



Centre for Palliative Care
Research and Education

Centre for Palliative Care Research and Education

7th Annual Research Conference

Friday 18 April 2008

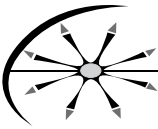
Auditorium, Education Centre
Royal Brisbane and Women's Hospital

Herston, Brisbane, Qld



**Queensland
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Program



Centre for Palliative Care
Research and Education



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18 April 2008

Dear Colleagues

Welcome to the Seventh Annual Research Conference for the Centre for Palliative Care Research and Education.

The CPCRE Annual Research conference aims to provide the palliative community in Queensland with an opportunity to discuss some of latest research in the field of palliative care. The research that is being presented at this year's conference covers a broad spectrum of issues in palliative care education, practice and policy.

We hope you find the conference to be interesting, challenging and enjoyable.

Warm regards

A handwritten signature in black ink that reads "m yates." The signature is written in a cursive style with a period at the end.

Prof Patsy Yates

Acting Director

Centre for Palliative Care Research and Education

The Centre for Palliative Care Research and Education

The Centre for Palliative Care Research and Education (CPCRE) is a Queensland Health initiative whose primary role is to enhance palliative care services in Queensland, through research and education endeavours.

To achieve these aims, the CPCRE operates as a 'centre without walls', committed to building and fostering partnerships with the palliative care community in its endeavours.

CPCRE is administered by a consortium of the following organisations:

- The Royal Brisbane and Women's Hospital Health Service District
- The Prince Charles Hospital Health Service District
- Queensland University of Technology
- Karuna Hospice Service
- Queensland Division of General Practice

Our Key Objectives

The key objectives of CPCRE are to:

- Develop the capacity of the palliative care work force to provide quality palliative care
- Improve the links between research and practice in palliative care
- Undertake research to enhance the quality of palliative care
- Provide information which supports the delivery of palliative care services

Conference Program

0830 – 0900 Registration

0900 – 0905 Welcome

Professor Patsy Yates

Acting Director, Centre for Palliative Care Research and Education, Royal Brisbane and Women's Hospital
Director of Research, School of Nursing, Queensland University of Technology

0905 – 0915 Opening Address (Speaker tba)

0915 – 1015 Keynote Address:

'Discussing prognosis and end of life issues with patients and their families: evidence based recommendations for clinical practice'

Dr Josephine Clayton

Head of Department of Palliative Care at the Royal North Shore Hospital, Sydney

Senior Lecturer – Medicine, Central Clinical School, University of Sydney

1015 – 1045 Morning Tea

1045 – 1300 Morning Presentations:

**Update on Palliative Care Research in Queensland:
Profiling Palliative Care Network Activity**

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TIME	SPEAKER	TOPIC
1045 – 1100	Anne Bucetti Project Officer, <i>Palliative Care Discharge Planning Project, University of Queensland. (CAHS)</i>	Palliative Care Discharge Planning Project
1100 – 1115	Dr Carol Douglas Clinical Director, <i>Palliative Care Service, Royal Brisbane and Women's Hospital. (CAHS)</i>	RBWH End of Life Pathway Project Progress
1115 – 1120	A/Prof Liz Reymond <i>Chair Palliative Care Clinical Network, Brisbane South Palliative Care Collaborative. (SAHS)</i>	Southern Area Health Service, Palliative Care Clinical Network Projects Overview
1120 - 1130	Fiona Israel Clinical Nurse Consultant, <i>Research, Brisbane South Palliative Care Collaborative.</i>	Medical Officer 24Hr Telephone Advisory Service/ DVD Guide for Clinicians: How to use a Syringe Driver for Palliative Care Patients
1130-1140	Jodie Nixon Clinical Specialist, <i>Occupational Therapy Princess Alexandra Hospital.</i>	Allied Health Service Directory
1140-1150	Debbie Kirkup Nursing Unit Manager, <i>Brisbane South Palliative Care Collaborative/Princess Alexandra Hospital.</i>	PICCS and Ports Education

1150-1200	Debbie Menzies Project Officer, <i>Brisbane South Palliative Care Collaborative.</i>	Networking and Upskilling Palliative Care Workshops
1200-1210	Maree Lyons-Micic Project Officer, <i>Brisbane South Palliative Care Collaborative.</i>	Palliative Care Admission Tool
1210-1230	Dr Ofra Fried, Palliative Care Consultant, <i>The Townsville Cancer Centre, The Townsville Hospital.</i>	A Public Health Approach to Palliative Care Service Development

1230 – 1315 Lunch

**1315 – 1530 Afternoon Presentations and Panel Discussion:
Clinical, Psychosocial and Spiritual Issues in
Palliative Care**

