THE CENTRE FOR PALLIATIVE CARE RESEARCH AND EDUCATION

GENERAL PRACTICE PALLIATIVE CARE EDUCATION INITIATIVE

2006-2007 REPORT

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EXECUTIVE SUMMARY

The General Practice Education Program is an initiative of Queensland Health designed to increase the capacity of General Medical Practitioners (GPs) to provide for the health care needs of palliative care patients in the community. The GP Education Program is coordinated by the Centre for Palliative Care Research and Education (CPCRE). The Centre is responsible for promoting the GP Education Program to the Divisions of General Practice and to process the selection of applicants. In addition CPCRE provides support and guidance to the Divisions to assist them as required to complete their projects.

Recommendations from the December 2006 report on the GP Education Program implemented in the 2006-07 period included:

- Feature articles in Centre Line - CPCRE Newsletter, on completed GP palliative care projects. (March edition is enclosed with this report)
- Promoting resource material developed through the program to increase access and dissemination
- Provide update information to the Divisions on the Program of Experience in the Palliative Approach (PEPA) to maximise opportunities for GPs to access the program

Other GP education activities undertaken by CPCRE:

The Centre coordinated the development and delivery of two education workshops for GP between March and June 2007, these were:

1. Updates in palliative care
2. Clinical and psychosocial aspects of palliative care

The workshop on ‘Updates in palliative care’ was approved for accreditation by the Royal Australian College of General Practitioners (RACGP) as a Category 1 activity attracting 30 CPD points and 7.5 PDP points with the Australian College of Rural and Remote Medicine (ACRRM). The second workshop was registered with RACGP as a category 2 activity with 13 CPD points accredited, and 6.5 PDP with ACRRM. A total of fifty nine GPs attended the CPCRE workshops. The programs and evaluations of the workshop/seminar listed above are included as attachment 1 to this report.


**GP Education project 2006-07**

Seven Divisions of GP received funding for the 2006-07 period to undertake various education projects, which are the subject of this report:

1. Capricornia Division of General Practice  
2. GP Connections Toowoomba  
3. Ipswich and West Moreton Division of General Practice  
4. Southern Queensland Rural Division of General Practice  
5. Sunshine Coast Division of General Practice  
6. The South East Alliance of General Practice  
7. Wide Bay Division of General Practice
INTRODUCTION
From 2002 Queensland Health has allocated annual funding to the value of $46,863 specifically for the development of palliative care education and skill enhancement for General Medical Practitioners (GPs) throughout Queensland. The Centre for Palliative Care Research and Education has been responsible for the overall management and evaluation of the GP palliative care education program.

The principal objectives of the Program are to:
- Encourage partnership in both education and service delivery, between specialist palliative care services and the Divisions of General Practice
- Develop evidence-based education resources that are accessible to GPs in all locations
- Enhance the workforce capacity of GPs to provide palliative care by developing appropriate skills base
- Provide educational and practical support for GPs in their role as primary palliative care providers.

Applications for funding are considered according to criteria assigned to three broad categories of educational activities:

1. Leadership/mentoring
2. Development of flexible delivery GP Education Resources
3. GP conference activities involving palliative care experts

Funding is weighted for each category of learning activity according to the anticipated complexity, duration, relevance to GPs throughout Queensland and, sustainability of the projects.

All projects funded through the GP Palliative Care Education Program are expected to be eligible for Continuing Professional Development (CPD) points from the Royal Australian College of General Practitioners (RACGP), and/or Professional Development Program (PDP) points from the Australian College of Rural and Remote Medicine (ACRRM).

DESCRIPTION OF PROJECT CATAGORIES
1. Leadership/mentoring - Value up to $15,000 per project
   Aims:
   - Develop GP’s knowledge and skills in clinical management of patients with palliative care needs
   - Enhance the leadership capacity of local GPs, enabling them to support their peers in managing palliative care patients
• Develop collaborative relationships between the Divisions of General Practice and specialist palliative care providers

The scope of the leadership/mentoring program was intended to include GP’s supervised clinical attachments with a specialist palliative care service. From 2006 however, many GPs have taken the opportunities offered through the Program of Experience in the Palliative Approach (PEPA) program. Consequently the Divisions have been able to focus on leadership/mentoring projects that build on the experience gained by GPs who completed a PEPA placement and to develop networks between local GPs and specialists. In addition the Divisions are able to develop education programs of workshops, seminars, lectures and on-line programs that can be made accessible to a wide audience.

