

The DHHS Victorian Aboriginal Palliative Care Collaborative

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2 September 2015

*I acknowledge the traditional custodians of this country – and pay my
respects to Elders past and present.*

Agenda

- Victorian Aboriginal Palliative Care Collaborative
- The Collaborative and VACCHO Palliative Care Project
- Three funded Aboriginal palliative care projects
- Emerging themes
- Useful resources

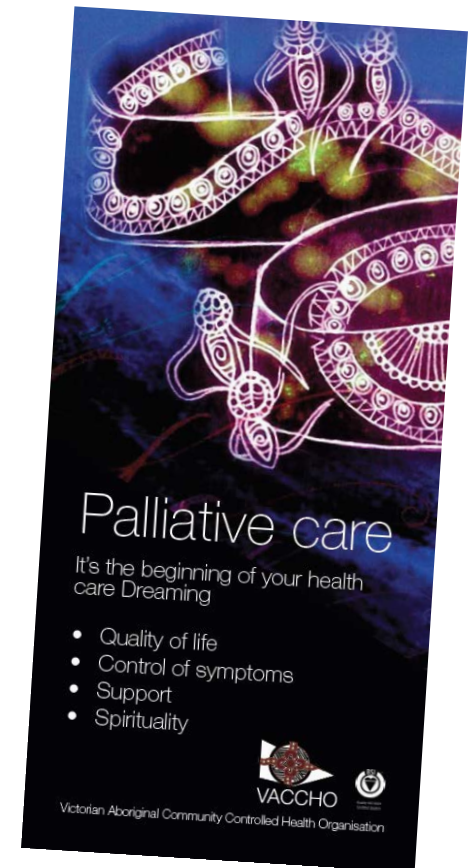


VACCHO Palliative Care Project

- Creating a sustainable and culturally safe palliative care service where Aboriginal people can access palliative care in the setting of their choice

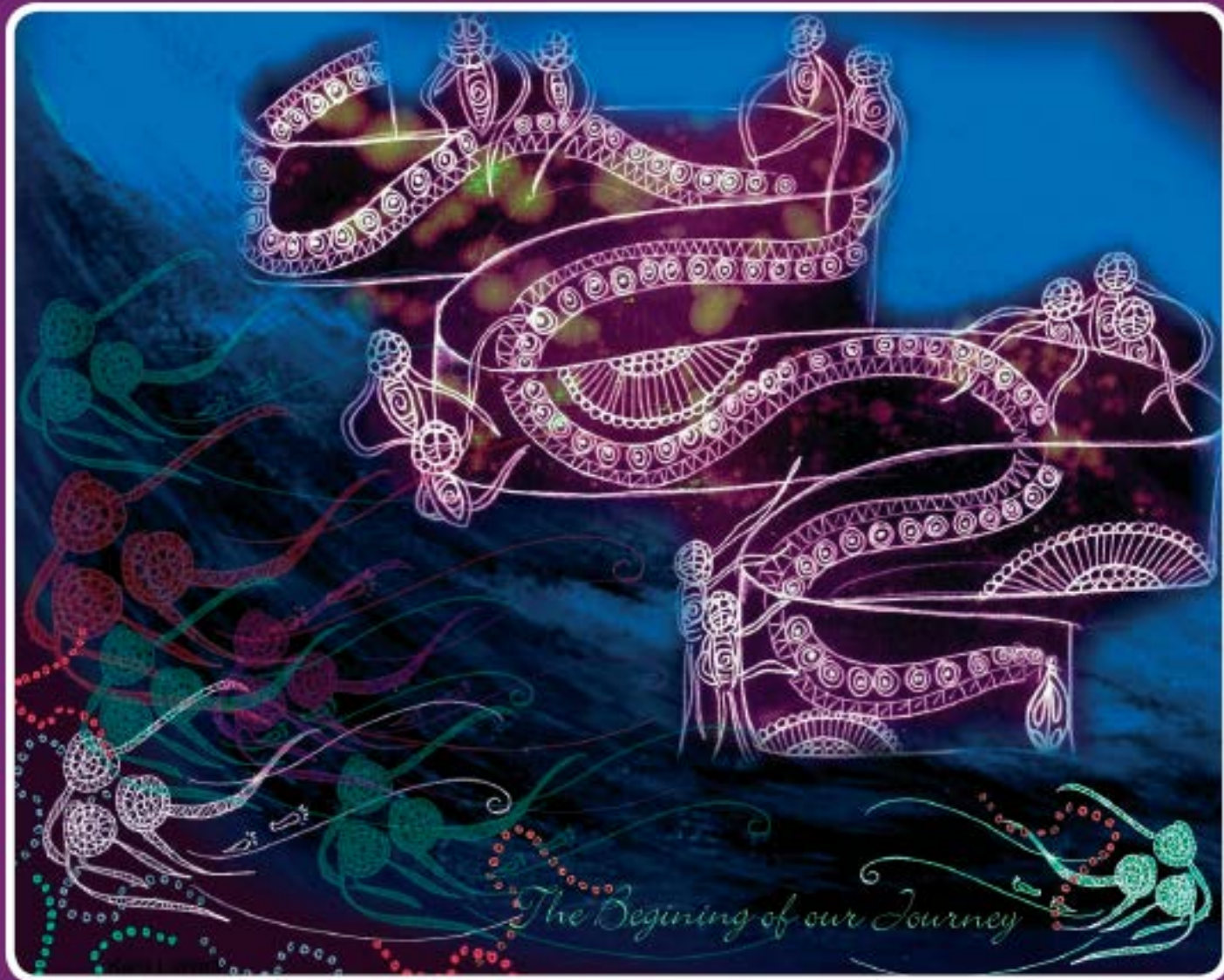
How?:

