



DECEMBER 2005



PCWA - CHANGING OF THE GUARD

When asked to consider taking on the role of President of Palliative Care WA, my first thought was the enormity of the task of following in Clive Deverall's footsteps. Clive, we all know, is a quiet man. He is a man who gets the job done. A man whose commitment to Palliative Care WA has been unequalled in recent times. Clive, we express our great gratitude to you and wish you well in whatever you do. We know you will always be giving your time and energy to a good cause. We will do our best to build on the good work you have done for this association.

My first official duty as President of PCWA was to attend the St Luke's Day Service at Winthrop Hall. This most moving service brought my attention to the reality that this association exists for the people who are the providers of palliative services in WA and through them those who receive palliative care and their loved ones. It developed a clear focus that as a movement we are truly interdisciplinary, truly holistic. Palliative care has a soul that is clearly expressed at the St Luke's Day Service and this is where the work of this organisation should seek its foundation. There are important issues at hand in palliative care. Issues



Clive Deverall hands over the reigns to Scott Blackwell (Left)

that should and will occupy the time and thoughts of PCWA in the coming year. At this time I would like to highlight two. Firstly this is an era of reform. Good things arise from the reform process. Our future is being realigned, redesigned. I see a very clear role for the association in this process. There will be change and the associations role is to look after and care for the people who are its members through this time. In times of change people can often be overlooked, can often be hurt. PCWA must be aware of the needs of its members as a new and better future is built.

Secondly there is a need to follow through on the "Medical Treatment of the Dying" legislation. As we speak it is a little unclear what is happening with this legislation. The association has put in a lot of time and effort to influence this process, it is thus appropriate that we seek a conclusion to this work. A meeting with the Minister Hon Jim McGinty is scheduled in the near future to determine where this legislation is headed. We will keep the members updated on progress.

Finally, by the time we go to press it will be appropriate for me to wish you all the compliments of the season. We will look forward to a successful year in the palliative movement in 2006.

Scott Blackwell - President - PCWA

STOP PRESS - COTTAGE HOSPICE CLOSURE

The situation following the announcement of the closure of "Cottage" is changing daily.

Since our recent letter to members the Vice President, Stephen Carmody, and I met with Dr John de Campo and I list the essential outcomes on the following page:-

Cont'dCottage Hospice Closure

1. North Metropolitan Health looked at the option of keeping "Cottage" open as an interim measure. The cost of maintaining the present facilities in a satisfactory state as a short term option was not viable.

2. Dr de Campo is aware of the service delivery shortfall in the current redistribution plans with regard to the North.

3. Agreement was reached that a group of clinicians from palliative care would be asked to advise on suitable interim service arrangements in the North (currently being formed).

4. Agreement was reached that a purpose specific unit can be developed at Joondalup Health Campus by 2008.

5. Interim service delivery in the form of public beds in the North will be considered and potential options at Joondalup or OPH will be examined as a matter of urgency.

6. Dr de Campo is aware of the specific need to preserve the culture and philosophy of palliative care. He agreed that this included the recognition of the expertise of the staff at Cottage. In particular the nursing expertise at Cottage is important to development of successful future services.

Essentially there is flexibility in how the future will roll out, and there is commitment to appropriate services in the North.

This leaves PCWA to work together with service providers and The Cancer Council to make sure that the eventual outcome is a good one, both in the long term and as an interim measure.

We will keep talking and keep you informed.

Scott Blackwell.

THE DRIVER!

After getting all of Pope Benedict's luggage loaded into the limo, (and he doesn't travel light), the driver notices that the Pope is still standing on the curb.

"Excuse me, Your Holiness," says the driver, "Would you please take your seat so we can leave?"

"Well, to tell you the truth," says the Pope, "they never let me drive at the Vatican when I was a cardinal, and I'd really like to drive today.

"I'm sorry, Your Holiness, but I cannot let you do that. I'd lose my job! And what if something should happen?" protests the driver, wishing he'd never gone to work that morning.

