

We are Ambulance Victoria Engaged (WAVE)

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Paramedic services have an important role in providing palliative and end-of-life care. We are Ambulance Victoria Engaged (WAVE) brought together consumers, Ambulance Victoria and palliative care service providers with the aim of improving collaboration and to develop principles of engagement to facilitate improvement conversations.

BACKGROUND

Improved collaboration between consumers, healthcare professionals and service providers has been shown to significantly assist people who wish to receive palliative and end of life care in their home achieve their goal.

Previous scoping has identified that paramedic staff and services have an important role in providing palliative and end-of-life care. While there are several excellent local initiatives, concern about paramedic palliative care experience, communication and documentation needs has led to an inconsistent approach and significant variation in providing care.

KEY ACTIVITIES

We convened three stakeholder working groups, involving consumers, clinicians and other staff. Over 10 online meetings, the groups:

- identified and agreed upon six key principles that aim to improve collaboration between paramedic and palliative care services
- facilitated improvement conversations to support pairs of health services to implement local change ideas. Existing resources were adapted to create relevant worksheets, using the Plan-Do-Study-Act improvement cycle to guide discussions
- identified a need for networking between palliative care service providers and Ambulance Victoria staff for ongoing improvement work.

OUTCOMES

- We developed resources including a scoping report, principles of engagement and two improvement conversation worksheets.
- We used these resources to facilitate improvement conversations with 14 community palliative care services and Ambulance Victoria representatives. These groups discussed local issues and change ideas, with some examples outlined below.
- We established the WAVE Community Group a monthly opportunity for networking and information sharing.
- Wide engagement with the WAVE project in Victoria extended to interest from other Australian and New Zealand jurisdictions in our project. We shared our project findings, including two conference abstracts ^{1,2}, and connected with other related project work including:
 - Victorian Primary Health Networks' Health Pathways program review
 - Development of national Clinical Practice Guidelines for paramedics
 - Research proposal with Monash University and La Trobe University on paramedic work in the Aged Care Sector
 - Contribution to paramedical education with Monash University's Advancing Paramedic Roles Implementation Program (APRIP) initiative and the Program of Experience in the Palliative Approach (PEPA).

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KEY LEARNING

The project confirmed known issues and explored how these affect paramedical and palliative care work. We revealed issues with communication, especially at times and locations of care transitions.

We worked with members to identify and select change ideas to address these issues, aligning with palliative care service and Ambulance Victoria organisational structures.

Group members provided positive feedback on:

- networking opportunities
- pairing with another health service in improvement conversations and working towards the same goal of improving outcomes and experiences for palliative care delivery
- the value of the grounding effect from consumer contributions.

'A good experience for a patient and their caregiver is that their wishes about where the patient is cared for are respected but that, at the same time, both patient and caregiver feel supported.' – Consumer

'... I'm finding I often start thinking about what we could do better when I'm at work.' – Community palliative care provider

'Thank you for bringing this group of experts together and leading this incredibly important work.' – Ambulance Victoria staff

Future work could consider applying the developed principles of engagement and improvement methodology to drive better collaboration at a state level to further improve palliative and end-of-life outcomes.

Local change ideas examples

Develop caregiver communication prompts to assist when calling an ambulance

Implement processes to alert Ambulance Victoria of complex or remote palliative care needs

Establish local connections between Ambulance Victoria and palliative care services including proactive planning, palliative care referrals, feedback and case reviews

Streamline processes for manual handling or verification of death

RESOURCES

- Boughey, M., Jennings, S., & McArdle, E. (2021, October 6-8). From urgent to appropriate care: the integration of paramedical services in the provision of community-based palliative care, improving people's end of life care at home [conference poster presentation]. 17th World Congress of the European Association of Palliative Care Online.
- Boughey, M., Jennings, S., & McArdle, E. (2021, September 7). WAVE hello to paramedicine in palliative care. How a model for health care improvement has created opportunities to take ideas for innovation towards system wide change [conference workshop]. Oceanic Palliative Care Conference 2021.

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