

Boneham Aged Care Services



Residential Aged Care

Millicent, South Australia

Linkage Strategies Used:



Boneham is a not for profit residential aged care facility located in rural South Australia that was established and continues to be run by a local community board. The closest regional centre is 50km away meaning the provision of a local aged care services is important to the community. The organisation's mission is to deliver "excellence in aged care services that meet or exceed the needs and expectations of our clients."

Boneham saw the ELDAC Working Together program as an opportunity to review the development and management of the facility's advance health care directives, upskill staff and improve information available for all families.

"Residents were often asked to make decisions around advance healthcare directives when they were acutely unwell."

The ELDAC Working Together program helped improve the collaboration and case management of palliative care residents to ensure that interventions were timely and appropriate. Strong community links were also built with the regional specialist palliative care team and a dedicated palliative care nurse who became the staff group champion.

"The end-of-life pathway knowledge coupled with palliative care training helped staff to recognise early symptoms, undertake endof-life discussions early and support the needs of the resident and their families more effectively."

Benefits

- Enhanced training and establishment of end-of-life pathways.
- Established referral pathways and connections with palliative care service.
- Implement new care initiatives.
- Provided resources to educate and support families through the palliative care processes.
- Increase confidence of the dedicated palliative care nurse.



Improved process and initiatives provides a holistic approach to end-of-life care

Boneham is proud of the standard of end-of-life care we provide but were extremely thankful to have the opportunity to evaluate our processes, improve effectiveness of symptom management to residents and provide end-of-life care with a holistic approach to residents and their family.

Earlier this year when we started to implement improvements to our end-of-life processes, a new resident came to us for end-of-life care. She had a terminal illness and a life expectancy of a few weeks. However, we were blessed to be able to care for her for 5 months.

This resident helped provide us with the opportunity to implement the changes to our end-of-life process, to educate staff and in turn to improve resident and family outcomes.

Not only did we develop a strong relationship with the resident but also with her loved ones. Her daughter, who had been her initial carer was reluctant about accessing care but found that it freed her from direct care and enabled her to spend quality time with her mother during her final days. She visited frequently and spent the time talking, playing the ukulele and singing to her mother. Sometimes the resident was able to sing too – a great, lifetime passion.

The palliation of the resident was case managed in collaboration with the local Palliative Care team. The team were instrumental in providing initial social support to the daughter to deal with grief and bereavement, as well as being a knowledgeable contact for our staff. They also paved the way for the daughter to feel comfortable about our service.

The family of the resident were extremely thankful for the care their mother received and valued the nurturing care provided by our staff. We attribute this to the linkages, training and tools implemented to improve end-of-life processes.

Director of Care, Boneham Aged Care Services