

# PEPA

**Program of Experience  
in the Palliative Approach**

Funded by the Australian  
Government Department  
of Health and Ageing

**NEWSLETTER SPRING 09**

THE NATIONAL  
PALLIATIVE CARE  
PROGRAM

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The Program of Experience in the Palliative Approach (PEPA) provides an opportunity for primary health care providers to develop skills in the palliative approach by undertaking a workforce placement with a palliative care specialist service (host site) within a metropolitan or larger service. It has three components:

- Supervised clinical placement
- Integration of learning into the participant's practice
- Post-placement support

Please access the PEPA webpage for details: <http://www.pepaeducation.com/>

The Program of Experience in the Palliative Approach is an initiative of the Australian Government Department of Health and Ageing's National Palliative Care Program.

In the 2007-2010 phase of the PEPA program, funding from the Australian Government Department of Health and Ageing (DoHA) is available to support 950 clinical placements and 204 workshops across all Australian states and territories.

### National Office Update

What an eventful season we have had! Winter kicked off with our annual PEPA Managers meeting in Brisbane. Discussions moved beyond key successes and learning of the PEPA program to date, and focused on the strategic role that PEPA can continue to play in the ongoing development of the national primary care workforce. This was followed shortly thereafter by a national meeting of the PEPA Aboriginal Project Managers, Educators and Consultants and a meeting of the National Indigenous Reference Group. These meetings determined strategies to sustain and build on the achievements to date in terms of advancements in social and professional knowledge and attitudes towards palliative care for Indigenous communities. Furthermore, the PEPA national and state teams had a fantastic opportunity to present, network and learn from others at the recent *Palliative Care Australia Together!* conference and the pre-conference Indigenous seminar.

The National PEPA team would also like to welcome our newest member, David Wellman. David has been contracted to coordinate the qualitative process, impact and outcome evaluation for the PEPA program to date. David brings to this position many years experience in public health research in Victoria and Queensland including in the areas of aged and palliative care.



Annual PEPA Managers Meeting, Brisbane. From left: Tom Goff (DoHA), John Carson (NT), Ellen Sheridan (VIC), Angela Bresnehan (TAS), Natasha Myers (National PEPA), Kathy Parr (WA), Janeen Foffani (NSW), Janet Taylor (SA), Kathy Laurent (QLD) and Annette Cole (ACT). Front: Vinesh Oommen (National PEPA) and Patsy Yates (National PEPA).

## PEPA: Tracking Achievements

A total of 179 clinical placements were completed across all jurisdictions between January and June 2009. Table 1 presents the total number of participants who have attended clinical placements

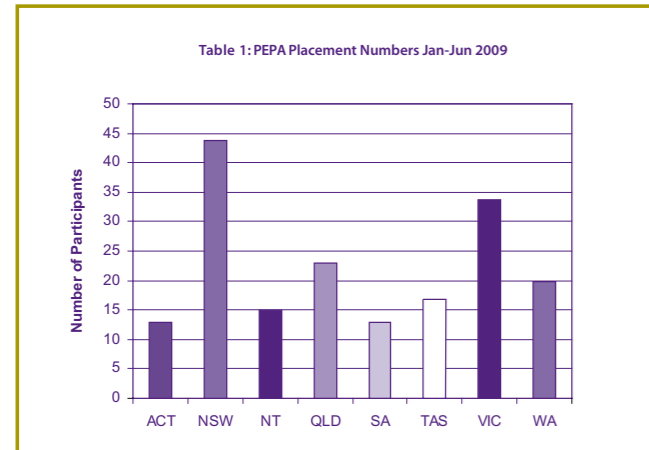


Table 1: Total number of participants (N=179) that had attended PEPA workshops from Jan to June 2009

in each jurisdiction respectively for the period January to June 2009. Participants attending the clinical placements came from various discipline groups, as shown in Table 2.

