Using PCOC to improve palliative care - a Victorian success story

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Abstract
The Palliative Care Outcomes Collaboration (PCOC) aims to improve patient outcomes through routine clinical outcome measurement, periodic surveys and benchmarking. Currently 115 services across Australia, including 22 Victorian services, participate in patient outcome reporting. This presentation will report the key PCOC outcome results over time and the results of a recent survey exploring how PCOC outcome measures are used by services to improve quality. Patient outcome results demonstrate improvements over time. For example, the percentage of unstable patients in the unstable phase for three days or less has increased from 49% in 2009 to 73% in 2013. Furthermore, the percentage of patients whose change in pain and symptoms is the same as or better than the national average patient at baseline (2008) increased across all symptom areas between 2009 and 2013, indicating improvement in symptom management across the board. The survey results reveal that services most frequently use PCOC outcome measures for quality improvement projects (78.7%). A total of 43 quality improvement activities were identified in the survey, including education activities and using PCOC assessment scores in prioritising clinical discussions. Future implications for Victorian palliative care services will be discussed in light of these survey results.

Keywords
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Using PCOC to improve palliative care - a Victorian success story

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Sabina has an extensive background in palliative care nurse education. She was previously a nurse educator at Calvary Health Care Sydney and manager of a training organisation providing palliative approach education.

Sabina has worked with Palliative Care Outcomes Collaboration (PCOC) education programs since 2007 and is currently employed as a research fellow at the University of Wollongong in the PCOC program.

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This presentation will report the key PCOC outcome results over time and the results of a recent survey exploring how PCOC outcome measures are used by services to improve quality.

Patient outcome results demonstrate improvements over time. For example, the percentage of unstable patients in the unstable phase for three days or less has increased from 49% in 2009 to 73% in 2013.

Furthermore, the percentage of patients whose change in pain and symptoms is the same as or better than the national average patient at baseline (2008) increased across all symptom areas between 2009 and 2013, indicating improvement in symptom management across the board.

The survey results reveal that services most frequently use PCOC outcome measures for quality improvement projects (78.7%). A total of 43 quality improvement activities were identified in the survey, including education activities and using PCOC assessment scores in prioritising clinical discussions. Future implications for Victorian palliative care services will be discussed in light of these survey results.

A policy for suicide prevention & management of clients & carers receiving palliative care services

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