

# Can a Good Death Be Achieved in the Community Setting for Diverse Populations? The PEACH Model of Care



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## 1. Background

A key priority for SWSLHD (End of Life & Palliative Care Strategy to 2028) is delivering high quality end of life and palliative care services to meet the needs of the diverse and rapidly growing community. The Palliative Extended and Care at Home (PEACH) model aims to support clients in their wish to die at home via providing additional care using a strong component of the community nursing model.

## 2. Aim

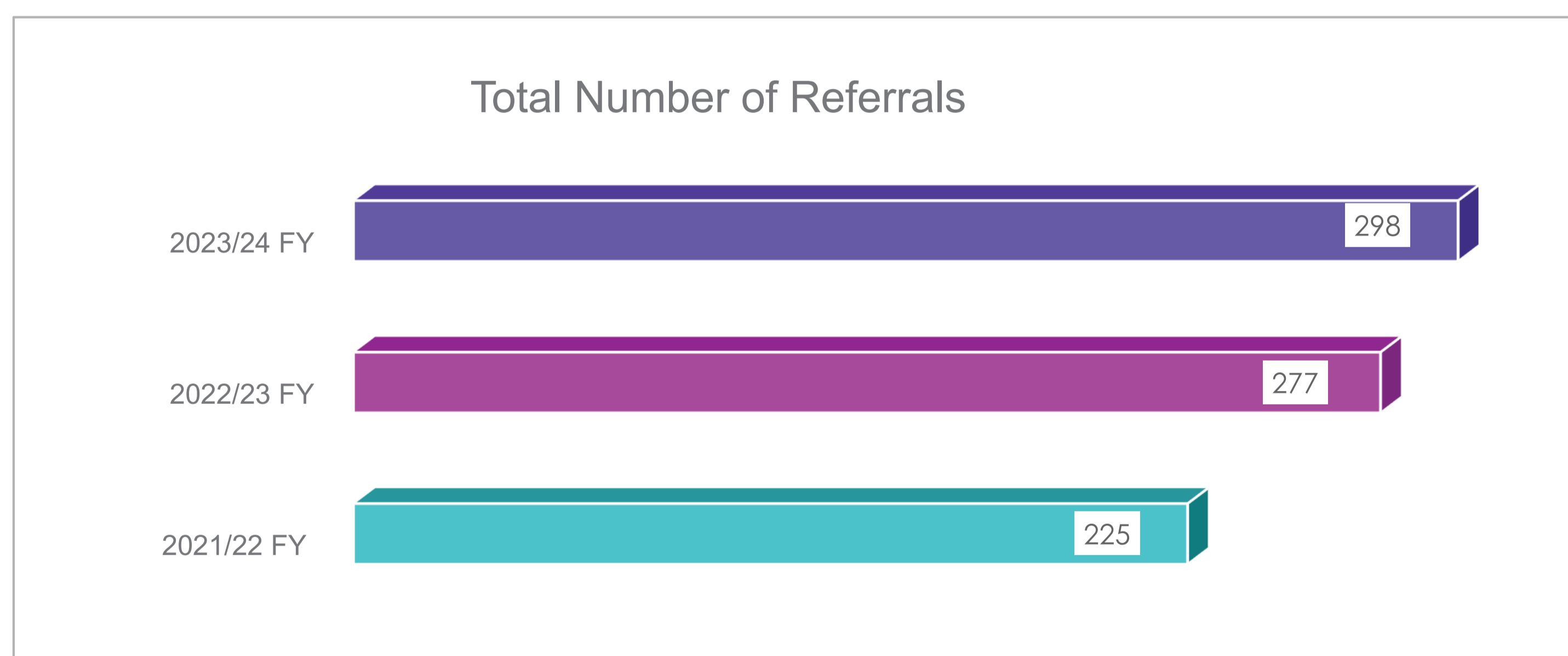
To offer patients and their families the option to die at home by providing optimal nursing led services for support, symptom assessment and ongoing management, through additional home visiting services and bereavement support.

