives and evaluations (Impacts)
- 3. Consumer & Health Clinician Engagement (Perspectives)

Participants

Health care professionals, (medical, nursing and allied health) and parents /carers who supported children requiring palliative care (from rural, regional and remote settings)

NATIONAL BASELINE DATA

- On-line survey
- PPC CapabilityTool (PPC- CT) for health professionals (based on Chong, et al, 2015)
- via networking
- Repeat in 10 months 178 participants completed

IMPACTS

National Pop-Up trial
Build local capacity provide 'in
time training' & patient-centred
training via:

- Telehealth
- Case consultsCommonwealth Target 42

IMPACTS

Scheduled workshops in regional/rural centres;

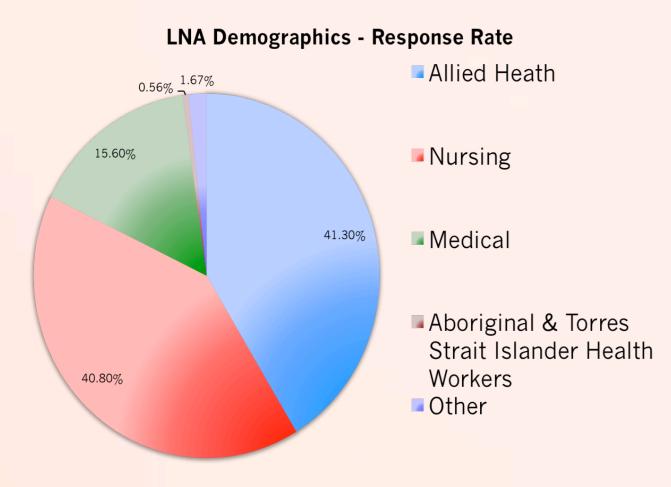
Targeting learning needs; interdisciplinary concepts

Commonwealth Target 36

RESULTS

(at 13 July 2016)

117 sessions
2292 participants
PPC-CT results: many
capabilities requiring further
assistance in the initial,
supportive and end of life
phases.

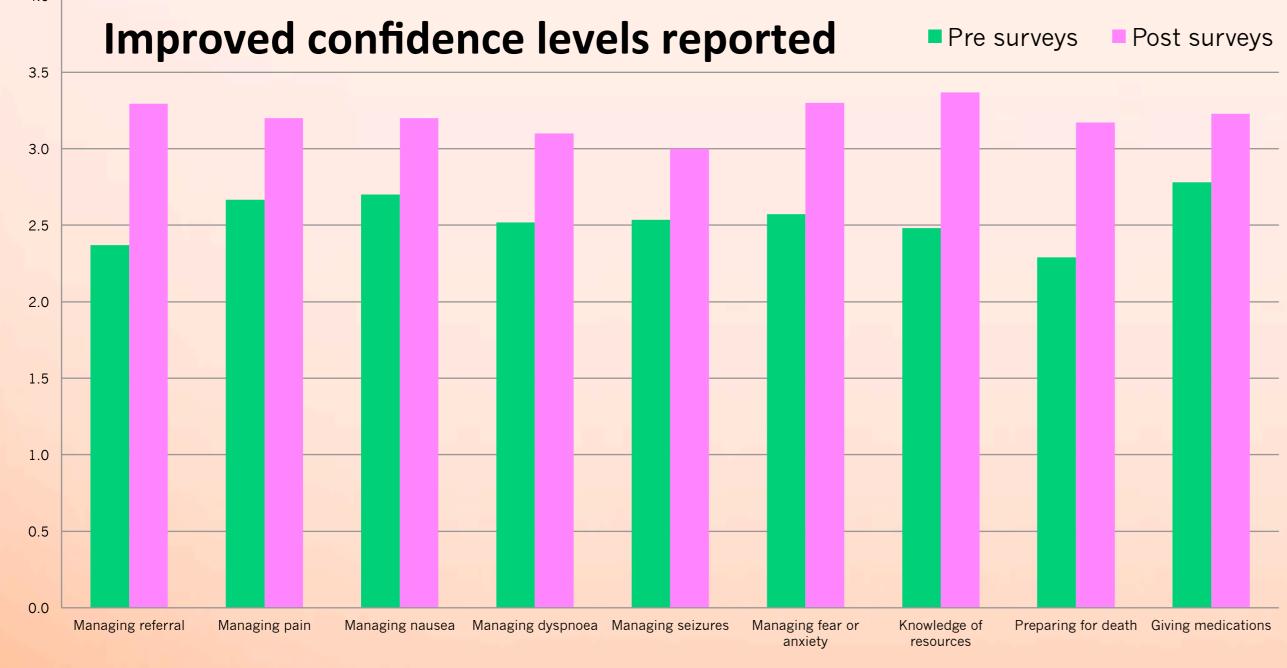






QuoCCA LNA	Chong, Hamsah & Goh LNA (2015)
Preparing families for the death of their child	Care of central lines
Management of the dying child	Bereavement care
PPC resources	Psychosocial support
Communication skills	Provision of CALD information
These findings are indicative of the larger and more diverse participant group.	

Total average pre & post education responses (n=734)



Perspectives

- Discovery Interview methodology (Ethics Approval)
- Families, Health Professionals & Clinical Educators
- Trained interviewers
- HREC approval & a small number of interviews completed with Health Clinicians/Educators.



Conclusions or Future Outcomes

- LNA and PPC-CT results will influence areas for further development (education modules & supervisory supports).
- On-line surveys access from remote settings may be limited.
- Collaboration of PPC services providing education in a planned & coordinated way shows promise in increasing National capacity for PPC
- Consumer feedback will inform future education initiatives
- Thereby assisting to achieve the goals of the National Palliative Care Strategy 2010.
- LEGACY: Website / iPhone app / Education modules

Acknowledgements

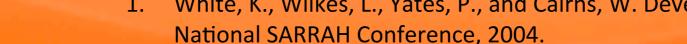
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QuoCCA team members include - Lady Cilento Children's Hospital - Brisbane, Sydney Children's Hospital - Randwick, Princess Margaret Hospital for Children - Perth, Royal Children's Hospital - Melbourne, John Hunter Children's Hospital - Newcastle, Women's and Children's Hospital - Adelaide.



References

1. White, K., Wilkes, L., Yates, P., and Cairns, W. Development of a model for palliative care in rural and remote communities: 'pop-up model'.



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 Chong P.H., Hamsah E., Goh C. Paediatric palliative care in the Asia Pcific region: where are we now? BMJ Supportive & Palliative Care 2015. 0: p1-6.



