

Advanced skills role and model of service delivery: Palliative Care (PC)

Setting	Focus of care and influence	Role	Key connections
General practice	Patients	 Enhance access to, and delivery of, quality Palliative Care in rural and remote communities by providing: Holistic, high quality, primary and emergency medical care as a Rural Generalist including participation in on-call duties, supervision, and support of trainees. 	Local specialty outreach services Tertiary subspecialty services
Hospital	Community	 Expert assessment and management of Palliative Care related emergency, inpatient and primary care presentations including delivery of specific assessments and interventions. 	Consultant Physician Palliative Care Registrar Private specialist services
,		 Establishment of and participation in palliative care specific clinics in the community in collaboration with visiting specialists. Establishment of referral pathways and various innovative community specific 	General Practice/Primary Care colleagues
Primary Health Care Centre	Colleagues	 health delivery methods (eg. telehealth) to meet community need. Coordinating and integrating patient care across primary, secondary and specialty services. 	Multidisciplinary allied services – public and private
Community Controlled Health Service	Health service/ practice	 Building capacity and skills of the rural healthcare team and collaborative working relationships with visiting specialists. Development / review of relevant hospital protocols. 	Community and Government service providers, including aged care Community organisations and
		 Facilitate application of relevant legislation and guidelines locally. Advocacy and promotion of future development of Palliative Care services, building community resilience and social capital. 	stakeholders eg. Police-Citizens Youth Club, Returned Services League, local council
Other		 Development of / participation in community programs addressing specific community needs. Other opportunities for additional scope of extended practice, including roles in management, education, and research. 	



Examples of what the PC AST job might look like in practice:

What the job looks like will depend on your location/context, community need and your skills/interests. Every RG who has an PC advanced skill has a slightly different role that works for them and their community. The following examples provide an idea of what a week in the life of an RG with PC AST might look like but there are many different models and ways the role can work best for you and your community. It is what you make it.

Primarily private GP/AMS

- Some RGs with PC AST work mainly in General Practice or AMS and provide extended scope services to their patients in close consultation with their physician colleagues and tertiary referral services

Primarily hospital based

- Alternatively, some RGs with PC AST deliver their service from a hospital setting, running Palliative Care clinics in consultation with visiting physicians and might be involved in renal dialysis services, cardiac clinics etc. depending on their particular skill set

Mixed hospital and primary care context

- Many RGs do a mixture of both hospital based and primary or community based care and use their skill set to provide care across contexts to better meet the needs of their community

Other hats our RGs with PC AST wear

- Managerial roles, academic roles, GP supervisors, etc.

