

Out of Hours Specialist Palliative Care Telephone Advice in Specialist Palliative Care Services Ireland

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Introduction

More than 70% of patients with palliative care needs would prefer to receive care at home if they can access appropriate services and support there (Johnston et al 2019)¹. In 2015 the provision of Specialist Palliative Care (SPC) advice out of hours (OOH) was identified as the #1 palliative care research priority for Ireland by the All-Ireland Institute of Hospice and Palliative Care Palliative Care Research Network (PCRN)². The provision of telephone advice is a key component of SPC advice OOH.

Background

This study was developed to evaluate the provision of OOH telephone advice by Specialist Palliative Care (SPC) services in Ireland. To date there has been no research on the provision of OOH SPC telephone advice in Ireland. There are no guidelines or agreed standards to guide this important component of the service provided by SPC services nationally. The need for patients, their carers and healthcare professionals to be able to access SPC OOH advice twenty-four hours a day, every day is a key component of the 2019 HSE Adult Palliative Care Model of Care for Ireland³.

<u>Aim</u>

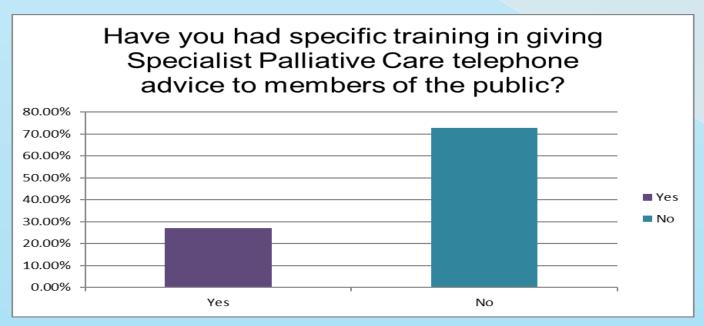
The aim of this survey was to assess the confidence and competence of SPC staff in providing telephone advice out of hours.

Methods

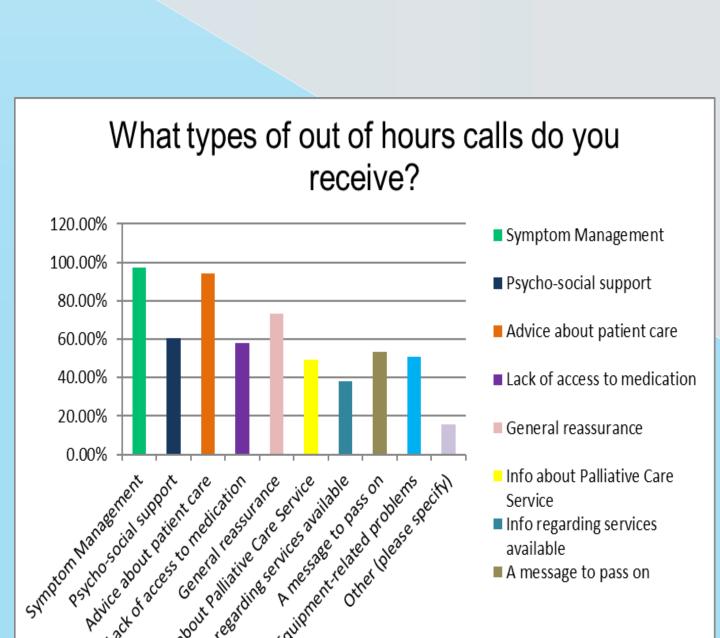
This was a survey of the provision of OOH SPC telephone advice by SPC healthcare professionals in Ireland. Two separate questionnaires were circulated via SurveyMonkey to each specialist palliative care organisation in Ireland. One was for completion by staff providing out of hours advice and the other by managers within the organisation. Results were analysed using the SurveyMonkey tool.

Findings/Results

- 75 staff (69% nurses & 31% doctors) who provide specialist palliative care OOH advice responded.
- 97% of OOH calls related to symptom management.
- 73% of respondents reported having no specific training in giving specialist palliative care telephone advice.
- 36% of respondents recalled being unable to answer or manage at least one palliative care related query.
- In 58% of cases the query they were unable to manage related to symptom management in the previous six months.
- 44% of people felt ill-equipped and uncomfortable when giving OOH telephone advice.
- 92% of respondents felt that having a set of national standards to guide OOH advice would be helpful.







If you were unable to answer a specific

query, please indicate the type(s) of calls

you were unable to deal with.

60.00%

50.00%

40.00%

30.00%

20.00%

Symptom management

■ Psycho-social support

Advice about patient care

■ Lack of access to medication

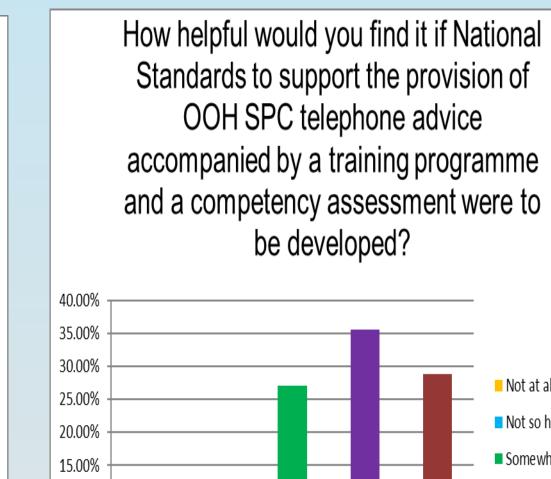
Info about Palliative Care Service

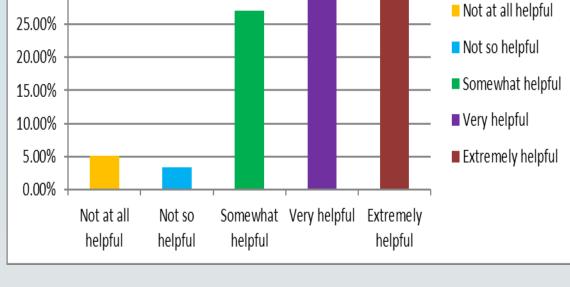
Info regarding other services

■ Equipment-related problems

■ General reassurance

■ A message to pass on





Conclusion and Recommendations

The staff providing Specialist Palliative Care advice Out of Hours are not always confident in their ability to provide this advice and the majority have received no training to do so. Our study confirms the need for standardisation of practice and highlights the requirement for nationally agreed guidelines for the provision of Out of Hours Specialist Palliative Care advice to be developed.

References

- 1. Johnston B, May P, McCauley R, et al. Out-of-hours specialist and generalist palliative care service provision: an evidence review. Dublin: Health Research Board; 2019.
- 2. All Ireland institute of Hospice & Palliative Care. Palliative and End of Life Research Priority Setting Project for Northern Ireland and Republic of Ireland. Dublin: AllHPC; 2015. Available: https://aiihpc.org/wp-content/uploads/2018/12/PeolcPSP-AllHPC-report.-FINAL.-april.15.pdf

3. National Clinical Programme for Palliative Care. Adult Palliative Care Services, Model of Care for Ireland. Dublin: Health Service Executive; 2019. Available: https://www.hse.ie/eng/about/who/cspd/ncps/palliative-care/moc/ncp-palliative-care-model-of-care-24-04-0219.pdf

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