- Increase awareness
- Increase access
- Prepare and resource PCS to provide culturally appropriate palliative care to Aboriginal people



It's The Beginning Of Our Journey

Victorian Aboriginal Palliative Care Project

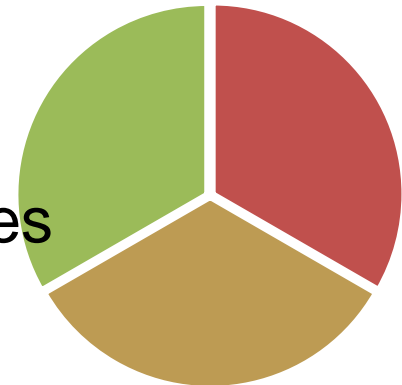


Victorian Aboriginal Palliative Care Collaborative (VAPCC)

- To enable specialist palliative services in Victoria to provide better clinical & culturally responsive palliative care services to Aboriginal people, their families & their usual health care workers where appropriate.

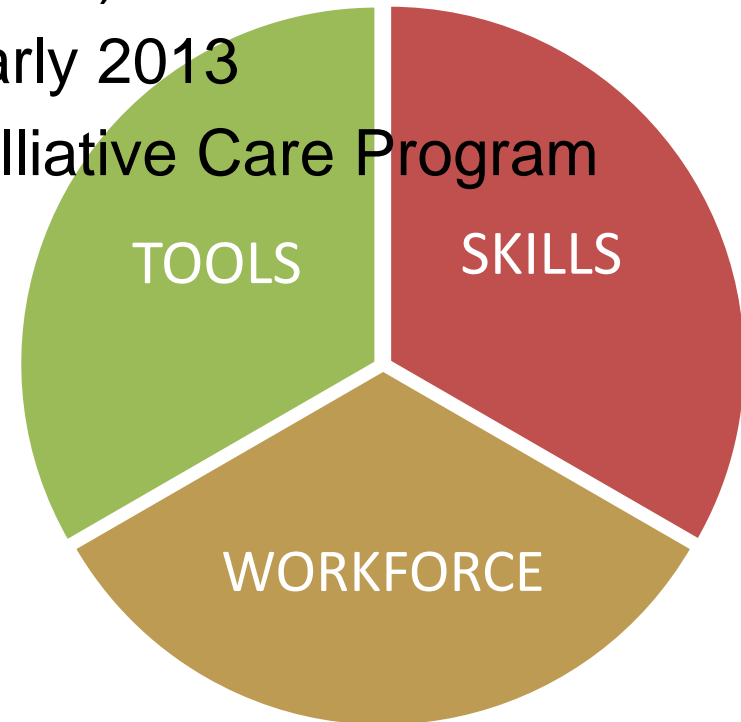
How?

