Analysis of patients' experiences in Community Palliative Care using the consideRATE Tool

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KEYWORDS

Palliative care, patient experiences, ConsideRATE

EXECUTIVE SUMMARY (100 words maximum)

The ConsideRATE tool offered a compassionate and practical way to listen to people living with life-limiting illness and those who care for them. It became a conduit for honest dialogue and rich narrative, inviting reflections that deepened understanding of what truly matters at the end of life. By bringing the voice of the person dying into everyday reflection, teams were reminded that being seen, heard, and cared for as a person, can profoundly shape the quality of living and dying in the community.

INTRODUCTION

To improve quality, safety, and person-centred outcomes, it is important to explore patient experiences related to community palliative care. Despite growing interest in patient-reported experience measures, there have been few validated tools developed for rural or community-based palliative environments.

Aim

The present study investigated the utility of the ConsideRATE instrument for the collection of palliative care experiences from individuals receiving community palliative care and their carers.

HIGHLIGHTS

- 322 eligible participants, 77 responded, 50 patients, 27 Carers
- Thematic analysis identified three major drivers of positive experience**: timely and humane communication; care planning participation; and continuity between care providers.**
- Survey was the conduit for honest dialogue and rich narrative, inviting reflections that deepened understanding of what truly matters at the end of life

METHODOLOGY/ PROCESS

A cross-sectional design was used over twelve months in a geographically large, rural and remote community palliative setting.

Participants were invited to complete the ConsideRATE questionnaire, by phone, face-to face or digitally, at time points 4 and 12 weeks following registration and contact with the service.

Descriptive measures were used to identify areas of care the patients and carers most valued.

Analysis of qualitative free-text responses was conducted thematically to identify contextual factors and the potential for service improvements.

RESULTS/ OUTCOMES

312 patients and carers from rural and remote locations replied. Respondents reported a general high satisfaction with empathy, communication and care coordination. Thematic analysis identified three major drivers of positive experience: timely and humane communication; care planning participation; and continuity between care providers.

CONCLUSION

The ConsideRATE tool offered a compassionate and practical way to listen to people living with life-limiting illness and those who care for them. It became a conduit for honest dialogue and rich narrative, inviting reflections that deepened understanding of what truly matters at the end of life. By bringing the voice of the person dying into everyday reflection, teams were reminded that being seen, heard, and cared for as a person, can profoundly shape the quality of living and dying in the community.

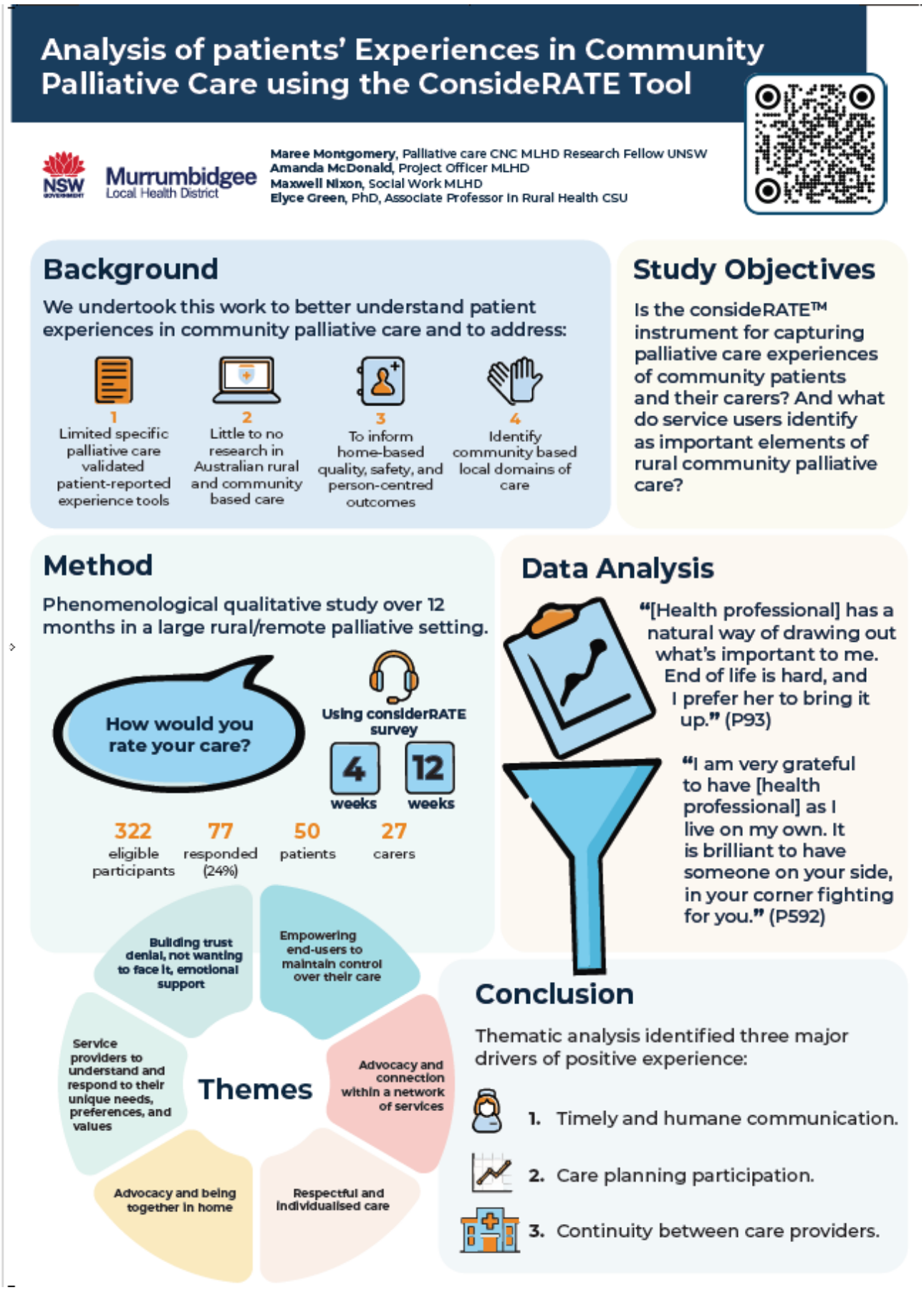

Figure 1. Analysis of patients' experiences in Community Palliative Care using the consideRATE Tool