Meeting PCOC Pain Benchmarks
Our Journey

Presenter:
Carmel Smith – Executive Manager
About GVHCS

- We are an independent Community Palliative Care Service located in Shepparton /Goulburn Valley
- We provide a 24/7 service
- 102 patients from Jan- June 2014 - 80% had a malignant diagnosis
- Our most common age group is 75-84 but 20%, < 54
- 49.7 days average LOS
- Referrals received from Acute (including from the metropolitan area) and Aged Care facilities, GP’s, Oncology, Family
- We are nurse driven, with no Medical Staff working directly in our service, we have a Bereavement Counsellor, Family Support Worker and Patient Care Volunteers. No dedicated palliative care inpatient unit/beds in the area or Physician. Have support from St Vincent’s Palliative Care Service
- We have very established relationships with local GP’s and Specialists
- We commenced PCOC in 2009
Our PCOC Experience

- We have maintained a focus on PCOC since commencing our involvement.
- Our Care Planning Assessment and Evaluation Policy/Guidelines now fully utilises the PCOC assessment tools and data outcome measures to guide care.
- We utilise the Peer Mentor Service – assistance to fully understand our reports - and recognise opportunities of improvement.
- We use our results/data as validated evidence for ACHS.
- Family/Carer Support - From our reports (PCPSS ) we identified that family/carer distress was significant particularly in the unstable phase in comparison to other services but we were not acting on this adequately. We subsequently developed a Family/Carer strategy which included “Carer Support Days and Carer Needs Assessments .
- **Pain Management** – PCOC has assisted us to improve our Pain Management by proving us with validated data which has enabled us to better identify what we needed to improve.
Our latest PCOC Results – Pain Benchmarks

- The following slides show our results from:
  Report 8 in July - Dec 2012 to Jan - June 2014
Benchmark 3.1: PCPSS - Absent/mild pain at both start and end of phase
Benchmark 3.2: PCPSS - Moderate/severe pain at start with absent/mild pain at end
Benchmark 3.3: SAS - Absent/mild pain at both start and end of phase

![Bar chart showing percentage of phases with absent/mild pain for all services and Goulburn Valley. The chart includes data from Jul-Dec 2012, Jan-Jun 2013, Jul-Dec 2013, and Jan-Jun 2014.]
Benchmark 3.4: SAS - Moderate/severe pain at start with absent/mild pain at end
Pain Management in our Service

- **Palcare - Assessment Tools:**
  - ESAS
  - PCPSS
  - Comprehensive Pain Assessment – When ?
  - Care Plan Entry >4

- **Medication Management:**
  - Poisons Licence – 24/7 Medication availability
  - Pro-active Planning
    - Adequate Medications available/ signed orders in the home
    - Parenteral Medications – orders obtained – timely
    - Syringe Driver box in home

- **Reminder tools**
  - Audits – of Pain Assessments & Organisation of Parenteral Medications
  - Periodic Patient Review including are parenteral medications ordered
Pain Management in our Service

- **GP Liaison**
  - Letter to GP outlining our Model of Care & Cooperation
  - Education e.g. “The GP & their patient - Palliative care: beyond morphine & midazolam”

- **Support Mechanisms**
  - Regional Nurse Consultant/ Palliative Care Clinics
  - Physician and GP with specialist palliative care training
  - St Vincent’s Telephone Support
  - Caritas Christi – Registrar
Questions
Thank you for listening