"Who's going to tell? Besides, there might be something extra in it for you," says the Pope with a smile.

Reluctantly, the driver gets in the back as the Pope climbs in behind the wheel. The driver quickly regrets his decision when, after exiting the airport, the Pontiff floors it, accelerating the limo to 105 mph.(Remember, he's a German Pope.)

"Please slow down, Your Holiness!!!" pleads the worried driver, but the Pope keeps the pedal to the metal until they hear sirens.

"Oh, dear God, I'm gonna lose my license -- and my job!" moans the driver.

The Pope pulls over and rolls down the window as the cop approaches, but the cop takes one look at him, goes back to his motorcycle, and gets on the radio.

"I need to talk to the Chief," he says to the dispatcher.

The Chief gets on the radio and the cop tells him that he's stopped a limo going a hundred and five. "So bust him," says the Chief.

"I don't think we want to do that, he's really important," said the cop.

The Chief exclaimed, "All the more reason!"

"No, I mean really important," said the cop with a bit of persistence.

The Chief then asked, "Who ya got there, the Mayor?"

Cop: "Bigger."

Chief: "Governor?"

Cop: "Bigger."

"Well," said the Chief, "Who is it?"

Cop: "I think it's God!"

"The Chief is even more puzzled and curious: "What makes you think it's God?"

Cop: "He's got the Pope as a chauffeur".

PCWA'S NEW EXECUTIVE COMMITTEE

Following elections at last September's AGM the following members of PCWA now make up the new Executive Committee:

Scott Blackwell (President), Stephen Carmody (Vice President), Sue Henning (Hon Treasurer), Janette Newstead (Hon Secretary), Pru James (Marketing), Kerry Cousins (Newsletter Articles), Lynn Oldham, Trudy Smoker, Eleanor Roderick, Sharon Lenton

We take this opportunity to thank Helen Walker for all the hard work she has done for PCWA over the years and welcome new member, Eleanor Roderick, CEO Murdoch Community Hospice.

Eleanor was originally a Qualified Registered Nurse and Specialist Children's nurse in Dublin, Ireland. Specialist Children's Nursing was initially her main interest, especially in the area of neonatal care and metabolic diseases and this was the career she embarked on until another door opened that she decided to explore.

Prior to pursuing a career in Palliative Medicine, Eleanor worked for 2 years in Oncology at St. Vincent's Hospital in Dublin and it was in this role, that she was introduced to Palliative Care by Dr. Michael Kearney, who was a Palliative Care Physician at the Hospital and also at Harold Cross Hospice in Dublin. Dr. Kearney was one of the main reasons that Eleanor pursued a career in Palliative Medicine. He was an inspiration and under his guidance she learned that we are always challenged to know more, to help more effectively and most of all to listen to people who are faced with a life threatening illness. He used the words "silent attention".

After working in a mission camp in Kenya and then going on to Riyadh, Saudi Arabia, as a Clinical Nurse in Paediatric Oncology, Eleanor spent 3 months in Alice Springs in paediatrics to gain an understanding of Aboriginal culture. She then returned to the UK and worked in a newly established Hospice in the North East of England and completed studies in relation to Palliative Care.

On emigrating, with her husband, to Perth in 1995, Eleanor worked at The Cottage Hospice and completed the conver-

sion course Hospital based nurse training to a Degree level at Edith Cowan University before joining Murdoch Community Hospice in August 1998 as Chief Executive Officer.

Eleanor says "My role at Murdoch Community Hospice has been one of diversity, personal and professional growth. To be involved in the establishment of a Hospice South of the River and to work with such a wonderful team of staff and volunteers who provide an exceedingly high standard of care to patients and their families is a unique experience and has not been without its challenges.

In an ever-increasing materialistic world, we often lose sight of the meaning of life. Working closely with patients who have a life limiting illness is a privilege. Palliative care is not solely about medical intervention, it is also about 'walking alongside a patient in silence or meeting practical needs and help them to find what they need to give them assurance and peace".



