



PALLIATIVE CARE FOR ADULTS

WHAT IS PALLIATIVE CARE?

Palliative care is care and support provided to people who have a progressive, life-limiting illness. It recognises your unique needs when you are reaching the end of your life, as well as the needs of your family and carers. Palliative care takes account of your physical, emotional, spiritual or social needs. It aims to assist you in living your life as fully as possible and providing comfort in the later stages of mito. The services include:

- Relief of pain and other symptoms
- Equipment needed to aid care at home
- Assistance for families in talking about sensitive issues
- Links to services such as home help and financial support
- Support for emotional, social and spiritual concerns
- Counselling and grief support
- Referrals to respite care services

Palliative care is a family-centred model of care, providing family and carers with practical and emotional support.

PALLIATIVE CARE IS NOT ONLY END OF LIFE CARE

Palliative care can raise anxiety for you and your family because it is associated with care in the last days of life. However, palliative care can help you manage your mito symptoms so you can continue to live life while dealing with your illness. You may have an on-off rotation with palliative care through periods of wellness and illness. Some people are involved with palliative care for months or even years.

Depending on your medical needs, palliative care may help you to be cared for at home, rather than in a hospital or hospice. Many people feel more comfortable at home where they can control their daily routine and have the opportunity for family and friends to assist with their care.

WHO PROVIDES PALLIATIVE CARE?

A palliative care team may include health care professionals including your GP, palliative care specialist doctors, occupational therapists, physiotherapists, grief and bereavement counsellors, pastoral care workers and volunteers. Their involvement will be based on your needs.

HOW TO ACCESS PALLIATIVE CARE?

For help and information about which services are available and how to access them ask your:

- Doctor
- Hospital Liaison Officer
- Nurse
- Local hospital

Or visit <https://palliativecare.org.au>

END OF LIFE PLANNING

While talking about end of life care isn't easy, there are good reasons to start the conversation early:

- It helps empower you to take control about your end of life care and dying wishes ahead of time and in line with the things you value most
- It helps ease the pressure on loved ones trying to understand your wishes.

There is no right or wrong way to go about having this conversation - it's intensely personal. Take time to self-reflect on what's important to you. The conversation shouldn't be rushed and may be a series of conversations over time.

"I was referred to palliative care services by my community nurse after leaving hospital having received news I never wanted to hear, I was told that I was approaching the end of my life.

The palliative care nurse came to my home to assess me and see what services I needed. I was reassured that they would be there when I deteriorated, and what services were available. The palliative care nurse visited every month for 2-3 years. Unexpectedly, I have since improved and I have stopped their visits. However, I have a referral for services if I need to recommence them.

Palliative care services have been very helpful and supportive. They have been a very reassuring presence to check on my health and wellbeing and that of my husband. They open the conversation about end of life and gently walk you through the process. It is a very good process to go through, for you and your family."

Lisa Moulton, Mito Community Member

The next step is to speak with your GP who can assist you in creating a plan that documents your wishes. This is known as an Advance Care Plan and is the process of planning your medical care in advance regardless of your age or health.

ADVANCE CARE PLANNING

Ideally, an Advance Care Plan will result in a formal, written Advance Care Directive (values and/or instructional), to ensure your preferences are respected.

If at some point, you are unable to make decisions, or cannot communicate, your Advance Care Directive guides your family and doctors in making treatment decisions. An Advance Care Directive is only used when you lose capacity to make or express your preferences.

As a part of your Advance Care Directive, you can choose a 'substitute decision-maker', who can make decisions for you if required.

For more information speak to your GP and/or contact Advance Care Planning on 1300 208 582 or at: www.advancecareplanning.org.au.

WHAT YOU CAN DO NEXT

- Open the conversation with your family and loved ones about your wishes for end of life care. For advice on starting the conversation visit: www.advancecareplanning.org.au/individuals/how-to-start-the-conversation
- Communicating with your doctors, carer and family is the best way to take control of your experience
- Speak to your GP about making an Advance Care Plan and the services you may need, including:
 - Respite breaks
 - Meals on wheels
 - Home nursing
 - Occupational therapists
 - Aids for home, i.e. shower chair

Specialist palliative care services can help with accessing a bereavement counsellor or social worker.

The following organisations can provide information and support:

Australian Centre for Grief and Bereavement
1800 642 066
<https://www.grief.org.au/>

Beyond Blue
1300 224 636 (available 24 hours a day)
<https://www.beyondblue.org.au>

Lifeline
13 11 14 (available 24 hours a day)
<https://www.lifeline.org.au>

MensLine Australia
1300 789 978 (available 24 hours a day)
<https://mensline.org.au/>

Content sourced from Palliative Care Australia, Palliative Care NSW, Advance Care Planning.