

RE: Inquiry into palliative care services and home and community care services in Queensland

Dear Health and Community Services Committee,

I am writing in response to the call for comment on the issues in palliative care services. I particularly would like to focus on point 6 – Effectiveness, Efficiency and adequacy of palliative care and HACC and point 7 – Improving integration, collaboration and cooperation between other health services.

I am a Community Health Nurse in a small rural town involved in palliative care service delivery.

We rely on local staff gaining support from specialists that outreach or that can be contacted by phone for advice. All specialist services come from bigger palliative service teams. To compound the problem, access to telehealth is very limited, where both the access to the equipment is in high demand and connection can sometimes be a problem. Another concern with telehealth is that the acute setting that has the specialist do not always participate with this resource and areas as small as ours are left without an important support system for the staff trying to deliver palliative care to clients who want to stay in their home town.

It creates the situation of under resourced palliative care service delivery, and that is not at all times equitable and adequate for our community. It is a service that is heavily reliant on one consultant that outreaches from TPCH, who has to also support many other towns throughout the state.

Time in this role has demonstrated that to provide equitable and adequate palliative care in rural Qld, stretching of one resource is not the answer to allow the palliative care service to grow to meet ongoing demand for more service delivery.

It is to increase the capacity of this unique and beneficial outreaching position, so specialists are accessible when it is needed. It is to look at increasing visiting capacity and supporting this with improved telehealth services that is accessible by the provider and have the capacity to be delivered in the client's home.

There is a service gap for people in rural areas in getting effective and appropriate palliative care at home, and by providing more funding to service delivery that is more flexible and specific to all Qld, not just metropolitan areas, will allow palliative care to improve for all in the future.

Kind Regards

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