2. Development of flexible delivery education resource-
   Value up to $ 10,000 per project
Aims:
• Develop palliative care education resources for General Practitioners
• Promote innovation in the design of educational resources for GPs
• Evaluate the effectiveness or relevance of existing educational resources that aim to support the learning needs of GPs
• Improve accessibility to learning resources for GPs in all localities.

3. GP Conference Activities involving palliative care experts
   Value up to $2,500 per project
Aims:
• Support the design and delivery of a professional conference, seminars or workshops relating to palliative care topics which should be facilitated by an expert in the field
• Enable GPs to attend conferences or other professional meetings relating to evidence-based palliative care.
SELECTION PROCESS
A General Practice Education Expert Committee is responsible for the selection of applicants for funding. The selection committee that processed the 2006-07 applications comprised representatives from the following organisations:

- Australian College of Rural and Remote Medicine (ACRRM)
- Central and Southern Queensland Training Consortia (CSQTC)
- Centre for Palliative Care Research and Education (CPCRE)
- Palliative Care Clinical Services Royal Brisbane and Women’s Hospital
- General Practice Queensland (GPQ) (formerly Queensland Divisions of General Practice)
- Queensland Rural Medical Support Association
- University of Queensland Centre for General Practice.
DESCRIPTION OF 2006-07 FUNDED PROJECTS

Table 1 lists the category, project activities, organisation and value of the funds awarded for each project.

**Table 1. The projects awarded for the period 2006-2007**

<table>
<thead>
<tr>
<th>Category</th>
<th>Project</th>
<th>Lead Organisation</th>
<th>Funds awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mentoring/Community Leadership</td>
<td>Palliative care Mentoring program for local GPs</td>
<td>Sunshine Coast Division of General Practice</td>
<td>$10,500</td>
</tr>
<tr>
<td>Development of education resources</td>
<td>Production CD ROM: Palliative care: Choose your own adventure</td>
<td>GP Connections, Toowoomba</td>
<td>$10,000</td>
</tr>
<tr>
<td>Development of education resources</td>
<td>Develop palliative care access link and a program of education for GPs</td>
<td>Wide Bay Division of General Practice</td>
<td>$10,000</td>
</tr>
<tr>
<td>Development of education resources</td>
<td>Palliative care resource kit for GPs</td>
<td>Southern Queensland Rural Division of General Practice</td>
<td>$5,000</td>
</tr>
<tr>
<td>Development of education resource</td>
<td>A collaborative approach to developing GP’s knowledge &amp; skill in palliative care</td>
<td>South East Alliance of General Practice</td>
<td>$3,500</td>
</tr>
<tr>
<td>Development of education resources</td>
<td>Development and delivery of palliative care workshops and network</td>
<td>Capricornia Division of General Practice</td>
<td>$4,500</td>
</tr>
<tr>
<td>Development of education resources</td>
<td>Flexible delivery of GP Palliative care journal club and clinical support program</td>
<td>Ipswich and West Moreton Division of General Practice</td>
<td>$3,300</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td></td>
<td><strong>$46,800</strong></td>
</tr>
</tbody>
</table>
PROJECT REPORTS

1. Sunshine Coast Division of General Practice

Project title: Palliative care mentoring program

Summary of project

The project evolved from other palliative care education initiatives developed by the Division. The Division established a mentoring program for GPs by setting up a network which comprised GPs and palliative care specialists from hospice and community services. The network developed clinical guidelines and an educational program. The principal aim of the project was to enable GPs to have up to ten hours with a specialist palliative care service. An intended outcome of the project was enhanced communication between GPs and other primary care providers, and between GPs and the palliative care services, community and tertiary based. Effective and timely communication between the services would enable development of appropriate pathways of management and support for palliative care patients.

Process

Five General Practitioners participated in the mentoring program which involved working with a specialist palliative care service. The clinical observational visits were designed according to the learning needs and areas of interest expressed by the participants. While undertaking their clinical visits with the palliative care service the GP participants received support and debriefing from the Division staff.

An orientation meeting before the clinical visits introduced the GP participants to palliative care specialists and the GP mentors for the project. Most GPs who nominated to be mentors had previous experience in that role through the Aged Care Program implemented by the Division.

Table 1. Deliverables, process and outcome of the Palliative Care Mentoring project.

