



Partnering – The key to
successfully supporting
people to die at home
or
remain at home for as long as
possible.

**Partnering -
Hunter New England LHD,
Mid North Coast LHD,
Northern NSW LHD and
Silver Chain working together.**

Kath Skinner (Director Palliative Services NSW)

Michelle Powell (GP Engagement Manager – Regional NSW)

Scott Handsaker (Clinical Nurse Consultant Manager – Mid North Coast)

Clare Warren (Clinical Nurse Consultant Manager – Hunter New England)

Helen Adams (Clinical Nurse Consultant Manager – Northern NSW)

Overview of presentation

- About Silver Chain
- About the Last-Days-of-Life Home Support packages in Regional NSW
- Case study highlighting successes

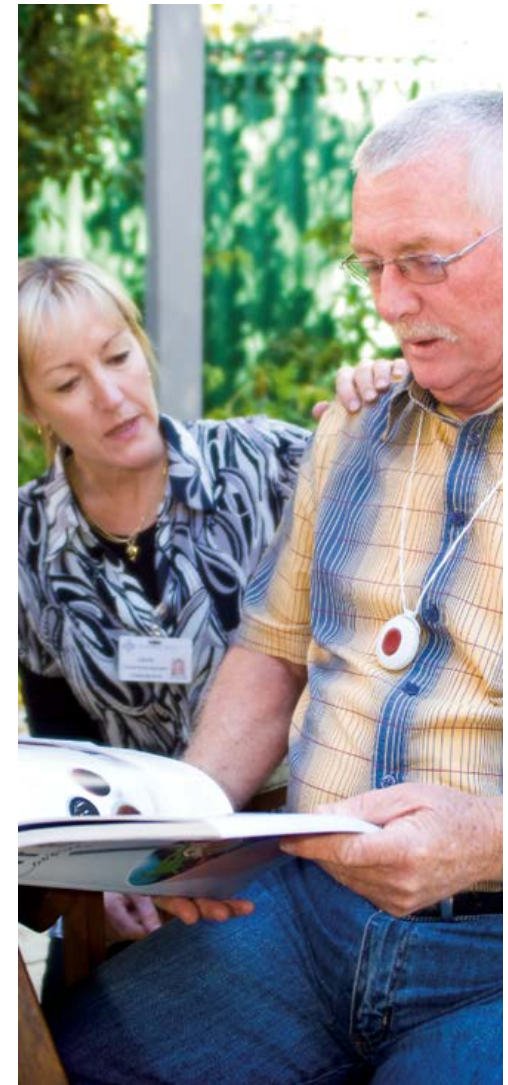
About Us



 **Silver Chain**
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Focused on being safe and taking time

- We take our time with our clients
- We don't rush
- We have a strong focus on self care

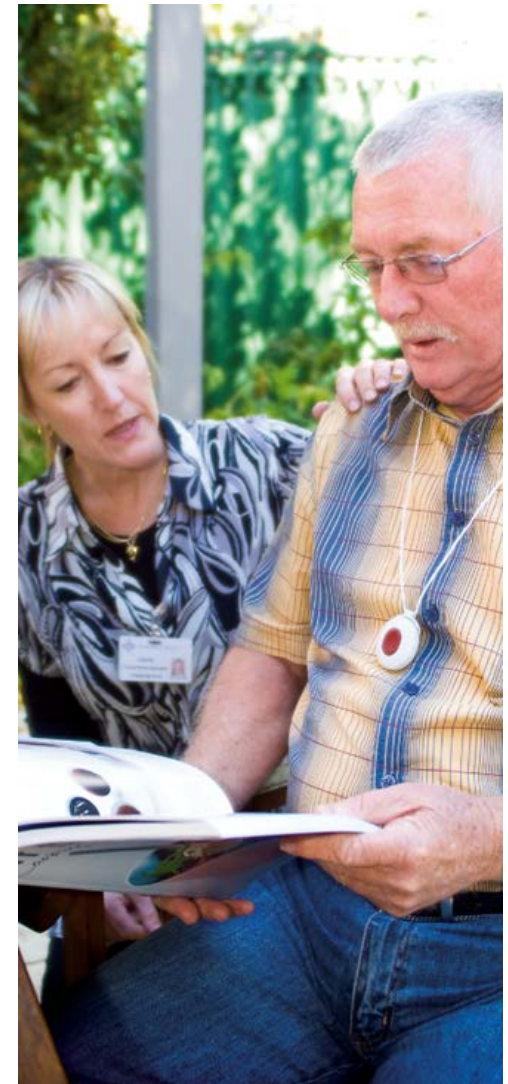


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We are a disciplined organization Focused on providing quality care

