caring@home Abstract 23OPCC Conference

Title: (max 12 words)

caring@home resources for First Nations families to support quality home-based palliative care (12 words)

Authors:

Prof. Liz Reymond, Dr Karen Cooper, Kathryn Hooper

Prof Liz Reymond MBBS(Hons), PhD, FRACGP, FAChPM (45 words)

Liz is the director of the Queensland Voluntary Assisted Dying Support and Pharmacy Service and Director of the national *caring@home* project. Her research interests include palliative care symptom management, service delivery and development, and advance care planning. Liz has directed multiple national palliative care projects.

Dr Karen Cooper BSc [Hons], PhD (49 words)

Karen is a Project Manager for Brisbane South Palliative Care Collaborative managing the *caring@home* and *caring@home* for Aboriginal and Torres Strait Islander Families projects, both aiming to improve the quality of palliative care service delivery across Australia. She has managed many national projects in the area of palliative care.

Kathryn Hooper BNUR (Hons), MNP, IPN, UnivDipPC, UnivDipAC, GradCertTAE (46 words)

Kat is a proud Worimi and Gubbi Gubbi descendent, nurse practitioner and currently studying Master of Philosophy. Kat is a palliative care Nurse Practitioner and currently works in a GP practice, with the PEPA aged care project and as a member of the *caring@home* project team.

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Theme:

Quality palliative care for diverse populations, both for consumers and service providers

Presentation style:

Oral presentation

Abstract (max 300; 300 at present)

Background

Many Aboriginal and Torres Strait Islander people express a wish to be cared for, and to pass, at home or on Country surrounded by family if possible. There are many barriers to achieving this aim; one being the ability to provide timely and effective symptom control.

Aim

The aim of this presentation is to report on the evaluation of new culturally-appropriate *caring@home* resources (packaged as a Palliative Care Clinic Box) developed for Aboriginal and Torres Strait Islander families to help them manage symptoms at home.

Methods

Organisations/clinical services could order a free Clinic Box via the *caring@home* website. A link to an anonymous survey was emailed to each recipient of a Clinic Box approximately two months after dispatch. The survey had 17 questions – 2 open-ended, 6 demographic questions, 8 Likert-scale questions, 1 Yes/No.

Completion of the survey was taken as consent to participate.

Results

Sixty-two responses were received. Fifteen percent of respondents identified as Aboriginal and/or Torres Strait Islander; 82% percent provided direct clinical care.

Participants agreed the resources for Aboriginal and Torres Strait Islander families:

- Are written in appropriate language (82%)
- Will be useful for this community (84%)
- May contribute to effective and efficient symptom control (83.5%)
- May contribute to enabling Aboriginal and Torres Strait Islander people to be cared for at home or on Country (87.5%)
- Will contribute to improved quality of palliative care provided by clinical services (91%)

The overwhelming majority of participants (95%) said they will use the resources in their clinical practice.

Conclusions

Clinical services can use the resources to support quality end-of-life care. Using *caring@home* resources will improve the end-of-life choices for Aboriginal and Torres Strait Islander families and support end-of-life care at home or on Country.

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