

PALLIATIVE CARE IN PRISONS PROJECT

Queensland University of Technology (QUT) in partnership with
UTS: IMPACCT



Message from Project Lead

PROFESSOR JANE PHILLIPS

Welcome to Issue 13 of the Palliative Care in Prisons (PiP) Project Newsletter.

As the project enters its last 9th month of operation, I am pleased to report that we are making significant progress since the last newsletter.

We are in the final stages of securing governance approval to collect the Queensland gap analysis data and supporting the correctional team in Victoria extract the data about the care of people who died in prison with palliative care needs and the team extracting the WA Health hospital medical record data. Plans are also underway to share this data and seek the insights and feedback of the National Aboriginal Leadership Group before the end of 2024.

Following the National capacity-building planning workshops, we have been working on the development of the cases for the Qstream online education module for Correctional Staff. The Project team will shortly be sending out an expression of interest to each Justice Health and Correctional services to nominate their representatives to contribute to the development of these major pieces of work and anticipate having two representatives from each jurisdiction contribute to this aspect of the project, along with helping to co-design the National Framework for the delivery of palliative care for people in prison.

We have also started planning a National Workshop to help build the capacity of the jurisdictionally based Indigenous (IPEPA) and Palliative Experience in a Palliative Approach (PEPA) Teams so that they are better equipped and prepared to provide in-reach education for Jurisdictional Justice Health Professionals, that takes into account of the operational requirements of providing palliative care to people in prison.

We recently met with Care Search to map out a process for access to the curated resources developed or identified as being relevant to providing palliative care to people in prison.

Until next time,
Jane Phillips, Project Lead

MOLLY CARLILE

Molly Carlile AM is a multi-award-winning Registered Nurse, health leader and senior executive as well as an advocate for improving community death literacy. Previously Chief Executive Officer at a large community palliative care organisation and General Manager of Integrated Cancer Services at the ONJ Cancer & Wellness Centre, she has held senior roles in inpatient, community and acute health services working in palliative care with terminally ill people, their families and carers for many years.


She has been intimately involved in raising community awareness of issues relating to death, grief and palliative care with people of all ages and to this end has been a regular guest on television and radio, has written three books and speaks all over the country in an effort to inform and empower people to acknowledge their mortality and speak openly about the “stuff that matters” with those close to them. Molly is a Fellow of the Australian College of Nursing, a Fellow of the Australian Institute of Company Directors and a Churchill Fellow. In 2016 she was awarded a Member of the Order of Australia for her work in palliative care and the arts.



In 2022 she returned to do what she loves, building capacity and relationships in palliative and end of life care as the Manager of PEPA/IPEPA Victoria. The PEPA/IPEPA Victoria education team have been conducting workshops for Port Phillip Prison clinical and correctional staff since this time. This includes conducting full day workshops on “Culturally responsive palliative care for Aboriginal and Torres Strait Islander peoples”, facilitated by First Nations Consultant, Nicole Cassar. The aim of the variety of content that has been delivered is to engage prison staff in developing knowledge and skills about palliative care and to support them in growing their confidence to communicate more effectively and respectfully with seriously ill prisoners.

NEW RESOURCES

SPICT-4ALL

Supportive and Palliative Care Indicators Tool SPICT-4ALL™ in Prisons 

The SPICT™ helps us to look for people who are less well with one or more health problems. These people need more help and care now, and a plan for care in the future. This version is for prison health and care. Ask these questions:

Does this person have signs of poor or worsening health?

- Unplanned (emergency) admission(s) to hospital.
- General health is poor or getting worse. The person never quite recovers from being more unwell. (This can mean the person is less able to manage and often stays in bed or in a chair for more than half the day).
- Needs help from others for care due to increasing physical and/or mental health problems. (e.g. social care package or Prison Buddy, wheelchair needed to get around prison).
- Officers are worried about this person's health and welfare.
- Has lost a noticeable amount of weight over the last few months; or stays underweight.
- Has troublesome symptoms most of the time despite good treatment of their health problems.
- The person has decided not to have any more treatment or stopped treatment; or the person wishes to focus on quality of life, or asks for palliative care.

Does this person have any of these health problems?