- We are passionate about health and wellbeing per \$ invested
- We focus on working efficiently and smarter
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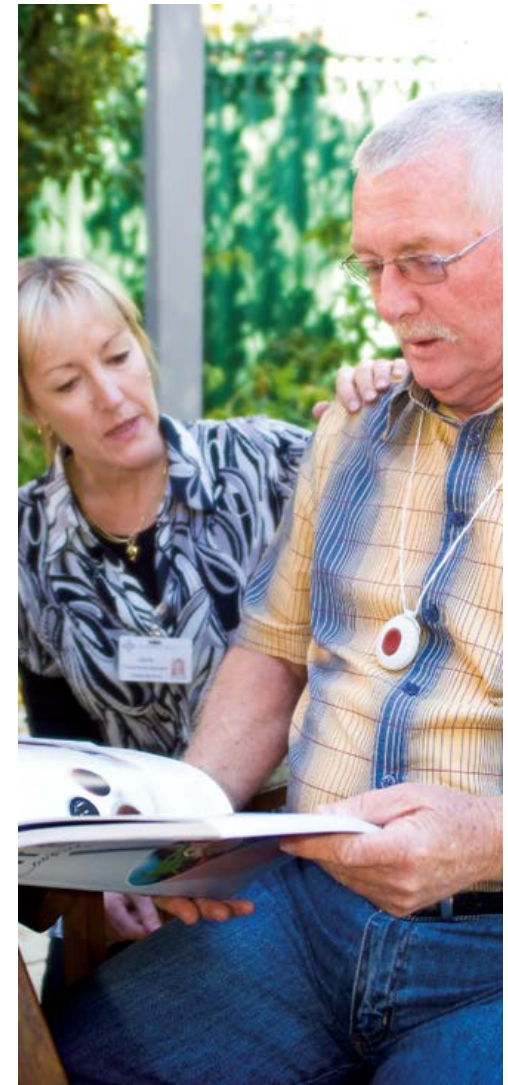
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We have fun

- Enjoy every minute
- Care about each other - Camaraderie
- We are proud of the work we do and working for Silver Chain



Enabling technology

- **24/7 Contact Centre** (120 seats in two States)
 - Enquiries, screening, referrals, centralized administrative tasks
- **Smartphones**
 - Direct care staff
 - Patient records, carer details, GP, rounds and rosters, timesheets, messages, clinical information, alerts, WHS info
- **Telehealth**
 - Client Device (iPad like tablet)





About the Last-days-of-life Home Support packages



NSW Palliative Care

Last-days-of-life Home Support Services

- 1 week long 'Packages' of care
- Prognosis days to weeks
- All diagnoses
- All ages
- Clients can access more than 1 package
- Shared model of care
- Palliative Care Teams/GPs retain medical governance
- No cost to clients – Fully funded by NSW Ministry of Health
- ***“No Wrong Door”***

NSW Palliative Care

Last-Days-of-Life Home Support Services

LHD CH Specialist
Palliative Care team
5 to 7 days per week
(8:00 to 5:00 +/- AHs)

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- Personal Care for client
- Respite for carer/family

7 days (8:00 am– 3:30 pm)

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SC Palliative Care Registered Nurse

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SC Palliative Care RN 'On Call' 7 days 11 pm – 8:30 am

- **Telephone /Video Support**

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General
Practitioners

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Last-Days-of-life Home Support Services**

