

24 June, 2016

Mr Todd Buttsworth  
Secretary, House of Assembly Standing Committee on Community Development  
Parliament House  
HOBART 7000

Dear Mr Buttsworth

**Re: Inquiry into Palliative Care in Tasmania**

Thank you for inviting us to respond as an interested party, to the Inquiry into Palliative Care, Tasmania. I offer the following synopsis of the services offered at the Melwood Unit, which is a part of Calvary Health Care Tasmania and is located at St Luke's Hospital, 24 Lyttleton Street, Launceston.

The ward consists of 15 single rooms with ensuite, kitchenette and soft furnishings. One room has been furnished to provide a relaxed and appropriate environment, catering for the needs of young people undergoing palliative care. Included in the room are a Wii, DVD player, DVDs and games. Each room has a view, either out to trees with birdlife, or beautiful views over the mountains. There is also a separate bathroom with a bath for therapeutic relaxation sessions. At one end of the unit we also have a family room for relatives and visitors, which contain tea and coffee making facilities, a bathroom and a lounge area for people to sit and relax, take a break or grieve for their loved ones. Outside we have a sheltered garden area.

Calvary's role, in collaboration with Palliative Care North, is to provide an inpatient specialist palliative care service across Northern Tasmania. Using a combined model of four public funded beds and eleven private, we are able to be flexible in ensuring patients receive the care they need in a timely fashion. There is also a bed available to accommodate emergency admissions for patients whose condition is rapidly deteriorating or for the patient who has attempted discharge but has been unable to manage and needs to return for further nursing care.

We admit to the unit via referral from the Community Palliative Care Team or from the Launceston General Hospital, with the Palliative Care Specialist Consultant providing inpatient care. General Practitioners (GPs) in our community are able to refer directly to the Palliative Care Specialist for management of the admission, or can chose to opt for individual or shared care.

Patients are admitted to the Melwood unit for a number of reasons and at different stages of their illness including: end of life care, respite for the patient or for the carer and also for symptom control. The length of stay for these patients varies from only being on the ward 30 minutes or up to over a year; however, the average is between 2-3 weeks. As each patient is admitted with different symptoms and at different stages of their illness, they have an individual care plan that takes into account their wishes, is flexible to their particular needs and has an overall aim of improving quality of life. For example, for our long term patients requiring palliative care that cannot be provided in other environments, the ward becomes their home and staff become part of their family. Patients are encouraged to bring in photos and belongings to make it as homely as possible. Pets are allowed to come into visit. Patients are encouraged to go on overnight leave and day leave if desired such as going out for a drive, to the movies or home. We have the benefit of access to Palliative Care volunteers who will escort a patient on their outing or just sit with

them for company. We have an open door policy with no allocated visiting times and family members and loved ones are encouraged to spend as much time with the patient as both want, including staying the night.

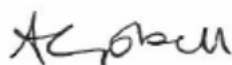
Spiritual care is an essential component of the Melwood Units holistic approach for both patients and families, regardless of their spiritual or religious beliefs. Support is provided by Calvary's highly experienced full time pastoral care team, as well as other community providers that are able to cater for specific spiritual needs.

As a dedicated palliative care unit, we utilise a collaborative, interdisciplinary team approach to achieve comprehensive patient focused outcomes for our patients and their carers and families. Our team consists of our Specialist Palliative Care Doctor (who is available 24hrs a day - 7days a week), a Medical Registrar (Monday to Friday during business hours), trained and experienced palliative care nursing staff, GPs, our Department of Health and Human Services Partners in Health, Allied Health Professionals including Physiotherapists, Occupational Therapist, Speech Therapist, Dietician, Pharmacist and a full time Social Worker. Additionally, our patients can access Pastoral Care and Palliative Care Service North including Social Workers, Occupational Therapists, Liaison Nurse, Community Nurses, Volunteer Coordinator and Volunteers.

Twice a week, the Melwood team and the community based team come together for an interdisciplinary meeting to review each patient individually. These meetings enable input from a variety of professionals, ensuring all patients health care needs are integrated and addressed on an ongoing basis, which is responsive to change in their needs and conditions. This allows for a seamless transition from hospital to home and vice versa. Another benefit is being able to flag potential need in the community and advanced care plans and directives can be addressed:

- (I) If patients have established their goals of care and do not wish aggressive resuscitation in the event of their deterioration, this is reviewed alongside their inpatient plan of care. All such matters are subject to rigorous review by the treating medical team and would be dealt with in the context of a thorough exploration of all life sustaining treatments and therapies.
- (II) Minors are rarely admitted, however, the principles of palliative care would apply and consultation with family is of paramount importance in these cases.
- (III) Calvary St Luke's and St Vincent's Hospitals do not currently have an emergency department, so patients requiring emergency/crisis admission can be referred directly to the unit.
- (IV) Our collaboration with the community is robust and has allowed greater community access to palliative/hospice care via the publicly funded beds we are able to offer. The unit is highly acclaimed and is extremely effective judging by feedback from patients and their families.

Yours sincerely



Allison Campbell  
**Director of Clinical Services**

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