PALLIATIVE CARE NEEDS ASSESSMENT (PCNA) AS A CORNERSTONE TO IMPLEMENTING AN INTEGRATED MODEL OF PALLIATIVE CARE PROVISION

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Aims / Objectives

Aim:

• **To improve quality of life for people with life limiting conditions and their families**
  • By introducing national standardized guidance on palliative care needs assessment (PCNA)
  • By building staff competence and confidence in using person-centred approaches to lead change and implement PCNA in their workplace

Objectives:

• To provide resources to guide PCNA

• To further develop staff in person centred approaches to palliative care using emancipatory practice development methodologies (ePD).

• To build communities of practice that support the implementation of an integrated model of palliative care provision.
Palliative Care Needs Assessment

PCNA guidance document
• Who, what, when, where and how should assessment take place?
• Provides sample questions to support assessor
• Links assessment to development of care plan
• Describes how specialist palliative care referral may be made if needed

Accompanying Resources
• A3 Poster of domains
• Accompanying PowerPoint Presentation
• E-Lessons
• Bespoke education programme

This initiative is not about specialist palliative care! It is about embedding a palliative care approach in all care environments.
Person centred approach

PCNA isn’t simply a technical skill. It’s about creating an environment of person-centred care in the context of a life-limiting condition. Culture change is often required to embed this approach in care.

Two levels......

Develop facilitators

- 2-day workshop of specialist and generalist partners
- 2 online lessons
- Emancipatory practice development methods formed basis of workshop

Bedside training

Staff with expertise in palliative care (e.g. people with special interest, specialist palliative care staff, facilitators) can use guidance at the bedside to support training and can signpost individuals to the online lessons (HSELand)
Progress to date

July 2014 PCNA published

April 2015: implementation

June ‘16: Evaluation

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Oct ‘14- March ’15: 72 facilitators trained

April 2016; Shared learning event
Evaluation and results

Kirkpatrick’s evaluation

What has worked for whom, where, why?

- 19 programmes
- 200 new facilitators
- >350 staff - information sessions
- Shared learning event
Our learning

• Need is real. Still early days.
• Process is demanding, though invigorating.
  - Importance of time and leadership needed for culture change affirmed
• Appetite for this is notable in certain settings-what about the settings that are not engaging?
• Moving on to Kirkpatrick’s fourth level of evaluation, what about patient outcomes?
• Next steps:
  - NW initiative, NE initiative, considering requirements for acute hospital engagement
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www.hse.ie/palliativecareprogramme/resources

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