<table>
<thead>
<tr>
<th>Deliverables</th>
<th>Process and outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>A suite of resources including links to community services and education material, which is accessible to GPs and practice staff on the Sunshine Coast</td>
<td>Development of the resource is an ongoing activity. The Division’s website is updated with relevant material and maintains liaison with the palliative care services.</td>
</tr>
<tr>
<td>Closer integration of services between GPs, hospice and community palliative care providers</td>
<td>Integration of services has improved through the links established between GPs and the palliative care providers. The GPs’ understanding of the interconnection between primary, tertiary and community services facilitates a smoother transition for the palliative care patients.</td>
</tr>
<tr>
<td>Professional development of GPs and Practice staff</td>
<td>A series of palliative care educational sessions provided by palliative care specialists are ongoing.</td>
</tr>
</tbody>
</table>
Evaluation

General Practitioners participants were positive about the benefits of the palliative care mentoring program in terms of enhancing their understanding of palliative care processes, and how to access appropriate services. It was suggested that the timeframe for completing the program needed to be extended to overcome the difficulty of coordinating mentors availability with the time of participant’s clinical visits.

Budget expenditure: please see Appendix A1

2. GP Connections - Toowoomba

Project title: Palliative care: Choose Your Own Adventure

Summary of project

The key activity of the project was the design and development of an educational tool that would be accessible to GPs both online through the Australian College of Rural and Remote Medicine (ACRRM) and as a CD ROM. The GP Activity Advisors group established for previous related projects developed by GP Connections, provided input to the construction of the education tool, ‘Choose Your Own Adventure’.

The education design and production of the CD ROM was completed on time and within budget. However, technical difficulties have delayed the successful transfer of the tool to the e-learning medium of the ACRRM website. Consequently the evaluation of the project is postponed until November when all components of the project are completed. The evaluation report will be forward to CPCRE.

Project description

‘Palliative care: Choose Your Own Adventure’ is a CD ROM tool that takes the GP/Registrar through a series of case studies. The studies are presented in chapters, which mark a point when the participants are invited to choose from a number of options. The participants are then presented with the consequential scenario of their choice and if necessary may reconsider the path chosen. The educational design of the program is presented in diagram 1.
Diagram 1: Component design for - Palliative care: Choose your own adventure

Project outcomes
Palliative care: Choose your own adventure is an education tool designed for flexible delivery and optimal access for GPs throughout Queensland.

Evaluation
On completing the ‘Choose your own adventure’ education program, participants will be directed to a survey which can be completed online or as hard copy. The survey will seek responses related to; clinical applicability, usability and functionality of the education tool. The final evaluation report will be forwarded to CPCRE in November 2007.

Budget expenditure, see appendix A2

3. Southern Queensland and Rural Division of General Practice
Project title: GP Palliative care resource kit

Summary of project
The primary focus of the project was to develop an educational resource kit that build on the Division’s Rural Palliative and Advanced care program. This later program was developed through a local palliative grant awarded by the Commonwealth Department of Health and Ageing. The GP Palliative care resource kit was developed in collaboration with local stakeholders including GPs, community service providers, and Allied Health and District Health representatives.
The template of the resource kit enable updates to information and modification of the details and resources to suite other regions.

Project details

The overall objective of the project was to develop a resource of local information on services, educational materials and other resources to support GPs in providing palliative care for patients in the Roma Health Service District. The kit also includes information for the patients and families, about palliative care services and related organisations.

The purpose of the GP Palliative care kit is to:

- Educate GPs and other health professionals about the palliative care services that complement existing GP services
- Improve accessibility to local services
- Enhance the quality of care for patients/families dealing with palliative and advanced care needs
- Increase awareness of palliative care amongst the wider community

Sustainability and accessibility

The GP Palliative Care Kit was developed as a template that can be accessed via the SQRDGP website. The template is available for other GP Divisions and non-government organisations to use for developing similar resources.

Budget

<table>
<thead>
<tr>
<th>Funds received (ex GST)</th>
<th>$4,545.45 ($5,000.00. GST inc)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expenditure</strong></td>
<td></td>
</tr>
<tr>
<td>Liaison Officer</td>
<td>$2,000.00</td>
</tr>
<tr>
<td>Resource and printing</td>
<td>$2,545.45</td>
</tr>
<tr>
<td>Total expenditure</td>
<td>$4,545.45</td>
</tr>
</tbody>
</table>

4. Ipswich and West Moreton Division of General Practice

Project title: GP Palliative Care Journal Club

Summary of project

The project involved the development of a palliative care educational forum through the medium of a journal club and clinical network for GPs in the Ipswich and West Moreton District. The journal club was designed for flexible delivery mode which initially is via teleconferencing with an option for online access in the future.

