Concerns and care needs of older patients in South Australian rural public hospitals



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INTRODUCTION

More than 1 in 3 Australians live in rural communities, and compared with urban dwellers, experience lower life expectancy and higher mortality rates, as well as higher potentially avoidable hospitalisations. ^a

Hospital admissions in Australia increase in the last year of life ^b but palliative care can reduce hospital admissions, cost, and interventions, and improve quality of living and dying for patients and families facing life-threatening illnesses. ^c

However, we know little about what healthcare people aging in rural areas want as their health deteriorates.

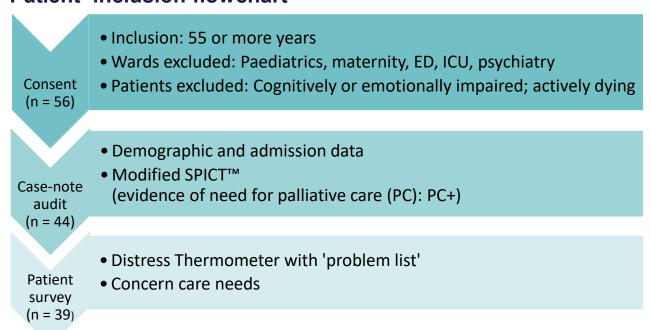
METHODS

What: Cross-sectional case-note audit and survey

Where: Five South Australian rural hospitals (see maps)

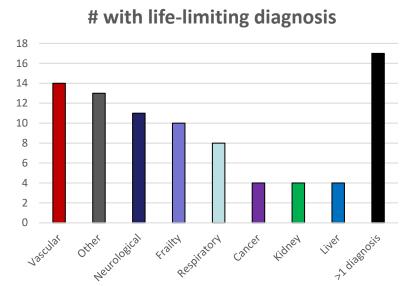


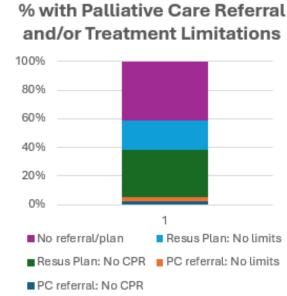
Patient inclusion flowchart



RESULTS

Case-note audit data (N = 39)

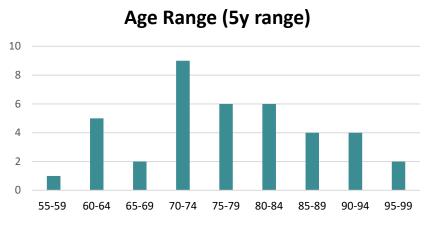


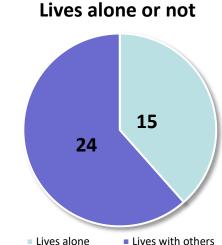


References

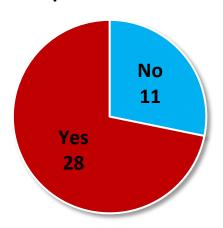
- $\textbf{a.}\ \underline{\text{https://www.aihw.gov.au/reports/rural-remote-australians/rural-and-remote-health;}\\$
- $b.\ \underline{https://www.aihw.gov.au/reports/life-expectancy-deaths/the-last-year-of-life-health-service-use-patterns}$
- c. https://www.health.gov.au/resources/publications/the-national-palliative-care-strategy-2018

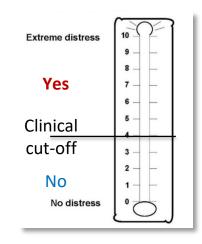
Survey data (N = 39)



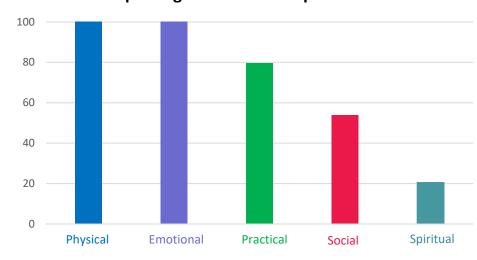


Is the patient distressed?





% reporting concerns in DT problem list



Top 10 concerns and # wanting help

Domain	Item (n)	% (N = 39)	Wan n	ts help %n
Physical	Loss of physical abilities (29)	74	12	41
Other	Feeling dependent on others (22)	56	6	27
Practical	Looking after myself (21)	54	13	62
Physical	Fatigue (19)	49	5	54
Physical	Sleep (19)	49	6	54
Emotional	Worry or anxiety (17)	44	5	44
Other	Feeling out of control (15)	38	3	20
Emotional	Sadness or depression (12)	31	3	25
Emotional	Feeling worthless or a burden (12)	31	1	8
Social	Relationship with healthcare team (10)	26	8	80

CONCLUSION

Although 80% of eligible patients had advanced life-limiting disease, 40% of these had no referral to palliative care or resuscitation plan; only two had referrals to palliative care. More than half were aged 70-85 years and 1 in 3 lived alone. More than 70% reported clinically significant levels of distress; all reported physical and emotional concerns but did not necessarily want help to manage these.

The most common concerns appear to address fears of losing independence due to decreasing physical abilities; more than half those reporting fatigue, sleep, or concerns about relationships with their healthcare team wanted help to manage these.

Additional resources may be required to address specific areas of concerns, particularly where patients indicate a need for help.