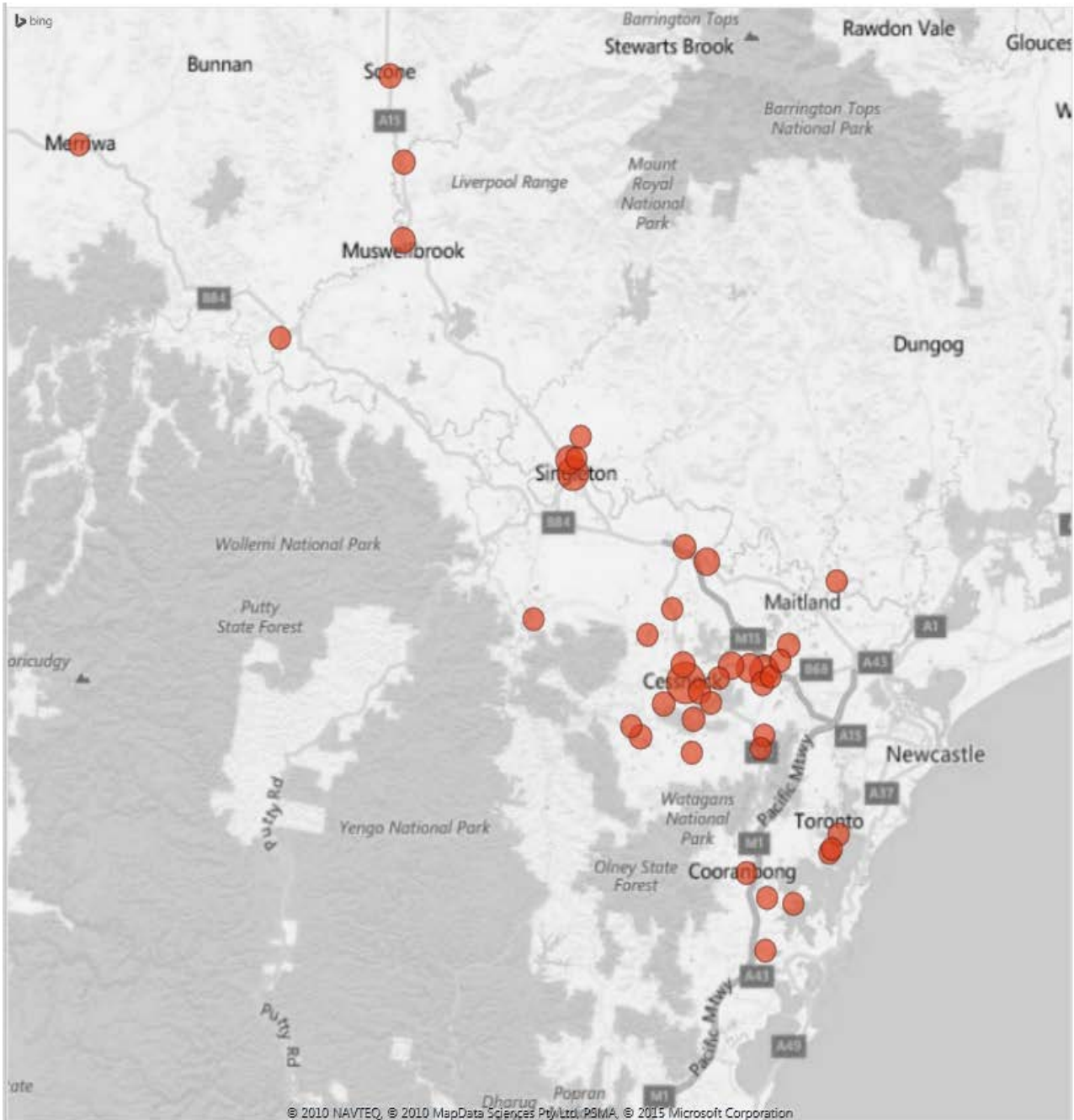
Client / Carer Perspective:

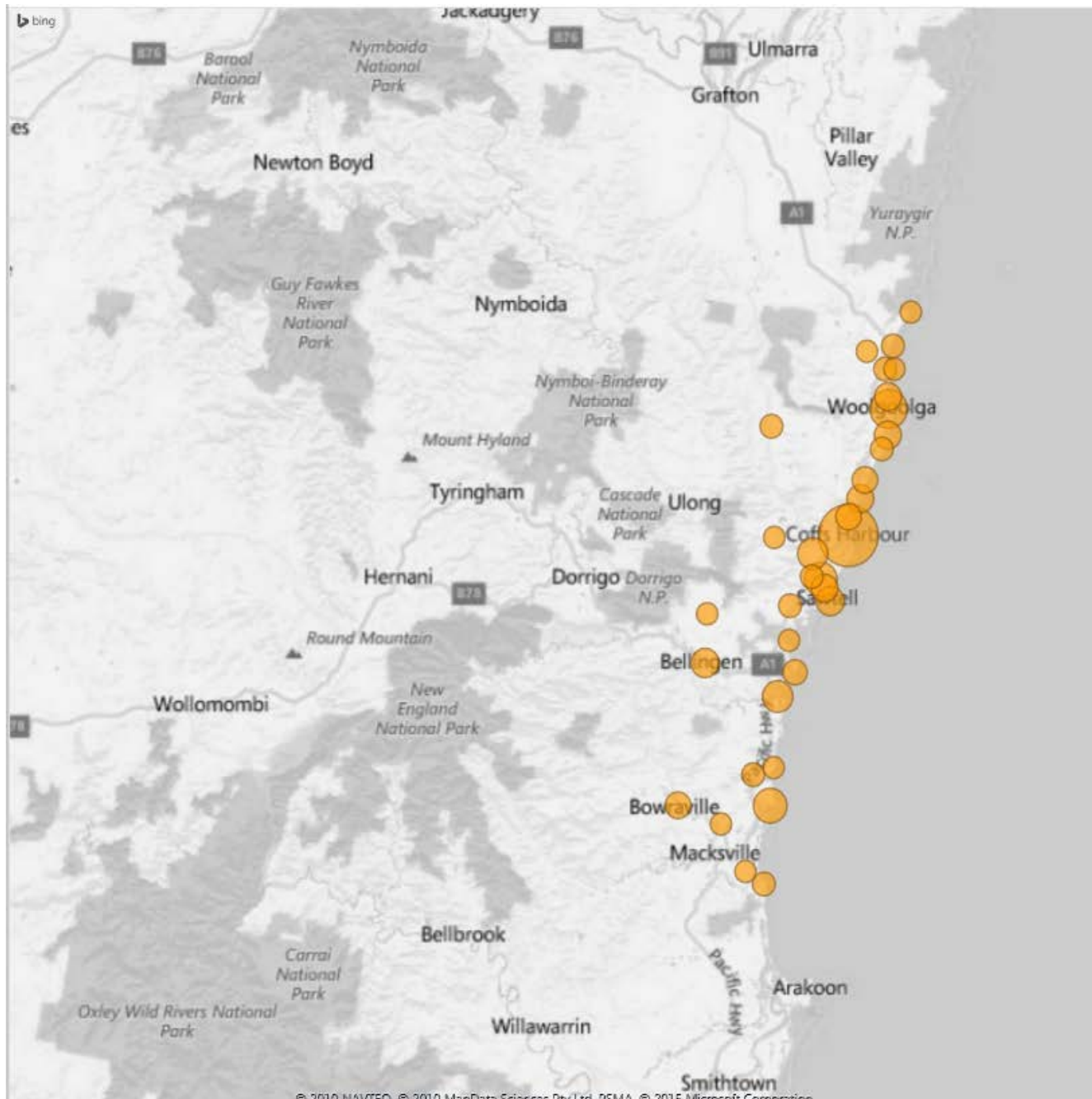
**24/7 support from their GP
and Local Palliative Care
Services working together**