- Identify enablers
- Test solutions in projects
- Report potential for system-wide changes



The Collaborative

- Short-term initiative ends 2015
(VACCHO Project from 2007-now)
- Steering Group established early 2013
- Funded through the DHHS Palliative Care Program



Collaborative Steering Group

- 1. Centre for Palliative Care (Lead Agency)**
- 2. Victorian Government, Department of Health & Human Services (DHHS)**
- 3. Victorian Aboriginal Community Controlled Health Organisation (VACCHO)**
- 4. Integrated Cancer Service**
- 5. Palliative Care Consortia**
- 6. Palliative Care Victoria (PCV)**
- 7. Victorian Aboriginal Health Service (VAHS)**
- 8. Palliative Care Clinical Network (PCCN)**
- 9. Koori Health Unit, The University of Melbourne.**

Focus areas

Clinical Tools

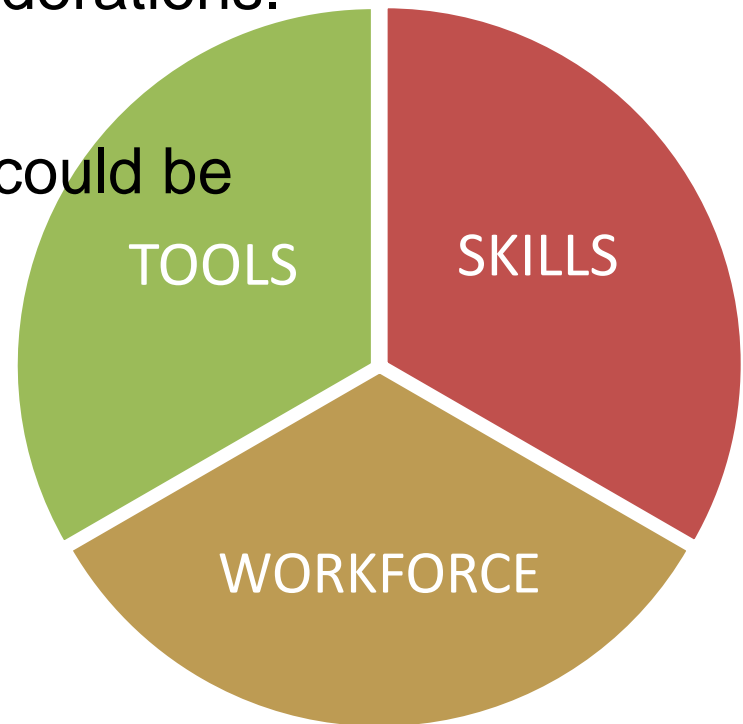
- Appropriateness of tools being used. Processes which overlook important cultural considerations.

Clinical Workforce

- Ways specialist skills/workforce could be better utilised for mutual benefit.

Clinical Skills

- Further training for specialists or AHW for mutual benefit.