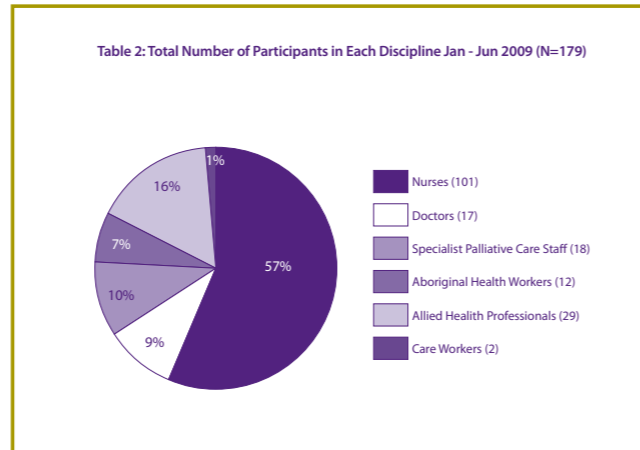


Table 2: PEPA participant's discipline (N=179) Jan to Jun 2009



The Community Outreach Workshop was a great opportunity to strengthen the relationship between Territory Palliative Care Team of Alice Springs and Nganampa Health Council – APY Lands. It was wonderful to see that Nganampa Health Council has such a commitment to Palliative Care and has a dedicated nurse position for

Aged Care and Palliative Care at Pukatja Aged Care Centre including an appropriate palliative facility within Aged Care when required. Hopefully this model of care, if successful could be used in other remote areas of Australia especially with other Aboriginal Medical Services. The evaluation undertaken was in a group setting and translated by Cyndi Cole. It was not appropriate to undertake written feedback. Verbal feedback from the group indicated that highlights included, "getting to meet people and know what they do and learning about palliative care". "The main things we gained from this program were learning the importance of communication, forward planning and caring for a client." A comment was also made that it "would be good for communities to know more about palliative care".

Special thanks go to Cyndi who showed us great hospitality and kindness.

## PLACEMENT REFLECTION

### Kellie, Occupational Therapist

My application to complete a PEPA placement stemmed from an interest to gain skills and knowledge in areas of Occupational Therapy (OT) practice to assist with expansion of the role within the new Palliative Care Centre (pictured), a 20 bed facility to be opened attached to the Townsville Hospital (TTH) in October, 2009. I also hoped to observe and experience the dynamics of another Palliative Care team and their application of the Palliative approach.



Occupational Therapy Palliative Care Project Team

Currently the OT role at TTH is restricted to discharge planning, equipment prescription and occasional oedema management within the confines of a 0.5 position for both inpatient and community. When the Palliative Care Centre opens we are aiming to expand the role to include a focus on non-pharmacological symptom management targeting areas including fatigue and breathlessness with a potential focus on the provision of strategies to assist with energy conservation, relaxation and occupational performance.

On my one-week placement I was fortunate to be supervised by a highly experienced OT who had worked in palliative care extensively throughout his career. The main areas of learning included palliative care service provision (including community integration of non-government services), the OT role within a palliative care inpatient ward and in the community setting (specific assessments and intervention) and the multi-disciplinary models of practice within the Gold Coast Palliative Care Service (host site).

The key aspects of my learning came from discussions with my supervisor/mentor regarding opportunities for expansion of current services to include a more holistic model of care, for example:

- High level oedema/lymphoedema management
- Introduction of group/individual programs for non-pharmacological symptom management
- Benefit of therapeutic creative expression

As a result of my PEPA placement I have engaged in two activities upon return to my workplace. Firstly I had the opportunity to provide feedback to the Palliative Care Team in Townsville regarding the following:

- Dynamics of the Gold Coast Palliative care team (including staffing, resource allocation, assessments, outcome measures),
- My experience of the inpatient facility/community setting and the Hopewell Hospice (including admission criteria, staffing, format of meetings etc)
- Gold Coast team's interpretation of the tertiary model of practice
- Development of service specific resources

The aim of this feedback was to generate discussion of our own service and evaluate our current practices in comparison to a service with similar systems and procedures.



