Who needs palliative care: a categorisation system to support identification and referral

Dr Claire Holmes

Makerere Palliative Care Unit

15/02/2014



Who needs palliative care? A categorization system to support identification and referral

Authors; Leng M^{1,2,3}, Namukwaya L¹, Mwazi B¹, Grant L², Murray S², Downing J^{1,4}

- 1. Makerere Palliative Care Unit, Department of Medicine Makerere University, Kampala.
- 2. University of Edinburgh.
- 3. Cairdeas International Palliative Care Trust, UK.
- 4. Kings College, London.



Introduction

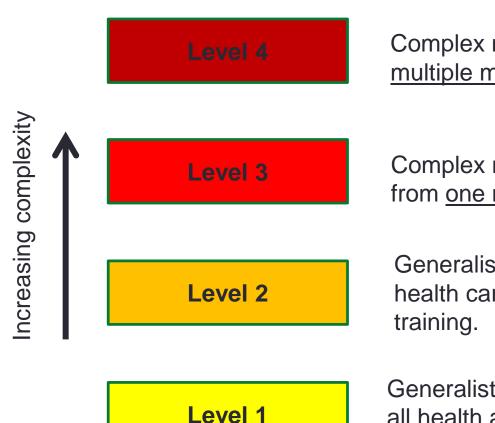
- Needs assessment in Mulago Hospital has shown 45% of patients have unmet palliative care needs.
- Identifying patients in need of PC is crucial but may not be easy.
- Once identified the specialist service is at risk of becoming overwhelmed.
- Essential to develop a sustainable and accessible system.

Integrating palliative care

- Trained nurses, doctors and other health professionals.
- Developed a simple catagorisation system



Patient is categorised based on complexity of needs:



Complex needs requiring referral and input from multiple members of the specialist PC team.

Complex needs requiring referral and input from <u>one member</u> of the specialist PC team.

Generalist needs can be met at ward level but health care workers need some additional training.

Generalist needs can be met at ward level by all health and social care workers (needs curriculum integration).

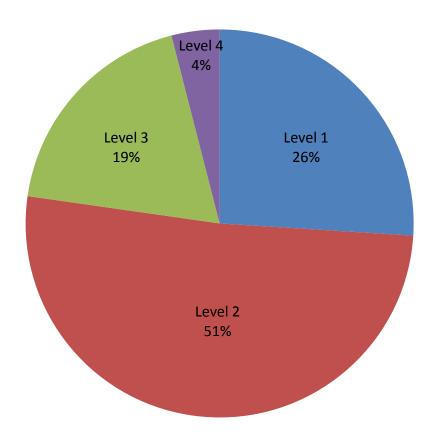
Results

- July 2012 December 2013
- 2447 patients identified as having palliative care needs by link nurses
 - 2113 (86 %) managed by link nurses.
 - 334 (14 %) managed by MPCU.
- A further 382 patients were referred to MPCU from other sources.



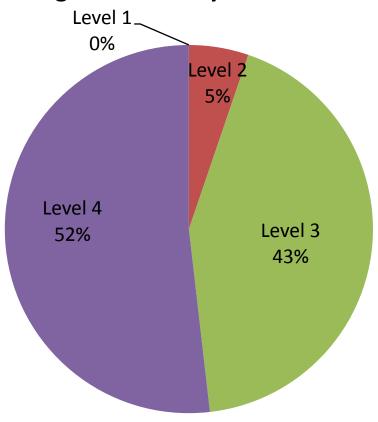
Results

Link Nurse Assigned Level July 12 – December 13



Results

MPCU Assigned Level July 12 – December 13



Link Nurse Story

"As a link nurse I have come to know that patients are individuals with different problems, so I handle them at the individual level."

"Patients have become ours not theirs. This has enabled me to work with the palliative care easily than before especially because I know what they are offering to these patients."





Conclusion

- Training, clinical modeling and referral support has improved recognition of palliative care needs.
- Knowledge about palliative care and the services available within the hospital has increased.
- More patients have access to palliative care.
- Evaluation of data suggests that model could be utilized in other settings.



Any Questions?