Project Grants

- Three grants have been awarded across Victoria. \$25-100k value for 12 month period
- Echuca Regional Health
- GV Regional Health Service
- Banksia Palliative Care Service



Emerging Themes

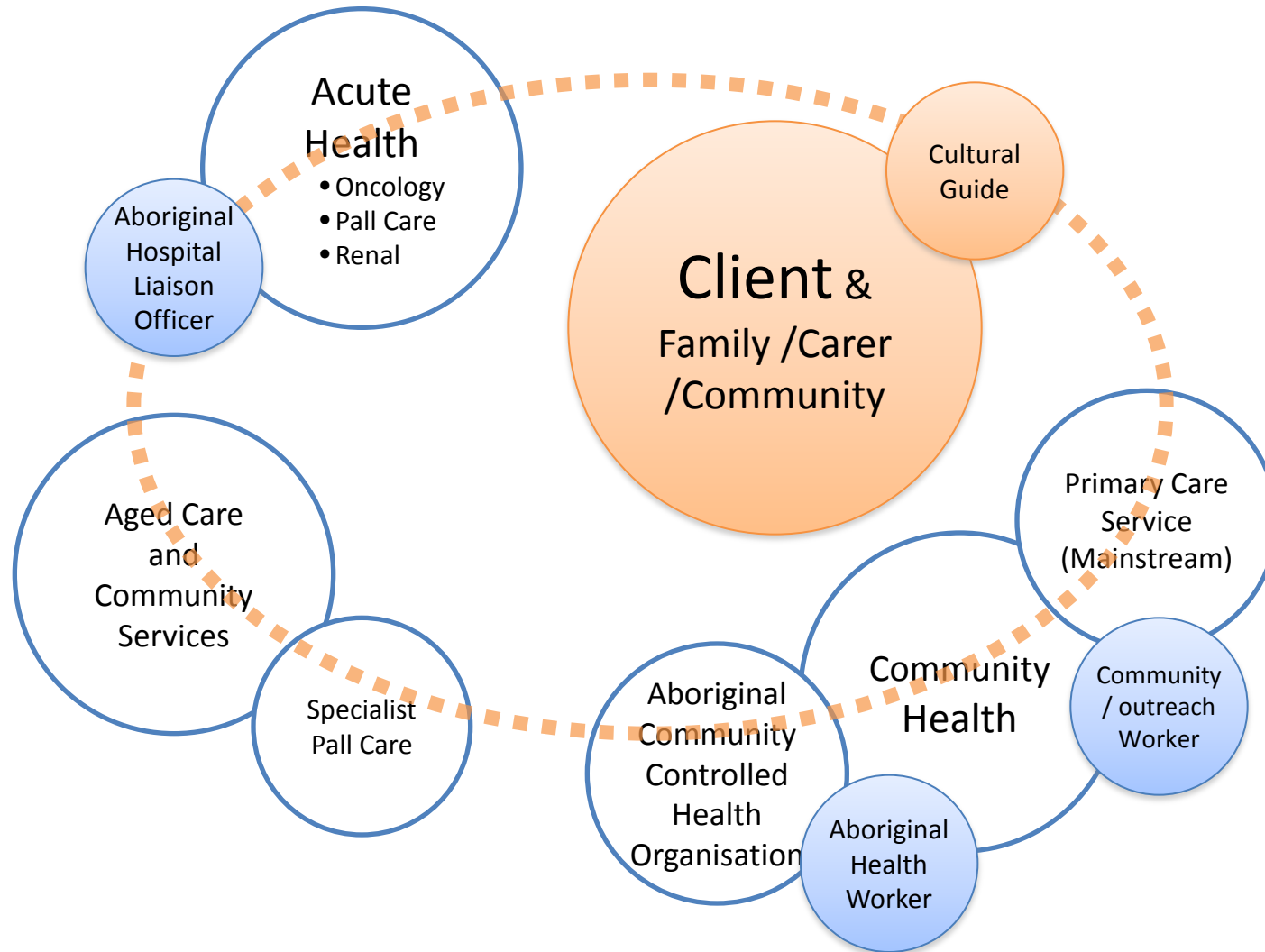
- Aboriginal people as cultural advisors
- Cultural awareness training
- Communication skills
- Cultural safety training
- Self identification
- Referral skills
- Recruitment and retention of Aboriginal workers
- Tools and processes
- Clinical Placements