The Palliative Care Centre - under construction

The second activity involved the OT department at the Townsville Hospital initiating a project team (pictured) to complete a large quality project with an aim to expand the current service provision of the OT working in Palliative Care in anticipation for our new Palliative Care Centre opening. I am co-coordinating the project which is taking the direction of benchmarking with other facilities regarding programs and interventions (specifically regarding non-pharmacological symptom management strategies currently in use) and literature searches establishing documented evidence of the

## PEPA: Making a Difference

Evaluation responses between January and June 2009 show that PEPA continues to support participants in enhancing their skills and knowledge. Some of the responses from participants following their placement include:

- "The knowledge that I have given to other work colleagues has helped in their symptom management and made them more aware of drugs used."

- "The quality of life of patients with life limiting illness has improved after I attended the PEPA placement. I have a greater understanding in symptom management."
- "On return to my work, our reporting system on palliative care clients has been enhanced. Skills that I have learned during my PEPA placement have assisted me in being able to communicate with clients and their families about death, funerals, emotions, feelings, needs and problems."

## FEATURE ARTICLE

### Central Australia Nganampa Training and Community Consultation

The cultural awareness skills of health professionals make a significant difference in the delivery of health services to Aboriginal and Torres Strait Islander people. In recognition of this, the Aboriginal PEPA program has been actively organising and delivering presentations and workshops on appropriate service delivery and cultural considerations for Aboriginal clients. The NT Aboriginal Educator Cindy Paardekooper, in conjunction with Peta Jackson, South Australian Aboriginal PEPA Project Manager, has recently facilitated a three day community consultation and training workshop in Central Australia, near the NT/SA border.

Nganampa Health is located in the top of South Australia close to the Northern Territory border. It is classified as Very Remote in the Accessibility/Remoteness Index for Australia (ARIA). Five facilitators from NT and SA travelled by small charter flight to Pukatja Ernabella. Views from the plane were spectacular with glimpses of Uluru. The weather was very cold, that day it was down to 5 degrees. Cyndi Cole, (Coordinator of AHW Training Program, Nganampa Health) met the team at the plane and gave them a quick tour of the community as well as the history of Ernabella. They visited the local Pukatja clinic, sleeping quarters, local art gallery, local shop and Ernabella Aged

Care before travelling by 4WD to Umuwa to meet with Nganampa Health and to set up the room for training the following day.



The focus of the workshop/training was on increasing knowledge and understanding of a palliative approach amongst Aboriginal Health Care Workers and Aged Care Workers, from a range of health settings. Aboriginal health workers also travelled from as far as Mimili, Umuwa and Iwantja. There were fifteen Anangu and a mix of other participants in attendance. Speakers included John McMahon from Darwin, Susan Grant and Fred Miegel, Alice Springs Palliative Care and Rosemary Hanish, Palliative Care Coordinator from Ernabella Aged Care. Topics discussed included advanced directives, spirituality, grief and loss, symptom management and the practical care of someone at the end of life.

specialist OT roles within these areas of practice.

Links have been initiated by our OT project team with major facilities providing Palliative Care in Australia and the UK to establish contact regarding current resource development and program implementation in relation to the extended OT role within the palliative care field. I am also utilising information provided by my supervisor/mentor from the PEPA placement to assist with researching for the project and with providing an expert network base to assist as the project continues. We are hoping that the project will extend to further research post implementation of the new programs and practices to evaluate the impact of our interventions.

Communication with other palliative care facilities has also been established to consider allocation of resources (both for OT and

other elements of the service) and the use of outcome measures (i.e. PCOC outcome measures), to ascertain where resources are directed and allocation of staffing.

The overall PEPA experience has been beneficial to service delivery by highlighting the importance of a collaborative approach to care provision and demonstrating the need to consider the interpretation of a tertiary model of practice. Personally, the placement was an opportunity to further develop knowledge and skills to assist with expansion of the OT role within the new centre and has been instrumental in providing directions for further research. This experience has validated for me the need to realise the full potential of the OT role within a palliative care setting to provide holistic and patient focussed care.

up and ran with the PEPA program in this jurisdiction. Today PEPA is reasonably well known within the ACT – especially in the aged care sector, however increasingly so in the acute sector.