**Eleanor Roderick
CEO Murdoch Community Hospice**

DIARY DATES - 2006

National Palliative Care Week – 21 - 27 May 2006

WA State Conference 2006 – 'Beyond The Picket Fence' at The Parmelia Hilton on Thursday 24 and Friday 25 August 2006

PALLIATIVE CARE ADVISORY GROUP NOVEMBER 2005 - UPDATE

As you recall from previous newsletter reports, a project is underway to provide direction for state palliative care services for the future. The Palliative Care Advisory Group (PCAG) provided a report to the Health Reform Implementation Taskforce (HRIT) on 21 June 2005 in response to the draft Clinical Services Framework. This phase of the review was limited to metropolitan inpatient needs and issues and more particularly to bed allocation in the metropolitan area, as a response to the Clinical Services Framework released by the HRIT. This report has been positively received and is being incorporated into the plans for the Cancer & Palliative Care Network that will be charged with implementing recommendations.

The second phase of this review is nearing completion and is considering the palliative care needs of the following special groups: rural and remote, aged, paediatric, non-malignant, Indigenous Australians, community-based services, long-term and medium-term patients. This phase of the review is identifying specific needs of these groups that warrant attention in order to improve services and ensure equity of access to palliative care.

The analysis of palliative care hospitalisations in the last five years reveals that there are more patients using North Metro palliative care services than there are palliative care patients who live in that area, while the situation is reversed in South Metro, thus supporting the need for additional palliative care beds in the south metropolitan area to provide care closer to home. The projection of separations, bed-days, beds and beds per 100,000 population, up to the financial year 2015/16, shows a steady increase in service activity for North and South Metro areas equally. Furthermore a geographic distribution of need for services, based on distribution of deaths in a 2.5 year period from malignant and non-malignant conditions needing palliative care services, supports the approach of making palliative care beds available outside the central metropolitan area, particularly, as recommended in the Health Reform report, in areas such as Joondalup, Swan, Armadale and Rockingham. It is important to note that 40% of these deaths were due to non-malignant conditions, which need to be taken into account when considering bed allocation. Overall there is support for the existing model of palliative care in WA that is essentially community-based with multidisciplinary teams linking with hospices and acute care hospitals, the latter operating on a consultative model of care. Recommendations offered in this report are provided within this broader context of palliative care, recognising that inpatient beds are only one aspect of a larger, well-linked system of palliative support.

The full report will be completed by December 2005 and will be submitted to Dr Neale Fong and the Health Reform Implementation Taskforce.

This is an exciting opportunity within Western Australia to chart innovative directions for palliative care based on principles of equity, access and excellence in care. I am indebted to members of the Palliative Care Advisory Group who have worked tirelessly on this review and members of the Health Department of WA for their advice and assistance with this work. A special thanks is also extended to Dr Samar Aoun (Project Manager), Dr Lorna Rosenwax (Consultant) and Mrs. Jayne Walton (Research Assistant) for the diligent work on this project.

Professor Linda Kristjanson Chair, Palliative Care Advisory Group



Professor Linda Kristjanson

Members of Palliative Care Advisory Group

Dr Doug Bridge, Mr. Stephen Carmody, Ms. Jenny Dodd, Mr Gareth Griffith, Ms. Amanda Leigh, Ms. Susan Kaye, Ms. Michelle Kosky, Rev Terry McAuliffe, Dr Marianne Phillips, Dr Sarah Pickstock, Ms. Eleanor Roderick, Dr Anil Tandon, Ms. Penny Tuffin

WA Health Dept Staff

Mr Clory Carrello, Ms Liza Houghton, Mr Jason Micallef

COMMUNITY SERVICES INDUSTRY AWARDS 2005 WON BY MURDOCH COMMUNITY HOSPICE

ACHIEVEMENTS OF THE MURDOCH COMMUNITY HOSPICE VOLUNTEER PROGRAM

NATIONAL AUSTRALIA BANK VOLUNTEER AWARDS 2005

The philosophy of the National Australia Bank Volunteer Awards is to recognise and reward volunteer groups across Australia that demonstrate 'best practice' in the management of volunteers. Best practice volunteering can be demonstrated by the adoption of a systematic approach to managing volunteers and an approach that aims to meet the needs of volunteers so that they in turn are able to meet the needs of those to whom they provide a service.

