

Morning Breakout 3—Implementation

16

CAN ADVANCE CARE PLANNING BECOME PART OF USUAL COMMUNITY PALLIATIVE CARE? USING A MULTI-SITE ACTION RESEARCH APPROACH TO IDENTIFY CONDITIONS FOR SUCCESS

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Background Internationally the recommended system-wide approach to ACP has been successful in health care settings and communities with a homogenous population. A multi-faceted ACP was developed, trialled and evaluated in diverse Australian community palliative care services.

Aim To identify the conditions for successful integration of ACP into Australian community palliative care services.

Methods Using a multi-site action research approach data collected between 2008 and 2010 included medical record audit; document analysis; key individual health professional interviews (22); six clinician focus group interviews (38).

Results Nine Australian community palliative care services participated; two sites later withdrew. The services differed in geographic location, staff profile, client and family demographics and services offered. The conditions for success were determined by an interconnected construction of supportive relationships between government (including National, State and local government authorities), health care

organisations who manage the community service, and the microcosm of community palliative care practice. The specific conditions identified related to policy, financial resources, size of the service, and staffing profile, documentation processes, and geographic context.

Discussion Nationally a consistent ACP policy environment alongside a supportive economic health care climate is required if ACP is to be routinised into health care services.

Conclusion Individual clinicians or small community services may demonstrate short-term success in ACP but long-term it is contingent on conditions of stable health care infrastructure, supportive national policy adequate funding and stable workforce.