With only one host site in the ACT there are obvious positives and challenges. The positives include the ease of access, promotion and communication. Working with one team allows tighter allegiance, understanding and team work. The ACT PEPA Manager is also able to personally meet with and participate in the mentoring process of the placements.

The challenge, however, is that the host-site in the ACT has no other specialist palliative care services in which to share the responsibility of education and student mentoring. Managing the workload and minimizing the burden on the host-site staff is a constant challenge. Despite this the staff at CHH are welcoming, generous and gracious to PEPA placements. They willingly contribute to workshop sessions; providing education, and sharing their knowledge and expertise with the wider health care community. Annette, the PEPA manager in the ACT, and the National team are truly thankful for their on-going support and enthusiasm in providing this service to the local health sector community.

Placements coming to CHH have a time-table of experience developed to meet their learning goals and their workplace roles. Generally, they have exposure to the In-Patient Unit, Home Base Palliative Care and The Canberra Hospital (TCH) Palliative Care Liaison Team. For those that would benefit, a tour of the radiation oncology unit at TCH is also organized. Placements usually attend a Palliative Approach workshop during their placement week and have access to the library at CHH. Experiential learning, educational workshop, researching, resource gathering and networking all contribute to an opportunity to self-direct the learning experience to meet individual needs while at CHH. The post-placement phase has the opportunity for personalized follow-up and in-service education sessions for organizations should they request it.

Clare Holland House is a unique facility, beautifully situated, and exemplary in their care of palliative patients, their families, and education to primary health care providers. Thank you Clare Holland House!



## SPOTLIGHT ON A HOST SITE

### Clare Holland House, ACT

Clare Holland House (CHH) is situated in a beautiful position on the foreshores of Lake Burley Griffin. Each patient room has a view to the lake or the river. Over the last 2 years the "Foreshore Gardens" around Clare Holland House have undergone a facelift and, although the garden is in its infancy, another decade will see growth that will enhance the facility by providing shade, beauty and grace; it will also attract a wider variety of birdlife than we enjoy at present.



Another initiative at CHH in recent years has been the development of a "room sized" gazebo made from Jarrah. This development attempts to meet the needs of the Aboriginal and Torres Strait Islander Peoples within our community; providing an open air space into which a hospital bed can be wheeled. The gazebo has electricity to provide light and allow equipment to be used. It also provides shelter in which patients and families can gather together. There is Indigenous art work on a nearby wall of the facility. The gazebo sits within the foreshore garden and has views up the river (shown above) and across the lake. It was inspired after a well-loved indigenous patient died at CHH; his greatest wish was to be outside.

The ACT palliative care service incorporates a 19 bed In-Patient Unit, the Home Based Palliative Care service and a Medical Consultative service that sees patients in their home, in the local ACT hospitals, in aged care settings and on site in the specialist clinic. The service is managed by Calvary Health Care ACT and CHH is the stand alone building that houses these services.

Clare Holland House is named after the first Clinical Nurse Consultant of the original ACT Palliative Care service. In Clare Holland's day the service was community based and was managed by ACT Health. Clare Holland died from metastatic breast cancer over 10 years ago, but she is revered for the tireless effort that she gave, with others, to the establishment of palliative care services within the ACT in its formative years.

ACT PEPA commenced in 2003. Initially the aged care sector picked

# STATE NEWS

## PEPA ACT

### Annette Cole

August was ACT PEPA's busiest month with a total of six workshops and 97 participants entering the doors of Clare Holland House (CHH). We catered for Carers and Primary Health Care providers interested in a general overview of a Palliative Approach with a one day workshop covering a range of holistic topics in palliative care. We also met the needs of Nursing and Allied Health Primary Health Care providers with a half day interactive workshop on a palliative approach and 3 full day workshops covering a range of topics that included Symptom Management, Communication in Palliative Care and Loss & Grief in Palliative Care. These workshops were well received. The numbers were kept to a maximum of 20 participants allowing for a more interactive style of delivery.