Award Categories: Community Service and Development; Education and Youth Development; Emergency & Safety Environment and Wildlife; Health & Well Being

The Murdoch Community Hospice Volunteer program was entered in the Health & Well Being category .and was nominated State winner in the Health & Well Being Category .

State Winners: As State Winners we received a cheque for \$7,000 to be used for the organisation's activities and a framed certificate.This is the third time we are the proud State Winners of the National Australia Bank Award for our Volunteer Program.

COMMUNITY SERVICES INDUSTRY AWARDS 2005

The Community Services Industry Awards celebrate and recognise the enormous contribution and tireless efforts of people and organisations statewide which make up the Western Australian community Services industry and whose work continues to make a positive difference in the lives of all Western Australians.The Murdoch Community Hospice Volunteer program was entered in the category "Strengthening Volunteering" and was selected as a finalist. There will be a Morning Tea for the presentation of the finalist certificates on the 15th of November at St Pat's Community Centre in East Fremantle. A selected team of staff and volunteers will accompany me to the ceremony. The Award winner will be announced at a presentation evening on 29th November 2005.

Michelle D'Silva - Education, Training & Development Coordinator of Volunteer Services



Linda Minutillo - Clinical Nurse Manager, Marlene O'Malley - Administration Coordinator, Des Barratt -Volunteer, Elizabeth Windeyer - Volunteer, Catherine Whitelaw - Volunteer, Pat Segreto - Volunteer, Jane John - PCA, The National Bank Manager and Michelle D'Silva (centre) holding the cheque.

ST LUKE'S AT WINTHROP

On Thursday the 20th October the Palliative Care Providers in Perth joined together in offering the annual memorial ritual for the families of those who have died within our Palliative Care services in the last twelve months. The service this year was marked by a change of location, for nearly two decades we have enjoyed the hospitality of St Mary's Cathedral in the city but due to the planned renovation and addition to the Cathedral, we had to look elsewhere. When first we talked with the University of WA, they were very enthusiastic and welcoming to Palliative Care WA. They offered the use of Winthrop Hall and did whatever they could to assist us as we prepared for the 2005 Service. There were numerous uncertainties, given the change of venue, but it all came together very well and proved to be yet another meaningful and appreciated service. The attendance this year was approximately 700. The Wesley Church choir and organist helped create the atmosphere as people gathered in the rather grand Winthrop Hall. Included in the list of those who have died in this past year was the founder of the modern hospice movement, Dame Dr Cicely Saunders, who died on the 14th July. Gathering in Winthrop Hall created an interesting coincidence, for 28 years ago Dr Cicely Saunders addressed a crowd of people who had gathered

in Winthrop Hall to hear her talk of the new and evolving discipline of Palliative Care. It brought a deeper meaning to our service this year as we remembered that she too had died within Palliative Care, at St Christopher's Hospice in West London. So as we all continue in our work, we do well to remember that a foundation has been laid by many others and Cicely Saunders is one of those.

One of the special guests, Bishop Donald Sproxtton who represented the Heads of Christian Churches, commented that during the service the lighting of the many candles was very moving. This continues to be a significant part of the St Luke's Day Service and given the new venue we were relieved that we could do so without incident. Immediately following the service, supper was served in the Undercroft. This year Trinity Residential College generously provided and served the supper and many comments were made about how well the supper worked especially given that people did not have to walk far. We are very fortunate that organisations and individuals are so generous in supporting this annual service, for many years St Mary's Cathedral and the Sister's of Mercy at Mercedes College, and this year UWA and Trinity Residential College.



