

Needs based palliative care: new guidelines and assessment tool now available



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The Palliative Care Needs Assessment Guidelines and Needs Assessment Tool

Directing a more needs based approach to the delivery of palliative care has become an important focus, so that people receive care according to the complexity and severity of their needs, independent of diagnosis or prognosis.

The *Palliative Care Needs Assessment Guidelines*, developed in 2006 provide a comprehensive review of the physical and psychosocial issues that may impact upon advanced cancer patients, their caregivers, families and health professionals. The *Palliative Care Needs Assessment Tool (PC-NAT)* was developed to complement the

The purpose of the PC-NAT

The PC-NAT was designed for ongoing use in both generalist and specialist care settings to assess the unmet needs of people with advanced cancer and their caregivers. The PC-NAT aims to distinguish between those who have:

- no problems and no need for services;
- minor problems (ie, low need), which may be met by their primary health professional;
- medium to high needs and potentially require a referral for full assessment by specialist services.

Essentially, the PC-NAT is intended to provide a pathway for people to become involved in specialist care should their needs require it, but also allows for those people who no longer require assistance from these services to be followed up for care by their primary health care team.

The PC-NAT was designed for use by multi-disciplinary health professionals involved in the care of people with cancer in generalist and specialist settings. The PC-NAT has been tested with oncologists, general practitioners,

The benefits of the PC-NAT

Impact on patient outcomes

- Can assist health professionals to identify and address any problems patients had with:
 - the amount and type of information received about their disease, diagnosis, treatment or follow-up
 - the physical and emotional care and support they were receiving.
- Identifying and addressing issues as they arise can minimise the expected worsening of physical and daily living needs and quality of life associated with progressing disease.

Impact on service utilisation and referral

- Can assist busy clinicians to efficiently identify issues of concern, particularly in areas that are not routinely well addressed such as psychosocial issues.
- In the majority of cases, the issue of concern identified can be managed by the health professional completing the PC-NAT or someone from their care team.
- Has a high rate of completion (83%) by a range of health professionals
- Completion does not create additional burden in terms of consultation length.

Reliability, validity and clinically feasibility

- Reliable, valid and clinically feasible when tested in a clinical setting with people with advanced cancer.

If you would like a pad of PC-NATs to use in your centre, or you would like any further information about the PC-NAT, please contact Amy Waller at the Centre for Health Research & Psycho-oncology on Ph: (02) 4913 8609 or by email: amy.waller@newcastle.edu.au. A summary of the Guidelines can be found at <http://www.newcastle.edu.au/research-centre/cherp/professional-resources>.