A one day Paediatric Workshop in Palliative Care was also held in August and attended mainly by specialist and Allied Health staff. This workshop was organized by CHH staff; however PEPA provided some additional funding support.

Fifteen placements have attended CHH so far this year. These participants have been very enthusiastic and have returned to their work-places to initiate new activities that have included policy changes, clinical improvement strategies and education to colleagues. One participant from an intensive care unit introduced new strategies for withdrawal of treatment and the promotion of comfort; including creative and innovative strategies to assist families dealing with this traumatic situation in the ICU. Improvement in outcomes in the bereavement phase is likely. This would make a wonderful research project; validating the success of the strategies implemented.

The PEPA Network Group continues to meet bimonthly. This forum allows an opportunity to network and discuss achievements and challenges in implementing a palliative approach into workplaces. The last two meetings have included guest speakers. Anyone who would like to take part in this supportive group is welcome to join us.

There are still placements open for the remainder of 2009 for Nurses, Allied Health Professionals and Aboriginal Health Workers who are interested in applying to have a one week experiential learning placement at CHH.

## PEPA SA

### Janet Taylor

The Inaugural Palliative Care Awards for South Australia were announced at Government House 3 July. Mrs Liz Scarce, Patron for Palliative Care Council of SA, and her husband the Governor General for SA hosted the event. The SA Aboriginal PEPA Project shared the Education Award with a Dementia Education Program and the

SA Aboriginal PEPA Project was nominated as the Patron's Award. Congratulations to Peta Jackson, Aboriginal PEPA Project Manager.

The Palliative Care Australia Conference held in Perth in September offered an opportunity during the pre-conference events to showcase what is being achieved to further educate and train Aboriginal Health Workers and Liaison Officers in a palliative approach. Peta Jackson along with Darryl Cameron, a Manager and Aboriginal Health Worker from Murray Bridge, who completed a PEPA placement, spoke about the South Australian program. Presentations were also done by other programs throughout Australia. Outcomes from the day included some recommendations to Palliative Care Australia on how a stronger alliance between Aboriginal and Torres Strait Islander national organisations and health professionals and mainstream health services could be achieved to benefit end of life care for Indigenous people.

The successful collaborative community consultation and workshop in the APY lands between NT and SA Aboriginal PEPA Projects took place in July (see main article). From this workshop, two Aboriginal Health Workers from Indulkana and two aged care Aboriginal workers from Ernabella Aged Care are completing a week's clinical placement in Adelaide.

Planning is underway for a Social Worker's workshop, 12th November and a Disability Services workshop 25th February 2010. There is also going to be a post placement mentoring and support day held in April 2010. Any individuals who have participated in a clinical placement since the beginning of PEPA, 2003, are most welcome to attend. Further details will be available in the next newsletter.

There will be a Cultural Awareness Training day held in the metro area for Aboriginal and non-Aboriginal health professionals. More about this in the next newsletter.

Supervised clinical placements with specialist palliative care services are continuing. There are vacancies for General Practitioners, allied health professionals and Aboriginal Health Workers and Liaison Officers.

## PEPA NSW

### Janeen Foffani

To date, more than 120 Supervised Clinical Placements have been completed in NSW during this phase of PEPA. Applications for GP, Nursing and Allied Health placements exceed the current number of placements available but a waiting list is being compiled and will be accommodated if possible. There are still some placements available for palliative care specialty staff and Aboriginal Health Workers. All placements need to be completed by April 2010 so please don't delay in getting in your application.

The feedback received from Supervised Clinical Placements participants, employers and host sites remains very positive. Clinical aspects of the placements are being met and networks strengthened.