TIME	SPEAKER	TOPIC
1315 – 1430	Prof Sebastiano Mercadante Prof of Palliative Medicine, <i>University of Palermo, Italy; and Director of Anaesthesia & Intensive Care & Palliative Care, La Maddalena Cancer Centre, Palermo, Italy.</i>	Keynote Address: Current best practice management of breakthrough pain
1430 – 1515	Prof Janet Hardy Clinical Research Program Leader, <i>Centre for Palliative Care Research and Education.</i>	Palliative Care Clinical Studies Collaborative (PaCCSC) Update

1515-1530 Conference Summary and Close

1530-1600 Afternoon Tea

Keynote Address: Discussing prognosis and end of life issues with patients and their families: evidence based recommendations for clinical practice

Dr Josephine Clayton MBBS PhD FRACP FACHPM

Staff Specialist and Head of Department, Palliative Care, Royal North Shore Hospital, Sydney; Senior Lecturer, Faculty of Medicine, Central Clinical School, University of Sydney; Cancer Institute NSW Clinical Research Fellow

Prognostic and end-of-life communication is a vital skill for health professionals caring for patients with progressive, life-limiting illnesses and their families. Patients and families rate this as one of most important aspects of their care at the end of life. Yet these are difficult topics for both patients/families and health professionals. Findings from focus groups and interviews with palliative care patients, their caregivers and palliative health professionals regarding these topics will be discussed. The challenges and findings of a systematic literature review, involving mostly descriptive studies, will be presented. Finally recommendations from an expert advisory panel of 35 Australians and New Zealanders from various relevant disciplines will be discussed. The key recommendations are for health professionals to consider the recommendations conveyed by the acronym **PREPARED** when discussing prognosis and end-of-life issues with adults in the advanced stages of a life-limiting illness, and their caregivers:

Prepare for the discussion, where possible;

Relate to the person;

Elicit patient/caregiver understanding and information preferences;

Provide information, tailored to the individual needs of both patients and their families;

Acknowledge emotions and concerns;

(foster) **Realistic hope**;

Encourage questions and further discussions;

and **Document** what has been discussed.

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Palliative Care Discharge Planning Project

Anne Bucetti

Project Officer, Palliative Care Discharge Planning Project, University of Queensland

Research suggests that the home-to-hospital transition of palliative patients is characterised by difficulties pertaining to unmet information needs of patients and sub-optimal communication across the primary-secondary interface, potentially compromising the quality of care. Anecdotal evidence suggested that the discharge process of palliative patients at the Royal Brisbane and Women's Hospital (RBWH) could be enhanced through addressing information flow.

This project aims are:

1. to develop a discharge planning process for palliative patients treated at the RBWH which will improve communication between their health care providers. The process is to include the development of a patient hand held record, and a process for the conduct of as-required case conferences between the patient's GP and the palliative care team.
2. to test the effect of the new discharge process on patient and carer quality of life and function.

The development of these interventions is now complete, and was informed by findings from literature reviews and stakeholders' views of the current process. A control group of patients being discharged using the old system was collected in 2007. The new system is currently being rolled out.

Recommendations based on the evaluation of the interventions will be made for patients with palliative needs throughout the hospital. Findings will be disseminated throughout the wider health care community with a view to providing benefit to palliative patients beyond the RBWH.

Progress on the project will be the subject of this presentation.

Douglas, C¹., Mitchell, G²., O'Doherty, L³. Yates, P⁴., Clifford, K⁵.

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¹ Royal Brisbane and Women's Hospital

² University of Queensland

³ University of Queensland

⁴ Queensland University of Technology

⁵ University of Queensland

Implementing a Care of the Dying Clinical Pathway at the Royal Brisbane and Women's Hospital

Dr Carol Douglas

Clinical Director, Palliative Care Service, Royal Brisbane and Women's Hospital

Implementing a Care of the Dying Clinical Pathway at RBWH; Douglas C., Bisset C; Palliative Care Service, Royal Brisbane and Women's Hospital.

The Queensland Health Clinical Practice Improvement Centre supports the development of a Care Pathway for the Dying.

The RBWH pathway project commenced one year ago. The Pathway is based on the Liverpool Care of the Dying Pathway (LCP). The LCP UK team is supporting this project by providing baseline audit and post pathway analysis. To date only base-line (pre)audit data processed by UK team is available.

A reference group was established to provide local expert guidance and support for the project.

The effect of this initiative on the project and the direction provided have been an integral part of the project development.

The Education program as it has evolved and the use of sustainable strategies will be presented.

Results of 'roll-out' to date including barriers to implementation and sustainability will be presented. Variance data collection and planning for analysis will be discussed.

Whether the pathway has a 'future' across Queensland Health sites will be addressed.

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Southern Area Health Service, Palliative Care Clinical Network Projects Overview

A/Prof Liz Reymond

Chair Palliative Care Clinical Network, Brisbane South Palliative Care Collaborative (SAHS)

The Southern Area Health Service (SAHS), Palliative Care Clinical Network (PCCN) was established in 2006 to advise Queensland Health regarding the development of palliative care services and contemporary issues impacting on service provision. The PCCN is comprised of representatives from government and non-government palliative care services operating within the SAHS geographical area and membership is multi-disciplinary.

