

WORKSHOP ABSTRACT

Many Hands: A Person First Model of Care for People at end of life. Solutions to a Public Health Challenge (Workshop)

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What if we could create care choices at the end of life? What if people felt confident to support a dying person? What if that person had family and friends at their side, aided by a community nurse, skilled community informal carers, a care coordinator, and perhaps their GP?

There is a need for a sustainable and integrated model of end of life care that meets the expectations of citizens and their families as the fiscal demands on our health system increase in the coming decades (1)

In Australia only 20 % of people die outside hospitals or RACF's, one of the lowest rates in the developed world. The costs for community based care can be 50% or less than a hospital (2), and the emergent models of Compassionate Communities show sustainability and improved social, physical, spiritual and emotional benefits in line with the Ottawa Charter.

This workshop will give an overview of such a "work in progress" local model based on a person first, compassionate community framework, which is scaleable to meet the growing public health challenge of end of life, grief and bereavement. With increased death literacy people can feel confident to support the dying in the community and declare that this is a part of the life cycle care that can be "done by us, for us". The current lack of urban GP engagement in palliative care, and the barriers to GP participation in end of life care make this an urgent challenge.

Emerging Australian public policy (3) aligns with this model of end of life care and can be interwoven with the homeostatic First Nations knowledges that have enabled families and communities to thrive in life and celebrate death for over 60,000 years.

1. Australia's Health 2016 (AIHW)

2. SCARC 2012

3. Compassionate Communities; Final Report 2018, NOUS Group