Project details

The project was developed as a joint venture between the Ipswich Hospice, Ipswich Hospital palliative care service and GP Connections. All GPs in the Division were given an opportunity to contribute and participate
in the journal club. Articles for journal club discussion were sourced by CPCRE staff; this was to supplement the project resources which were compromised because the funding awarded was less than requested.

Three journal club meetings were successfully undertaken during the 2006-07 funding period. The interest in the continuation of the GP palliative care journal club has assured its sustainability. Monthly meetings have been programmed for the next year and further funding will be sought to extend the project.

Budget expenditure - see appendix A4.

5. South East Alliance of General Practice

Project title: A Collaborative approach to developing GPs knowledge and skills in palliative care

Summary of project
The project was a model of education which comprised a series of workshops with an emphasis on interactive learning styles. The project was developed as a cooperative venture involving, SEA-GP, Directors of Nursing from local Residential Aged Care Facilities (RACF), Brisbane South Palliative Care Services, and SEA-GP Aged Care Program Officers. Three workshops were presented and covered topics relating to symptom management, dementia care, case conferencing and ethical decision making.

Project details
A four stage approach was used to develop the project:

1. A questionnaire to determine GP’s, palliative care case loads, perceived learning needs, status of knowledge of palliative care resources, use of EPC items in palliative care, and suggestion for workshop topics.
2. Identification of GPs who participated in previous palliative care education programs to invite their contribution to the project.
3. Establish a panel of GPs and other stakeholder to develop and facilitate workshops.
4. Evaluation of workshops and project

The problem based approach using actual case studies supplied by the attending GPs provided the interactive focus of the workshops. Health professionals from other disciplines also attended the workshop which encouraged cross-discipline discussion relating to the case studies. The workshop was well attended with representatives from 9 GP Practice and 10 RACFs which amounted to over 100 participants for each workshop.
Project Evaluation
The workshops were evaluated using a survey form on completion of each event.
The success of the palliative care education model developed for this project was attributed to the input and participation by the GPs, and cross-discipline interaction, which resulted in content and process that was meaningful and useful to their practice.
The evaluation suggests that this model of education is sustainable because it is needs-based and therefore can be replicated or modified according to specific learning needs.

Budget expenditure

| Resource for GP participants (includes paper, photocopying, folder) | $200.00 |
| Venue hire x 2 workshops                                      | $500.00 |
| Catering                                                      | $1,748.00 |
| Program officer                                               | $1,080.00 |
| **Total**                                                     | **$3,528.00** |

6. Capricornia Division of General Practice

**Project title:** The Capricornia Palliative Care Project

**Summary of project**
The project comprised of two complementary elements;

1. Supervised clinical placements with Mt Olivet Community Services
2. Follow-up education day

Three GPs successfully completed a five day placement with Mt Olivet which provided them with opportunities to observe and participate in the clinical management of patients at home. Following the clinical experience the GPs contributed suggestion of topics for the follow-up workshop and conference. The Conference workshop program with the presenters is shown in Table 1.

**Table 1. Conference program**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paediatric palliative care</td>
<td>Dr Anthony Herbert</td>
</tr>
<tr>
<td>Anaemia and Lymphoma</td>
<td>Dr Steve Fanning</td>
</tr>
<tr>
<td>Chronic Leukaemia and Hypercoagulopahty</td>
<td>Dr Sue Moreton</td>
</tr>
</tbody>
</table>

The conference program was repeated during the day to ensure all the GPs had the opportunity to attend the palliative care sessions. Thirty four GPs attended the conference which they rated at 3.75 out of 5 for format
and teaching style, and 3.47 out of 5 for skills and knowledge levels gained.

A sustainable outcome of the project is a resource package of references and other resources accessible that may assist other GPs in their clinical management of diverse palliative care patients.

**Budget**
The GP palliative care education grant of $4,500 received from CPCRE contributed part cost of the actual project budget of $7,440.91. The budget summary is included as attachment A6.

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7. Wide Bay Division of General Practice

**Project title:**  Completing a Palliative Initiative

The project reported here is the final stage of the Division’s ‘Practicing Palliative Care Initiative’ to provide education and supportive service that build the capacity of GPs to provide clinical management and coordinate supportive care for palliative care patients.