Cancer	Heart or circulation problems	Kidney problems
Less able to manage usual activities and getting worse.	Heart failure or has lost attacks of chest pain. Short of breath when resting, moving or walking a few steps.	Kidneys are failing and general health is getting poorer.
Not well enough for cancer treatment or treatment is to help with symptoms.	Very poor circulation in the legs; surgery is not possible.	Stopping kidney dialysis or choosing supportive care instead of starting dialysis.
Dementia/fragility	Lung problems	Liver problems
Unable to dress, walk or eat without help.	Unwell with long term lung problems. Short of breath when resting, moving or walking a few steps even when the chest is at its best.	Worsening liver problems in the past year with complications like:
Eating and drinking less; difficulty with swallowing.	Needs to use oxygen for most of the day and night.	• fluid building up in the belly
Has lost control of bladder and bowel.	Has needed treatment with a breathing machine in the hospital.	• being confused at times
Not able to communicate by speaking; not responding much to other people.	Other conditions	• kidneys not working well
Frequent falls; fractured hip.	People who are less well and may die from other health problems or complications. There is no treatment available or it will not work well.	• infections
Frequent infections; pneumonia.	What we can do to help this person.	• bleeding from the gut
Nervous system problems	• Start talking with the person about why making plans for care is important. (Exclude family/close friend if appropriate.)	A liver transplant is not possible.
ing Parkinson's disease, MS, stroke, motor neurone disease)	• Ask for help and advice from staff who can assess the person and plan care (e.g. nurse, doctor, social care, palliative care specialist)	
Physical and mental health are getting worse.	• Look at the person's medicines and other treatments. Are some not helping now or needing changed? Do we need 'see to take'? Get advice if symptoms are complicated or hard to manage.	
More problems with speaking and communicating; swallowing is getting worse.	• Plan early if the person might not be able to decide things in the future. (Offer advance/future care planning)	
Chest infections or pneumonia; breathing problems.	• Record the care plan and share it with people who need to see it. (Use the correct systems and care plans for this.)	
Severe stroke with loss of movement and ongoing disability.		

Please register on the SPICT website www.spict.org.uk for information and updates.

SPICT 2020

In the last newsletter we shared the Specialist Palliative Care Indicators Too (SPICT). Since then, the SPICT-4ALL prison specific version has been released, The SPICT-4ALL helps health and care staff identify people who might benefit from palliative care and this updated version includes less ‘medical’ language, making it much more accessible. You can obtain a copy and guide of the SPICT-4ALL from [here](#)

Over the next 12 months, the Project will deliver a range of activities designed to enhance the skills and knowledge of correctional services and justice health professionals and encouraging their active participation.

Q STREAM

We are in the process of designing case studies and questions to be included on an online spaced education platform for correctional services personnel. Correctional services input is vital to ensure the case studies reflect the prison environment and that the learning needs of corrections staff are met. To facilitate this, the Project Team is proposing a Sydney based workshop on November 28th & 29th 2024 for Correctional services personnel to contribute to the case study design. Please nominate attendees by emailing Pip.project@qut.edu.au



COMMUNITY OF PRACTICE

The Community of Practice sessions continue to be an exceptional avenue to share skills and knowledge. The most recent session was on the "In Reach Models of Palliative Care for People in Prison – The WA experience". The case study shared and discussion was valuable for participants to learn what specifically contributed to the success of this service. This session outlined some of the complexities involved in managing people in prison, supporting the corrections team and enabling family to connect with the patient. We thank Dr Paula Moffat (Palliative Care Consultant and Consultant Geriatrician) and Dr Fermin Blanco May for sharing their expertise with us all.

If you have not received a calendar invite for these and would like to attend, please contact: pip.project@qut.edu.au. The next session will be held on 10th October, 2024 and discuss "Managing Depression and Anxiety in the Context of Palliative Care Needs of People Living in Prison".

Previous recordings are also available [here](#). Including previous sessions on Pain Management in Prison and Providing Culturally Safe Palliative Care in Prison.

Please contact the PiP team with any topic suggestions or to volunteer as a panel member as we have availability in 2025.

RESOURCES

Queensland Palliative Care Capacity-Building Workshop Report

The Queensland Palliative Care Capacity-Building Workshop brought together Queensland stakeholders from Justice Health and Correctional Services to develop strategies for enhancing palliative care in prisons. The report highlights practical recommendations for improving care through targeted education, collaboration, and culturally sensitive practices, aiming to better support the palliative needs of people in prisons in Queensland.

[Read the workshop report here](#)

IPEPA Animated series

Featuring the voice of multi-talented Sean Choolburra, IPEPA's animated series of short films take you on a journey exploring various aspects of what happens when someone is diagnosed with a terminal illness. These videos draw on Aboriginal and Torres Strait Islander cultural strengths and perspectives to educate and entertain communities and health professionals about palliative care themes in a grass-roots way

Watch the video series [here](#)

New core medicines list supports palliative care patients at home

National Palliative Care Project caring@home has released a new National Core Community Palliative Care Medicines List. The list identifies four medicines that clinicians can prescribe to manage symptoms for patients receiving palliative care at home. The caring@home also provides free practical, evidence-based resources and education for health and aged care workers to help with end-of-life planning. Resources are available at www.caringathomeproject.com.au/Health-Professionals/Resources-to-support-you

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PALLIATIVE CARE
IN PRISONS PROJECT

In partnership with:

SPHERE

Sydney Partnership for
Health, Education,
Research and Enterprise



Maridulu Budyari Gumatj
Working together for good health and wellbeing

NEXT MEETINGS

National Consortia Project
Advisory Group
Tuesday 19 November 2024
12:30-14:00 AEST



Correctional/ Justice Health
Services Working Group
Wednesday 16 October 2024
13:00-14:00 AEST



Aboriginal and Torres Strait
Islander Community
Engagement Strategy
Working Group
Tuesday 12 November 2024
14:00-15:00 AEST



This project is funded by the Australian Government, Department of Health: Public Health and Chronic Disease Program, as part of the National Palliative Care Projects initiative.