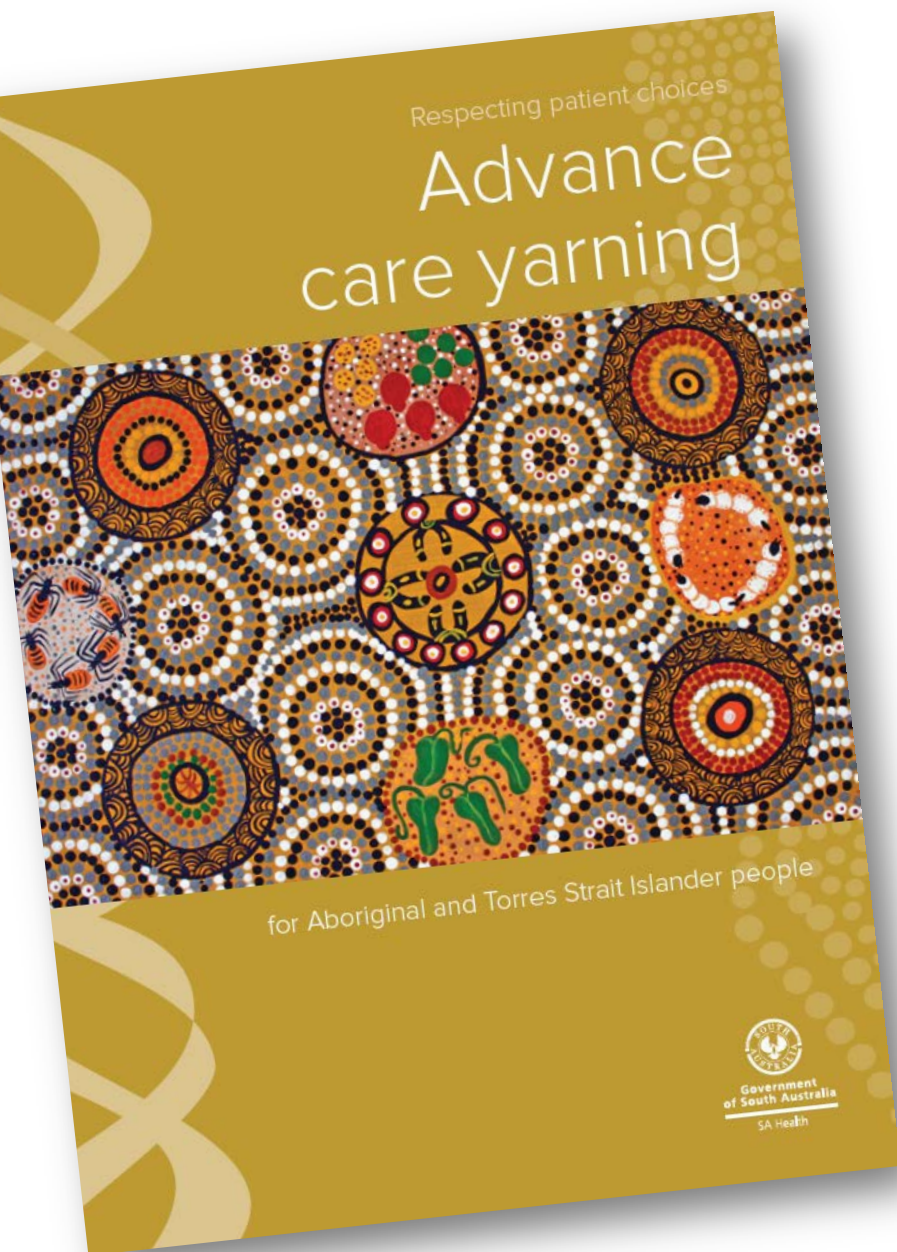


Targeted Messages

Palliative Care can be delivered:

- With your usual health care people & community supports (*palliative approach*)
- By new specialist team working with your usual health carers – include specialist doctors, nurses, allied health (*specialist palliative care*)
- Try to work in your place & country but could see you in hospitals, aged care places