Many have found that a PEPA placement often enhances the clinical practice of both the participant and their Host. The placement is also a good opportunity for sharing resources and discussing the challenges faced by palliative care providers in the many different settings.

Recently staff from Orange Aboriginal Medical Service (OAMS), Condobolin Aboriginal Health Service (CAHS) and Greater Western AHS Aboriginal Health Workers from across the Southern and Eastern Clusters attended a Palliative Care Awareness day in Parkes. The day was organised in conjunction with the Rural Palliative Care Program and gave those attending the opportunity to talk about the issues relating to Palliative Care in the local area and the services available to support both clinicians and community members. The day was well received and plans are underway for a second Awareness day in October/November.

Palliative Care Education workshops recently completed in NSW include a 'road show' for GPs and RNs in Narrabri, Moree and Gunnedah. Education was provided by the Palliative Care Doctor and Oncology/Palliative Care Social Worker from Tamworth, and the Palliative Care Clinical Nurse Consultants from Tamworth, and Moree.

A number of metropolitan post placement education sessions have taken place across the western Sydney area. Attendees include Recreation Officers, Divisional Therapists, Nurses, and Pastoral Care Workers. Topics include what is palliative care, basic end stage disease trajectory, bereavement and self care.

A series of 'rolling' palliative care education sessions were held in Wagga Wagga, Junee, Cootamundra, Temora and West Wyalong aimed at Community and Hospital staff. The goal of these sessions was to raise the awareness of the palliative approach, discuss challenges associated with the pain assessment tool which is being standardised in the area, introduce the palliative care provider and promote PEPA NSW. The mix of formal and informal sessions gave staff members an opportunity to return to the palliative care provider or PEPA NSW Project Manager and ask additional questions in a relaxed environment.

The Children's Hospital at Westmead is hosting three Paediatric Palliative Care Education Days. The first of which was held at Liverpool Hospital (6/10/09), the remaining two are by Eugowra near Orange (28/10/09) and Dubbo (29/10/09) - for more information contact Catriona McLean (catrionm@chw.edu.au). The program covers communication, symptom management, ethics/decision making, pain management and grief/bereavement. It is also a great opportunity to meet members of the Paediatric Palliative Care team.

There are a number of PEPA NSW Palliative Care Education Days coming up. If you are in the area please give me a call for more information.

- Gosford 11/11/09 (Nurses)
- Orange 19/11/09 (Palliative Care Providers Professional Development Day)

## PEPA NT

### John Carson

Aboriginal Health Workers dominated clinical placements for the first time in the life of the PEPA program in NT, over the past few months. 9 Aboriginal Health Workers completed placements with

many seeking skills and knowledge a result of first attending a Community Outreach Program workshop, presented by PEPA.

Aboriginal Health Workers from various "very remote" clinics report, "This is a valuable course and I think it's essential to learn and know" and "I thoroughly enjoyed my time with the PEPA team. I learnt a lot about team work amongst staff members." Others report, "I have confidence communicating and delivering quality service to clients. I...have learnt to listen more."

The Community Outreach Program component of PEPA (formerly Outreach Support Education) has gained momentum with further workshops held recently for Aboriginal Health Workers and Indigenous Aged Care staff at Nguuu (Tiwi islands), Nhulunbuy (East Arnhem Land) and Umuwa in the Western Desert regions near the SA / NT border (see feature article).

The PEPA Aboriginal Education Officer and an Aboriginal Health Worker (AHW) PEPA participant (Jo Appoo, Yuendumu) presented at the national Palliative Care Together! pre-conference seminar "Closing the Gap for Indigenous Palliative Care". It was well received with Cindy being commended by Prof Ted Wilkes. The day culminated in group discussions on "How to progress Indigenous palliative care across boundaries at state and national level" with recommendations tabled. NT is clearly leading the way in this area with other states also doing some good work.

NT PEPA will be presenting an inaugural seminar to Government agencies in both Darwin and Alice Springs later in the year. With the aim of demystifying palliative care and the palliative approach, staff from agencies such as Centrelink and Territory Housing will be encouraged to attend and learn more about what we do.

