A new La Trobe University study highlights how ‘care pathways’ can help GPs and aged care staff work together to plan ‘end of life’ care with residents and their families. The study involved 14 aged care homes in two states.

It found that the use of such pathways improved care. For example, unnecessary transfers from aged-care facilities to hospitals and back again were reduced significantly – from 14 per cent down to two per cent.

‘If the procedures that make this possible were implemented nation-wide,’ says Research Fellow, Dr Dell Horey, ‘it would mean a lot less stress during the final stages of people’s lives. They are also likely to save money by using resources better.’

Published in the Medical Journal of Australia, the Good Death project was a joint study between a team of researchers from La Trobe University led by Professor Annette Street and Dr Horey and the Northern Valley Division of General Practice, led by Dr Alison Sands.

The project was funded by the Australian Government Department of Health and Ageing under the Encouraging Best Practice in Residential Aged Care program.

It calls for a national program to support GPs and care staff use end of life pathways to enable aged care residents to die well.

Dr Horey says the pathways support collaborative decision-making between families, GPs and aged care staff by identifying issues that need to be considered at this important time.

They document and monitor decisions about care, and ensure all care providers know what is wanted and what is happening.

Dr Horey says her evaluation has shown that it is feasible to involve GPs and care staff in the use of care pathways and maintain quality of end of life care.

Pathways enable optimal use of medicines and other therapies to manage symptoms as a result of improved communication with patients, assessment and documentation procedures.

End of life care planning, says Dr Horey, is increasingly used internationally and is appearing across Australian residential aged care facilities to provide guidance on different aspects of terminal care.

‘Pathways are particularly important in complex care environments such as residential aged care where there is a mix of nursing and allied health staff, personal care assistants and general practitioners.’

The study involved interviews with 28 GPs and 42 aged care facility staff – registered nurses, enrolled nurses, as well as personal care and allied health workers.

Further information on the research opportunities in The Faculty of Health Sciences can be found at: latrobe.edu.au/health/research