How to complete your Advanced Care Plan

1. Think about the values that are important in your life.
2. Think about your current health and possible future health problems.
3. Think about what you would want from future medical care.
4. Talk to your family/next of kin about these issues.
5. Talk to your doctor and Aboriginal Health Worker about these issues.
6. You can make an Anticipatory Direction – which simply records your choices – and/or appoint a Medical Power of Attorney or Enduring Guardian(s) to be your representative(s), with or without providing written instructions for them.
7. Work with the Respecting Patient Choices[®] Facilitator and (if being appointed) any would be representative/s to complete the documents.
8. Provide copies of your Advance Care Plan to your representative/s, hospital and local doctor and anyone else you feel is appropriate.
9. If you make health decisions for someone else, you can ask for help to put a future care guide in place for them.

STAY.
PORES

WHAT ARE WE
SUPPOSED TO SAY
TO HER LATER?

I'M THE
COMMUNITY NURSE
FROM THE HOSPITAL.
I'VE COME OVER
TO SEE HOW YOU'RE
DOING AND IF YOU'RE
COMFORTABLE.

COUGH,
COUGH,
HACK!

ARTHUR, COULD
WE DISCUSS YOUR
CONDITIONS?

ALRIGHT.

GS AND
TTING WORSE
RS IN TOWN
EY CAN GET
AGAIN.

WE ALL WANT
THE BEST FOR YOU
ARTHUR, BUT THERE ARE
SOME THINGS WE NEED
TO TALK ABOUT.

SHE'S RIGHT POP.
THERE'S GOING TO BE
MORE PEOPLE COMING
TO SEE YOU.

WE NEED TO TALK
TO THE PALLIATIVE CARE*
MOB TO ORGANISE ONE
OF THOSE CARE PLANS**
SO EVERYONE KNOWS
WHAT'S GOING TO HAPPEN
AND HOW YOU'RE GONNA
BE LOOKED AFTER.

*SPECIALISED CARE FOR PEOPLE
WITH TERMINAL ILLNESSES PROVIDED
BY A TEAM OF DOCTORS, NURSES
AND OTHER ALLIED HEALTH STAFF WHO
WORK TOGETHER TO IMPROVE QUALITY
OF LIFE FOR THE PERSON SUFFERING.

**A CARE PLAN INVOLVES THE PERSON
SUFFERING, THEIR FAMILY, THE LOCAL HEALTH
CARE PROVIDER AND THE PALLIATIVE CARE TEAM.

POP ARTHUR



ROBINSON
ST

U'VE
TO THE
DIALYSIS
WORKING
WAS.

I'M NOT GOIN'
FOR ANYMORE
TREATMENT! I'M
STAYIN' HERE
WITH MY FAMILY.

ARTHUR! DON'T
BE SO **STUBBORN!**
YOU GOTTA STICK WITH
THE DIALYSIS, YOU
CAN'T JUST GIVE UP.

STUFF THIS! IT'LL
BE ALL YOUR FAULT
IF HE PASSES ON
OUT HERE.

I'M SICK*
THIS PAIN BROTHER!
HOW 'BOUT YOU AND
ME **SWAP PLACES?**
SEE IF YOU LIKE IT!

LEAVE POP
ALONE!

*SICK OF

DON'T WORRY
ABOUT BILLY, HE'S
NOT GONNA CHANGE
ANYTIME SOON.

SLAM


I'LL GO SORT
UNCLE BILLY OUT.
HE'S PROBABLY JUST
FEELIN' SCARED.

The Beginning of our Journey

Understanding the palliative care journey

A guide for individuals, carer communities and family

VACCHO acknowledges that we're on Aboriginal land



VACCHO
Victorian Aboriginal Community Controlled Health Organisation
Vibrant, healthy, self-determining Aboriginal community

wominjeka


WELCOME TO OUR JOURNEY




VACCHO

Aboriginal cancer journeys

Our stories of kinship, hope and survival



Cancer Council



Aboriginal Health & Medical Research Council
of New South Wales

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