Demand for PEPA placements from both Aboriginal Health Workers and other disciplines remains strong as the program enters it's last year, and almost all placement allocations are full. A waiting list has been started for 2010, however NT PEPA hopes to ultimately offer placements to all that express interest and apply.

## PEPA QLD

### Kathy Laurent

A total of 35 participants attended a PEPA Dinner and Education Evening on Wednesday 22nd July. The after dinner speaker was Professor Janet Hardy who spoke for an hour on the topic "What's new in symptom control?" As the number of GPs who registered for the event was small, pharmacists were also invited to the event as well as past-PEPA participants. The evaluations indicated that the format of the event was well received.

PEPA Queensland is planning two workshops in Toowoomba in October. The first is a one-day Allied Health Workshop to be held on Friday 30th October, 2009 at Freshney House, Toowoomba Hospital. The second is a PEPA GP Update in Palliative Care to be held at the Empire Theatre, Neil St, Toowoomba on Saturday 31st October, 2009. The GP one-day workshop is being planned in cooperation with GP Connections and R Health (the two local GP Divisions). Another PEPA Allied Health workshop will be conducted at the Princess Alexandra Hospital, Brisbane on Friday 27th November, 2009. Please note that a Nurses Clinical Skills workshop will also be held in Toowoomba on Friday 30th October, 2009. While this event is not funded by PEPA, it will be a good opportunity for PEPA participants from the Darling Downs and surrounding areas to maintain their palliative skills and network with the local palliative care services.

The Queensland team has been very active on the promotional front with an A4 double sided Newsletter insert going into the Spring Edition of the RACGP Queensland Newsletter. Satchel inserts were provided to the participants of the RACGP OMG forum held in Brisbane on 18th and 19th July. The PEPA Manager will have a PEPA trade stand at the RACGP 2009 North Coast Refresher Weekend at Fraser Island on the 10th and 11th October.

Queensland is currently targeting GP applicants and welcomes all interested GPs and GP Registrars to submit an application by Friday, 13th November 2009 (previously advertised as Friday 30th October). Applications for Nursing and Allied Health placements exceed the current number of placements available but a waiting list is being compiled and will be accommodated if possible. We are also working on a resource folder to be given to all participants so that PEPA is not relying completely on the host site to supply resources.

## PEPA TAS

### Angela Bresnehan

PEPA Tasmania has had a busy year with 20 supervised clinical placements being undertaken across the state and a series of targeted multidisciplinary workshops being held in each region.

Supervised clinical placement participants have been selected from a range of health care settings including residential aged care facilities, general practice, community health and rural hospitals and feedback continues to be very positive. See below for sample comments from participants following their placement:

- "I felt that my learning experience with the PEPA and the palliative care team was fantastic. I have met my learning objectives and now have a greater understanding of the team and its approaches to care".
- "The workshops prior to my experience were fantastic".
- "What I have learnt in the program of experience in the palliative approach is going to better equip me as a community nurse.. I intend to build upon what I have learnt with further reading and research. Not only do I feel more prepared to nurse palliative clients, I am also confident that I can convey what I have learnt to other colleagues".

PEPA palliative care workshops continue to be very popular and well supported. Six workshops have been held this year for a total of 161 participants. The target groups for the workshops have included disability support workers, practice nurses and nurses working in residential aged care facilities. All workshops are presented by the specialist palliative care teams from local areas which gives participants an opportunity to build important links to the key palliative care services in their own region.

As part of a PEPA post placement support initiative past participants were invited to attend the Tasmanian Association of Hospice and Palliative Care (TAHPC) Neurology Study Day held in Hobart on the 15th July 2009. The theme of the study day was multidisciplinary care of chronic neurological conditions. The day was a great success with 50 participants attending.

PEPA Tasmania would also like to advise that the Department of Health and Human Services, Palliative Care website has been updated.