## 3. Methods

The model involves a robust governance structure involving collaboration with an external provider and includes:

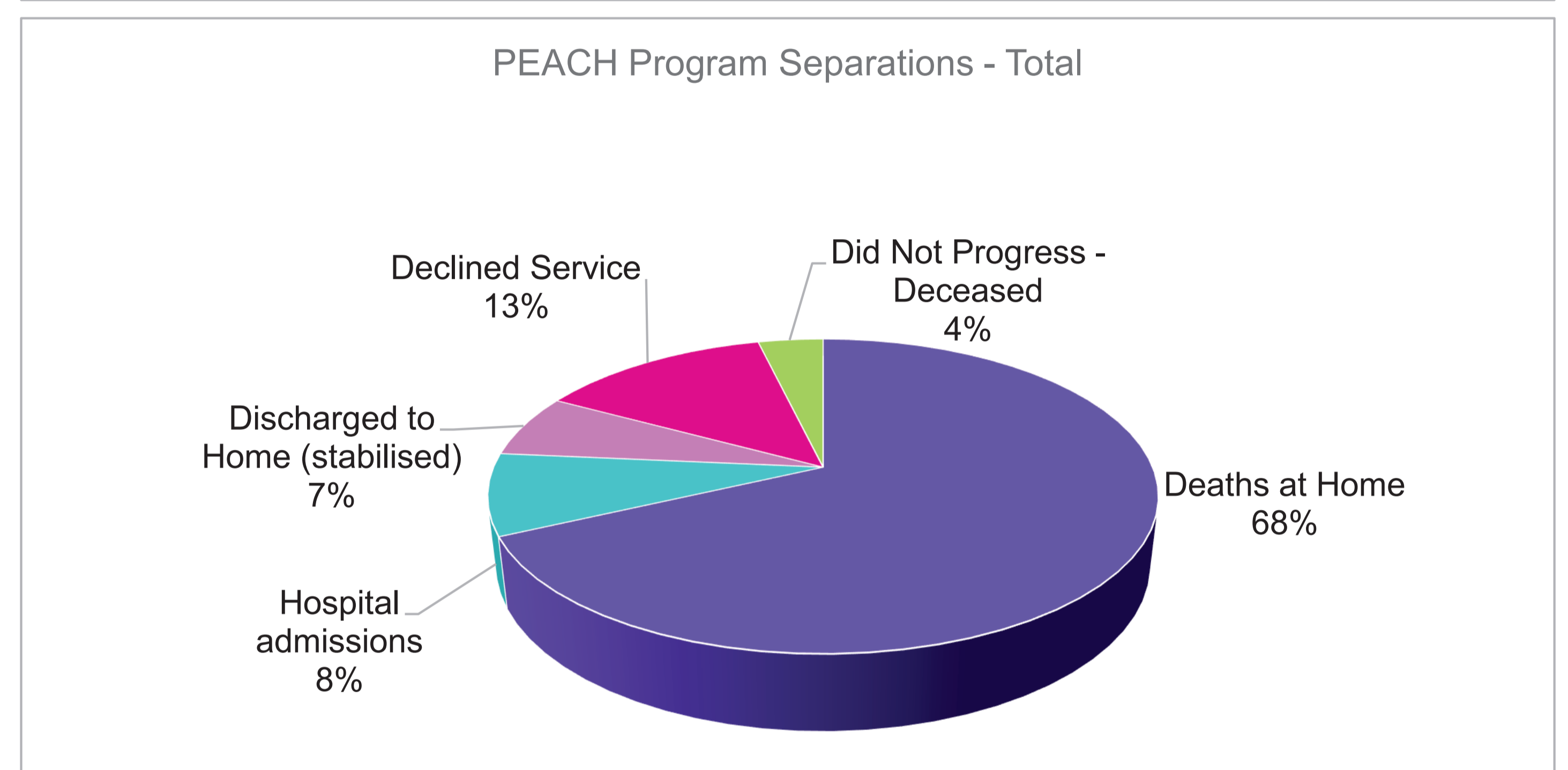
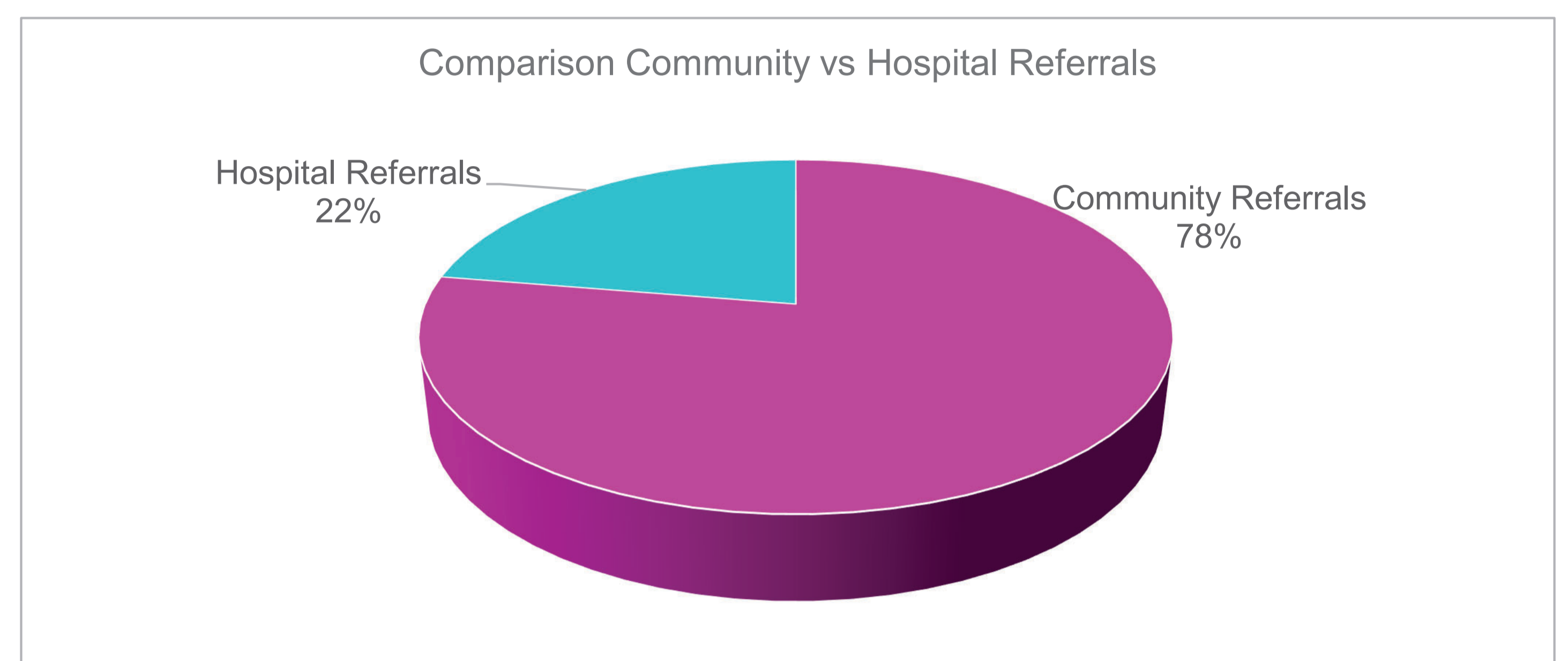
- Data collection that monitors patient's preferences for end of life care and demographics
- Catering for paediatrics through to the older persons
- Providing services to cancer and non cancer patients
- A carer survey provides feedback on services and staff consultations through TYE provides opportunities to feedback and recognise nurses who are acknowledged by families.
- Learnings from the feedback provide opportunities for quality improvements.

## 4. Results



Fairfield LGA is one of the largest referrers and has a broad number of CaLD background clients. Macarthur LGAs have a larger number of paediatric clients compared to other LGAs as well as indigenous people.

Average length of stay on the program is 6.4 days



Challenges for the program and lessons learnt has resulted in pilot testing of local community nurses providing the evening service for several months in two LGAs rather than an external provider with future possibility of incorporating the program as usual business into Primary & Community Health.

*"The afternoon nurses (PEACH RN) are very helpful looking after mum. The support of us as carers was so helpful in looking after us as a family."*

Mrs. H family

*"It is a privilege to provide a service that helps patients and their families to care at home, and that both services compliment each other."*

PEACH RN

## 5. Conclusion

This model of care supports the needs of palliative care clients to have a choice about where they wish to die.

This not only supports client choice but their carers/family's and provides care and ongoing assessment to support optimal symptom management and carer support for end of life care.

Overall, the program caters to a diverse range of people who are approaching and reaching the end of their life and measures demonstrate its success in supporting diversity and needs of dying at home.

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