***The Rev'd Graeme
Manolas ~ Chaplain,
Hollywood Private
Hospital***

SANDALWOOD PALLIATIVE CARE UNIT THE STORY SO FAR..

On the 30th of May 2005 Glengarry Private Hospital opened a purpose built 10 bed palliative care unit. Australian Sandalwood oil is known for many therapeutic effects, including relaxing the body and focusing the mind, thus the name was chosen to reflect the type of environment fostered on the unit.

We are focused on providing high standards of care to patients and families maximising the best quality of life through our holistic approach. Our team consists of a palliative care physician, clinical nurse specialist, highly skilled nurses, a social worker, pastoral care, allied health and a dedicated support team.

Our location in a community hospital is one of the many reasons for the success of the unit. At Glengarry we are serving the needs of local people in the northern suburbs. The feedback from families highlights the benefits of the facility being close to where people live. We have been extremely busy, which I believe reflects the need and also the quality of the care given.

Being solely private has not proved to be an obstacle in allowing us to give excellent care and support to those who need it. Many people in Perth have private health insurance and it's great that they can access quality palliative care when they need to.

The referrals have come from a variety of sources including palliative care at RPH, SCGH, medical and radiation oncologists and geriatricians. However, the majority of our referrals are received from Silver Chain Hospice Care who utilise our facility predominantly for symptom control followed by terminal and respite care.

As we approach our six months anniversary we are now ready for the next stage of our development. In partnership with The Cancer Council Western Australia we are implementing a volunteer service to enhance the care given to patients, families and friends.

Sandalwood is still in its infancy. However, the compassion, hard work and dedication of the staff in providing care and support to patients and their families in a friendly, happy and respectful environment will ensure the unit goes from strength to strength.



Queries: Karen Proctor (CNS) Sandalwood Palliative Care, Glengarry Hospital, 53 Arnisdale Road, Duncraig, WA 6023 Email: karen.proctor@affinityhealth.com.au Tel: 08- 92466395

PEEL PALLIATIVE CARE (PCPC) TEAM - FINALISTS IN REGIONAL ACHIEVERS AWARDS

Peel Palliative Care team at Murray District Hospital in Pinjarra were finalists in this year's Department of Local Government and Regional Development Regional Achievers Awards.

They were given a Certificate of Achievement in the Community of The Year category. Clinical Nurse Manager Gill Abbiss said the team offered a unique programme for the terminally ill with patients being given the option



to remain in their own homes. "Our team of palliative medical specialists visit patients in their homes, assisting in symptom control and so maintaining quality of life," Ms Abbiss said. "As a team we have made an enormous impact in the Peel Region and offer a service of excellence which gives terminally ill people a choice. "Being diagnosed with a life threatening illness is for many of us incomprehensible and raises many questions. How would you be cared for? Where would you get necessary support? What about equipment? Who would come to your home at 2am? Where would you want spend your last weeks, days?"These are the issues that the PCPC team helps with."

Members of the PCPC Team with their Finalists Certificate of Achievement, Ken Barrett (Chaplain), Michelle Pressler (Secretary), Fran Paverd (CNS), Gill Abbiss (CNM), and Jo Jones (CN)

SHARE YOUR PALLIATIVE CARE NEWS WITH US!

Do you have something you want to publish in the next PCWA newsletter? Just let Mary know by email: pcwainc@palliativecarewa.com.au so that it may be considered for inclusion. If have a digital high resolution photo too, then don't forget to send that as well! Copy Deadline for the next PCWA Newsletter - 4 February 2006



*"Oh, Lord, if I must die to-day
Please make it after close of play.
For this I know, if nothing more,
I will not go without the score."*

*Written by John Major sitting on the Front Bench
In the House of Commons during a tedious debate*



The PCWA Executive Committee would like to thank you for your continued support and wish you all a very Merry Christmas and Happy New Year!