Establishing a Palliative Care nursing service at Fremantle Hospital – nurses leading the way

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ABSTRACT

Introduction/Background
Until February 2015 Fremantle Hospital (FH) had a full-time nurse-led palliative care (PC) service that received in excess of 700 referrals per year. This service was transferred to Fiona Stanley Hospital (FSH), leaving no PC service available at FH. This was identified by senior nursing staff as a risk and placed on the FH Risk Register.

FH provides high-quality care for elderly people, many of whom are approach end of life, and by empowering nurses with skills to care for people at the end of life gives them the unique opportunity to make this time memorable in a positive way for people, their families and nurses themselves.

Aim/Purpose of the project
Led by the PC Clinical Nurse Consultant (CNC), a Palliative Care nursing service was trialled at FH in order to ascertain the palliative care needs of patients and staff in FH, as well assess the impact of having this service on an organisational level.

Methods/Process
The PC CNC began providing a part-time (0.4FTE) on-site nursing service in September 2018 for a trial period of six months.

The PC CNC provides clinical nursing expertise for:
- Education to all healthcare professionals
- Advise and support nursing staff caring for patients in the terminal phase
- Provide support and education for families of dying patients
- Assist with patient flow, including attending family meetings
- Assist nursing staff to develop individualised end-of-life care plans

Results/Outcome
The PC CNC has provided a leadership role in the establishment of a palliative care nursing service in FH. There is great interest from healthcare professionals to provide quality end of life care for patients in FH and the CNC is developing strategies and education to empower FH staff to achieve this.

Recommendations/Conclusions
A primarily nurse-led palliative care service is required at FH, with access to other members of the palliative care team, including doctors, social work and pharmacy as required on an ad hoc basis. The CNC provides the leadership to conduct research/QI to ensure implementation of innovation and best nursing practices for palliative and end of life care.