The PCCN directly contributes to the improvement of palliative patient outcomes by supporting projects that address priority areas identified within the Action Plan of the Network.

The following six projects will be outlined briefly.

1. 24hr Palliative Care Telephone Advisory Service for Doctors
2. DVD "Guide for Clinicians: How to use a Syringe Driver for Palliative Care Patients"
3. Development of an Allied Health Service Directory
4. Networking and Upskilling Palliative Care Workshops
5. PICCS and Ports Education
6. Development of a Palliative Care Admission Tool

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A Public Health Approach to Palliative Care Service Development

Dr Ofra Fried MBBS BA MPH FaChPM

Palliative Care Consultant, The Townsville Cancer Centre, The Townsville Hospital

This paper will discuss Palliative Care Service development using a public health model. This approach will be illustrated with examples of research and practice used in developing the Central Australian Palliative Care Service, and then further explored for possible use in the evolving Townsville Palliative Care Service. The paper will also offer insights into palliative care projects currently being undertaken in North Queensland.

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Palliative Care Clinical Studies Collaborative (PaCCSC) Update

Prof Janet Hardy

Clinical Research Program Leader, Centre for Palliative Care Research and Education; Director of Palliative Care, Mater Health Services

There are a number of drugs that have been identified by health professionals in palliative care as priority drugs for practice. Many of these agents are not supported by the Pharmaceutical Benefits Scheme (PBS).

In 2007, Flinders University Department of Palliative and Supportive Services was awarded a contract from the Commonwealth Department of Health and Ageing to lead a national multi-site clinical research collaborative - the Palliative Care Clinical Studies Collaborative (PaCCSC). Six sites around Australia, selected on their extensive research experience, have been contracted to undertake the first round of studies. The primary remit of this research collaborative is to gather the evidence necessary to determine whether these drugs should be put forward for consideration of TGA and PBS approval. This applies not only to the individual drugs, but also the specific indication for which they are being used. The 6 drugs chosen for the initial studies were: ketorolac, risperidone, ketamine, megestrol, octreotide and ondansetron.

The infrastructure to support the PaCCSC is well established and the clinical trials are at an advanced stage of development. All the phase III trials are randomized, controlled and double-blind with efficacy end-points and in built socio-economic evaluations. The ketamine trial is recruiting and risperidone megestrol and octreotide are all proceeding through the ethical review process. Literature reviews have resolved several of the questions initially raised regarding ketorolac and ondansetron.

Challenges for the Phase 3 studies have included the need for study designs that are sensitive to the needs of people with life limiting illness. Multi-site recruitment has necessitated multiple scientific and ethics committee reviews. There have been staff turnovers at key sites and not all sites have the same level of research experience. We anticipate the recruitment difficulties inherent in all palliative care studies.

The development and implementation of PaCCSC is a major milestone for the National Palliative Care Strategy, and should generate high quality evidence base for palliative care therapeutics and subsidy processes. PaCCSC will also have a major role in the capacity building necessary to facilitate the sustainability of quality palliative care clinical research and hence high quality clinical service delivery in Australia and internationally.

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Speaker Profiles

Keynote Speaker - Dr Josephine Clayton

Dr Josephine Clayton is Head of Department of Palliative Care at the Royal North Shore Hospital, and Senior Lecturer at the University of Sydney.

Dr Clayton spends 50% of her time in clinical palliative medicine practice and 50% of her time in research. She was awarded her PhD in 2005, entitled “Enhancing Doctor Patient Communication in Palliative Medicine”, and is currently undertaking further research funded by NHMRC and the Cancer Institute New South Wales on issues relating to discussion of prognosis and end-of-life issues with palliative care patients and their families.

Prof Janet Hardy

is the Director of Palliative Medicine for the Mater Health Services and is the Clinical Research Programme Leader for the Centre for Palliative Care Research and Education in Brisbane. She holds a chair in Palliative Medicine from the University of Queensland School of Medicine and chairs the Trials Management Committee for PaCCSC.

Keynote Speaker – Professor Sebastiano Mercadante

Professor Sebastiano Mercadante is Professor of Palliative Medicine at the University of Palermo, Italy; and Director of Anaesthesia & Intensive Care & Palliative Care at the La Maddalena Cancer Centre in Palermo.

In a career spanning almost thirty years he has been a visiting Physician at the Pain Clinic of the Greenwich District Hospital; the Brook Hospital and Kings College, London; and Visiting Professor at the Palliative Care Unit of the University of Alberta, Edmonton, Canada.

Professor Mercadante has been involved in teaching and education, delivered countless lectures at National and International Congresses, and has been a member of over thirty Consensus and Working Groups relating to cancer pain management and palliative care.

He is an Expert Consultant and Peer Reviewer for many highly respected journals, has authored over seventy books and chapters, and has over three hundred published papers.