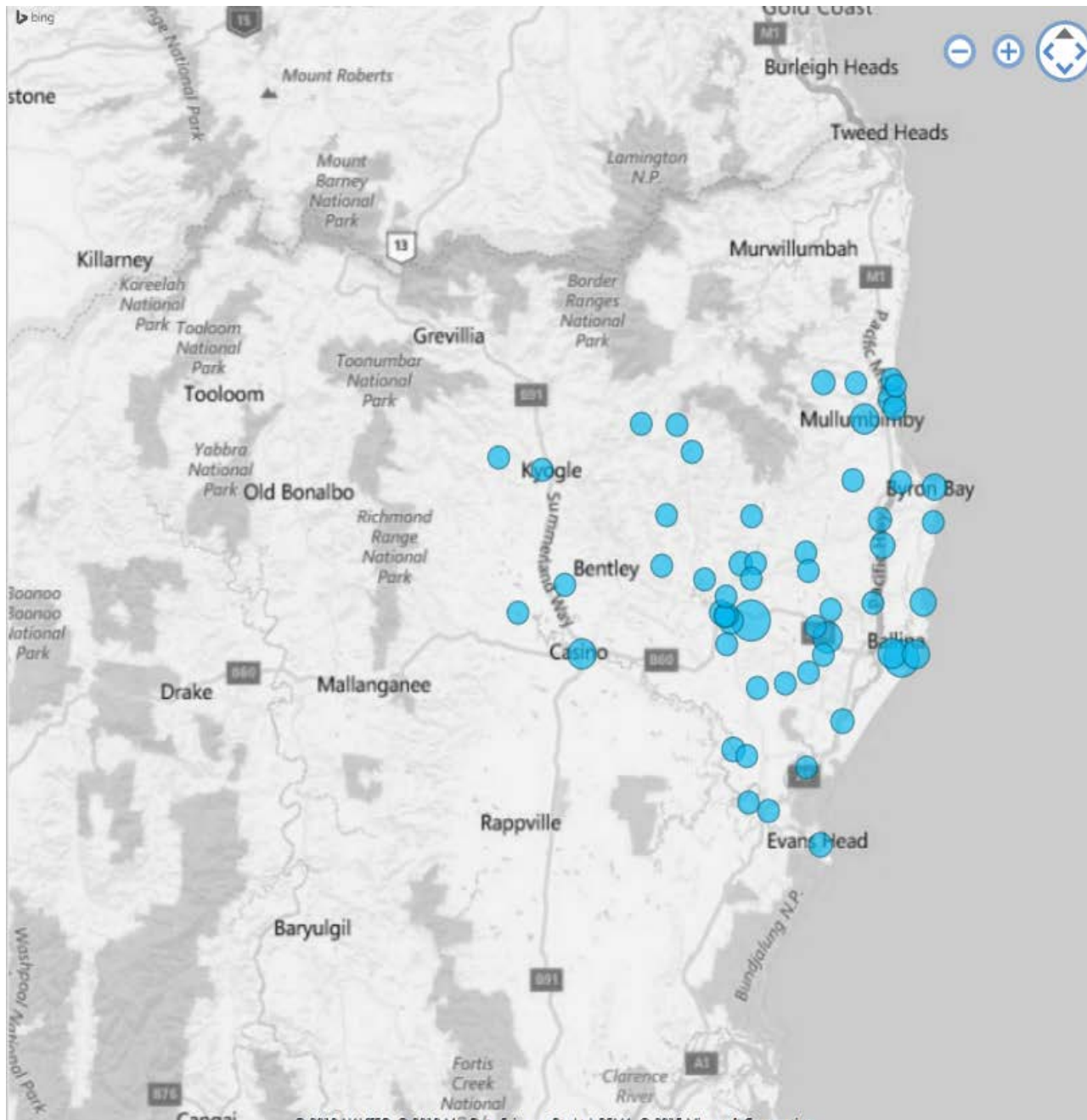
NSW Palliative Care Last-Days-of-Life Home Support Services

Dec 2013 to Aug 2015:

Number of clients accessed the service	400
Number of packages completed	796
Number of deaths at home	290
Average length of stay	10 days







Case StudiesPaul



Paul

- 91 year old male.
- Diagnosis: Oesophageal Carcinoma
- Multiple co morbidities
- Recent Hospital admission
- Wants to be at home
- Cared for by elderly wife and very large extended family
90 members of the family present

On Referral

- Phase Terminal
- RUG: 18
- AKPS: 20
- Hospital bed In home
- Starting on subcutaneous infusion for symptom management

Challenges

- Prolonged length of time in bed
- Large family all wanting to play a part
- Teaching and empowering the family to carry out care safely
- No community nursing services at the weekend
- Assisting the GP to use paperwork which the nursing staff could work from and legally use

What the service provided (LHD + SC)

ASSISTANT IN NURSING

- Visited daily.
- Length of visit approx 45-60 minutes.
- Family very much wanted to attend to personal care themselves so our involvement took a supportive and empowering role.



“Providing comfort and care at home is truly rewarding.”

Cristina, Palliative Care Assistant in Nursing



Silver Chain

What the service provided (LHD + SC)

REGISTERED NURSES

- LHD RN visited every morning (M-F)
- SC RN visited every evening (7 Days)
- SC RN – Clinical advice and support overnight (via client device)
- Symptom management by LHD and Silver Chain in collaboration with GP
- Family very much needed psychological support and to be empowerment



*"It's knowing when to talk
and when to just listen."*

Alice, Palliative Care Registered Nurse



Outcomes for Paul

- Death in place of choice (at home)
- LOS: 6 days of care (1 package)
- Hospital admission prevented
- LHD and SC staff working collaboratively to achieve these outcomes.

What was important to Paul.....



Conclusion

In NSW 70% of people want to die at home.

Last-days-of-life Home Support Packages have a big impact on everyday life for our clients/cares and families to support them to achieve that goal

It is the way in which we work together in partnership with LHD community based generalist and palliative care services to provide that support that makes the real difference

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“Without their assistance and kindness, I would not have found it impossible to cope.”



NSW Palliative Care Last-Days-of-Life Home Support Services





*"Community palliative care
is our passion."*

Sree, Palliative Care Registered Nurse



Silver Chain