The revised website contains a range of invaluable resources such as

- consumer fact sheets
- web-based care management guidelines for health professionals; and
- an adult palliative care drug formulary.

The new look website can be found at: [http://www.dhhs.tas.gov.au/palliative\\_care/welcome](http://www.dhhs.tas.gov.au/palliative_care/welcome).

Finally, PEPA Tasmania would like to thank all managers who have supported their staff members to participate in PEPA education and to the clinicians from the specialist palliative care teams across the state for their ongoing support of PEPA.

## PEPA VIC

### Ellen Sheridan

In the past few months four workshops have been held specifically for Aboriginal health workers. These workshops are designed with the Victorian Aboriginal palliative care project officer to ensure they are culturally appropriate. The day commences with a Welcome to Country from a local Aboriginal person. Next a Smoking Ceremony, conducted by an Aboriginal male elder, aims to cleanse participant's spirit in preparation for the day ahead. The workshop topics include: the palliative approach, assessment and intervention, psychosocial and spiritual care, and caring for yourself. Substantial time is allowed for discussion and story telling. When the workshop concludes the participants spend time debriefing about the workshop, including a discussion about the importance of culturally safety. Recent feedback from participants includes:

- "I found this workshop to be a huge eye opener"
- "I learnt how to connect with a client"
- "I would recommend this workshop because everyone should know the process of dying"
- "It has made me feel more confident in providing information to clients"

Victoria also offers PEPA workshops specifically for disability services staff and this has led to the establishment of a state working group for palliative care and disability services. The group meets to discuss ways to strengthen links and understanding between the two sectors. The group is currently writing a palliative care guide for disability residential units. Another eight workshops have been advertised specifically for disability services staff in October-November 2009. They are advertised on the Victorian PEPA website.

Finally, several new PEPA podcast are now available on the Palliative Care Victoria website:

- Dr Peter Martin (Clinical Director of Palliative Care, Barwon South Western region) speaks on 'Anorexia/Cachexia Syndrome in Advanced Cancer', 'Breakthrough pain or periodic pain' and 'Communication'
- Dr David Brumley, (Palliative Care physician, Grampians region) speaks on 'Diagnosing Dying'.

Podcasts are available at: <http://www.pallcarevic.asn.au/-pepa/podcasts>.

# PEPA WA

## Kathy Parr

As time is running out to participate in this current round of funding PEPA WA urges all health professionals who have been deliberating on whether to apply for a placement to act!! A limited number of placements are still available for allied health professionals, aboriginal health workers and GPs. For nursing staff who are still interested in undertaking a placement please contact me directly to discuss any available opportunities.

One of the recent highlights for PEPA in WA has been the visit by Dr. Lorna Hallahan. Lorna lectures in social work at Flinders University, teaching lifecourse approaches to social work; loss, grief and trauma: social work and disability and professional ethics. Lorna presented a full day workshop to 60 nurses and allied health professionals on "Living and Dying with disabilities". The workshop attracted a vast diversity of disciplines from many different organisations within the metropolitan area. Comments on the evaluations included:

- "Validating and thought provoking strategies offered and not merely problems being defined"
- "I enjoyed the examples, stories and energy that occurred between the presenter and participants."
- "It was inspirational to see and hear such a great speaker. Lorna spoke professionally but touched my heart. Thank you!"

The next major workshop will be "Humour in Palliative Care" with guest speaker Marcus Gibney.(Palliative Care /Bereavement Counsellor, Murwillumbah Community Health, NSW) on November 17th 2009. For further information please contact the Cancer Council Professional Development Centre on 9382 9300 or: <http://www.cancerwa.asn.au/professionals/palliative-care-profs-professionaldevelopment/>



(ABOVE) Donkeys spotted during the community consultation and training workshop in Central Australia.



(LEFT) PEPA Aboriginal Project Managers, Educators and Consultants, Brisbane. Front: Cherie Waight (VIC) and Deborah Prior (National). Back: Cindy Paardekooper (NT) and Peta Jackson (SA).

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