Components of the Practicing Palliative Care included: completed survey of educational needs and resource, development of educational resources, establishment of the Palliative Access Links (PALs) group and construction of a resource folder of palliative care central and adjunct services. The final stage of the Initiative was the development of a program of ongoing education forums facilitated by local and visiting palliative care specialists and GPs with appropriate experience. The education forums were developed in collaboration with the Palliative Access Services Bundaberg.

Two palliative care education events were conducted one in Bundaberg and the second at Fraser Coast. The attendees at both events reflected the ‘team approach’ of palliative care, with in total, 18 GPs, and 3 practice nurses, 7 community pharmacists, 7 hospital pharmacists, 4 hospital nurses, 1 SMO, and 3 RACF nurses attending.

**Evaluation**

Table 1 shows the Learning objectives and evaluation rating

<table>
<thead>
<tr>
<th>Learning Objective</th>
<th>Not Met %</th>
<th>Partially Met %</th>
<th>Entirely Met %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Broadened understanding of Palliative Care</td>
<td></td>
<td>87.5</td>
<td>12.5</td>
</tr>
<tr>
<td>2 Raised awareness of the role of Palliative Care</td>
<td></td>
<td>75</td>
<td>25</td>
</tr>
<tr>
<td>3 Extended knowledge of the implementation of palliative strategies for the management of pain for clients experiencing a life-limiting illness</td>
<td></td>
<td>78</td>
<td>22</td>
</tr>
<tr>
<td>4 Provided greater understanding of the benefits of pain management and palliative care for clients experiencing a life-limiting illness</td>
<td></td>
<td>55</td>
<td>45</td>
</tr>
</tbody>
</table>
Sustainability

The Division continues to work with Palliative Care Australia and CPCRE in supporting GPs in the provision of palliative care by promoting resources and services available. Palliative Access Bundaberg Service provides mentoring support to GPs in the provision of palliative care and it is hoped that further opportunities will present for collaborative events to enhance skills and knowledge of General Practitioners on pain and other symptom management in palliative care.

Budget- please see appendix A7
CONCLUSION
The Centre for Palliative Care Research and Education, in its management of the Queensland Health General Practitioner Palliative Care Education Initiative, has supported the development of GPs’ capacity to provide medical management and coordinated supportive care for palliative care patients in the community. Several of the projects reported for the 2006-2007 period built on existing programs by adding to educational modules and service directories, and expanding the scope of resources that support GPs in providing palliative care. Some Divisions fostered collaboration between GPs and specialist palliative care services through mentoring programs, and a flexible delivery journal club that had the added component of ongoing liaison with the specialist staff.

The overall success of the GP Palliative Care Education Initiative is evident by the Divisions’ continuing development and increasing numbers of GPs interested in pursuing palliative care projects that build capacity and resources for their practice. In addition specialist palliative care providers have developed consultative and educational links with GPs which leads to better outcomes for patients in terms of coordinated continuum of palliative care.

RECOMMENDATIONS
The recommendations are based on an analysis of the Division’s reports, verbal feedback from project managers and CPCRE’s perspective as managers of the program. For the future of the GP Palliative Care Education Program it is recommended that:

- The application and selection process be streamlined to optimise the project time, by giving a three months notice of the due date for applications.
- CPCRE to encourage compliance with reporting by sending out proforma one month before due dates
- A needs survey is sent to Divisions that have not previously applied for or received a GP palliative care education grant
- Publication of completed projects in Centre Line: CPCRE Newsletter and link web sites including CPCRE, RACGP and ACRRM.
- Deliverables such as the resource folder and CD ROM, are promoted to all Divisions and GPs through the web links and other relevant media
The Divisions liaise with CPCRE and the Program of Experience in the Palliative Approach (PEPA) state manager to ensure GPs access the program.

ACKNOWLEDGMENTS

CPCRE acknowledges with gratitude the time and contribution of the General Practice Education Expert Committee to the success of the GP Education Program, in particular:

- Ms Ann Maree Liddy CEO Queensland Divisions of General Practice
- Dr John Buckley, Medical Education Director, Centre and Southern Queensland Training Consortia
- Dr Carol Douglas, Director of Palliative Care Services, Royal Brisbane and Women’s Hospital
- Mr Lex Lucas, Multimedia Project Manager Australian College of Rural and Remote Medicine
- Dr Geoff Mitchell, Centre for General Practice. University of Queensland
- Dr Deborah Prior, Director of Learning and Development CPCRE
- Mr Tim Heywood, Queensland Division of General Practice