



# Westmont Aged Care Services



Residential Aged Care



Baranduda,  
Victoria

## Goal

To improve the level of palliative and end of life care through increased uptake of advance care planning, closer connections with local service and increased staff knowledge in recognising and responding to deterioration.

## Highlights

- Less transfers to hospital for end of life care
- Increased uptake of advance care planning for residents
- Collaboration with local specialist palliative care services
- Upskilling nursing staff to provide care

Westmont is a community- based not-for-profit organisation, providing retirement living options, residential aged care and community care located in Baranduda, 10 km South-East of Wodonga, Victoria .

The Baranduda site includes 123 independent living villas, 40 assisted living apartments and 134 residential aged care beds, all surrounded by 16 hectares of well-maintained gardens, wide walking paths, ponds, BBQ areas, and a community and recreational centre. Residents at Westmont Aged Care villas and apartments receive person-centred care and a range of facilities, service, and social activities in the vast rural surrounds of sunny north east Victoria.

Before Westmont's participation in the ELDAC Linkages program, their adoption of advance care plans was less than optimal, with many residents having outdated or incomplete plans. It was identified that the service needed to reconsider their approach, renew their resources and formalise their processes. To drive more uptake among residents, nurses participated in educational modules to enhance their understanding of the forms and requirements for creating advance care plans, as well as appointing substitute decision-makers in accordance with state legislation in Victoria. Their ELDAC Linkages facilitator supported them with a guide and resources which helped them with their policies and procedures. The team created new systems for advance care planning (ACP) along with creating dedicated roles to support the advance care planning process. Along with this, they identified ACP RN champions within the team to communicate with newly admitted residents and their families to have the important conversations to support decision making about wishes and choices for advance care planning.

Consequently there was more engagement with residents regarding ACP, resulting in 90% participation, a great improvement from previous levels. This was a significant achievement for the team who have set a goal of 100%.

Another challenge identified before participation in the ELDAC Linkages program was the need for more comprehensive clinical assessment to recognise deterioration. Through the collaboration, the facilitator assisted in selecting Palliative Care Assessment Tools to recognise end of life stages, respond to deterioration, and assess palliative residents. With improved clinical assessment, GPs and Registered Nurses were able to strengthen

their resident care plans, communicate with families more confidently, and provide effective palliative care, resulting in reduced hospital transfer rates.

Identifying clear and consistent processes and levels of contact to guide clinical leads in responding to deterioration was another priority. Westmont established an escalation pathway for care staff and nurses to identify deterioration, arrange family meetings, and develop person-centred palliative care plans. This pathway includes information and access to support from external agencies, which is particularly useful after hours.



Prior to the ELDAC Linkages program, Westmont lacked collaboration with specialist palliative care services and had outdated connections that needed renewal. Although Westmont always had good relationships with their GPs, there was no clear referral pathway for residents to access specialist palliative care they had identified. With the support of the ELDAC Linkages facilitator, they established contact with a specialist palliative care service in their local area and with their help along with the ELDAC Linkages facilitator were able to introduce a referral pathway as part of their clinical

processes. This visual pathway is now accessible to all staff for reference when needed, enabling better management of complex care needs and reducing hospital transfers.

Additionally, Westmont upskilled their teams with the support of the local Specialist Palliative Care Team and accessed national resources and external education programs. This provided a strong foundation of knowledge and education about palliative and end of life care.

"Our teams have gained more skills and knowledge and are now better able to detect deteriorating symptoms early and confidently at end of life care."

## Key outcomes

- Improved continuity of care
- Increased completion of advance care planning documentation for residents
- Increased case conferencing and communication about palliative care needs of residents
- Introduced key assessment tools,
- Improved processes and resources to support advance care planning at Westmont
- Increased confidence in RNs to communicate with families and residents about end of life wishes
- Created escalation pathway for consistent approach to deterioration
- Clear referral process to specialist palliative care service

## Fostering a positive work culture and empowering staff

The ELDAC Linkages program has opened up a wide source of continuous information and knowledge from various national and state platforms and resources such as palliAGED, Advance Care Planning Australia and PEPA Victoria. The ELDAC Linkages facilitator has been a go to person whom we can approach any time via phone or email for any questions or information. This collaboration has helped us tremendously to foster a positive work culture in regard to providing effective palliative care in aged care. After participating in the ELDAC Linkages program, the care staff are now more empowered to talk about end of life care and the importance of advance care planning. When a resident reaches the palliative and end of life phase, staff from all levels are more equipped to fulfil their wishes, provide person centred care, manage their symptoms and ensure their death is more peaceful and dignified. The collaboration with specialist palliative care services has given nurses a reassurance that the complex care needs of palliative residents will be met in an effective manner.

*Laura Souquet, Care Manager, Westmont Aged Care Services*