Helping to empower regional multidisciplinary health teams to provide holistic palliative care

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Aims: A two-year project funded by an Australian Government Department of Health and Ageing grant to our university aimed to: investigate the experience and perceptions of health professionals involved in providing palliative care in regional areas; identify continuing educational needs; and develop resources to enhance the skills of multidisciplinary palliative care teams, focusing on areas of pastoral care, counselling and support, which health professionals were often less confident to provide. This paper reports on the development of one of the resources and its evaluation.

Methods: A nine-person project reference group was formed with regional health partners and provided feedback on all stages of the project, including suggesting participants for interview. Data were collected through interviews as well as from a literature review. A ten-item questionnaire was used to evaluate the product.

Relevance: While palliative care clients may be of any age, the ageing of the Australian population increases the likelihood that people may develop a life-limiting condition or disease where end-of-life palliative care will be needed. Meeting the emotional and spiritual needs of clients and carers is important in providing holistic care.

Results: Eleven interviews were conducted with individuals experienced in working with palliative care clients and carers in or from regional areas. Themes emerging included the importance of: establishing trust relationships, maintaining hope, providing emotional care, meeting the client’s needs, and awareness of cultural diversity and different meanings of spirituality.

A resource manual was produced. It included guidelines for individual and group use, definitions, an overview of relevant literature, psychosocial needs assessment tools, and reflective activities based on anonymised scenarios drawn from the interviews. Nine users provided formal feedback using the detachable evaluation form, while informal feedback was also received. Feedback on the resource manual has been very positive.

Conclusion: Busy health professionals can refer to this user-friendly guide to deepen their reflection on their practice. It can be a basis for multidisciplinary team professional development discussions, creating greater awareness of the emotional and spiritual needs of palliative care clients and caregivers, and presenting a range of responses to those needs. It also provides a useful educational framework for future health professionals. Hence it may contribute to brightening the future, however long or short that may be, for people with a life-limiting condition.