



European Union  
European Social Fund

# Greek Home Palliative Care Cancer Patients Needs' Assessment and Interventions by an Out of Hours Nurse-Led Telephone Service. Preliminary Results.

S. Katsaragakis<sup>1,2</sup>, A. Chamou<sup>2</sup>, A. Tsiatsouli<sup>2</sup>, Ch. Ekonomou<sup>2</sup>, E. Ioannou<sup>2</sup>, O.M. Bagiaou<sup>2</sup>, V. Baltioti<sup>2</sup>, I. Liakopoulos<sup>2</sup>, E. Patiraki<sup>2, 3</sup>, A. Tserkezoglou<sup>2</sup>.

<sup>1</sup>University of Peloponnese, Nursing Faculty, Sparta, Greece,

<sup>2</sup>Palliative Care Unit 'Galilea', Holy Metropolis Mesogaia & Lavreotiki, Spata, Greece,

<sup>3</sup>National and Kapodistrian University of Athens, Nursing Faculty, Athens, Greece

**Introduction:** An out-of-hours (OOH) telephone support and advice service to cancer patients, and their caregivers, is considered to be an essential part of quality service provision. The AIM of this study is to assess the reasons for OOH calls from cancer patients receiving home palliative care services and subsequent interventions. Study was funded by FP 8.

**Material & Methods:** A consecutive number of cancer patients and caregivers, cared by a home palliative care program, in a suburban area, who used the OOH nurse-led telephone service, were surveyed from November 2013 to June 2014. Prospective data collection of the OOH calls included: Epidemiological data of callers, characteristics of OOH calls, requests, and interventions. The calls were then split or merged according to the callers' request on a 24hour basis, comprising the study sample.

**Results:** Out of 98 patients in the home care service during study time period, 56 (57.1%) used the OOH service, making 334 calls. The context analysis of these calls in a 24 hours basis concluded to a total number of 322 call requests. Five nurses managed the OOH service during study period.

## Patients' Demographics & Care Data

	Frequency (N=56)	Percentage (%)
Sex		
Male	31	55.4
Female	25	44.6
Age (mean ± SD) (range) (years)	68,3±12,0 (41-94)	
Median Time from Admission to the 1 <sup>st</sup> OOH (mean ± SD) (range) (days)	27 (1-1404)	
Outcome of Care		
Dead	32	57.1
Alive	24	42.9

## OHH Service Users' Characteristics

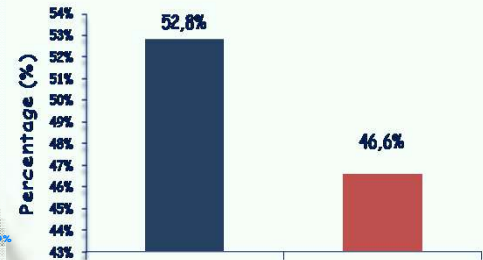
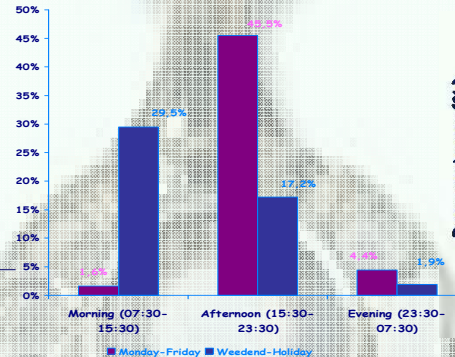
	Frequency (N=322)	Percentage (%)
Child	103	32.0
Spouse/ Partner	97	30.1
Sibling	44	13.7
Patient	38	11.8
Daughter in law	9	2.8
Neighbor	7	2.2
Other Family Member	7	2.2
Parent	6	1.8
Paid caregiver	5	1.6
Other	6	1.8

## Call Request Characteristics

Mean number of requests per user (mean ± SD) (range)	5.8±4.40 (1-21)
Mean time duration of call request (mean ± SD) (range) (min)	4.3±3.1 (1-22)
Mean number of calls for the management of one request (mean ± SD) (range)	1.2±0,5 (1-6)

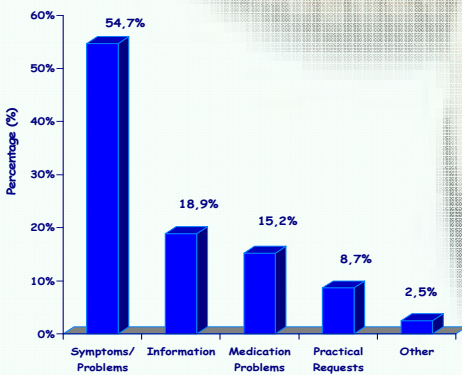
SD Standard Deviation

## Time Distribution of Call Requests per Day Nurses' Estimation of Emergency of the Call Requests

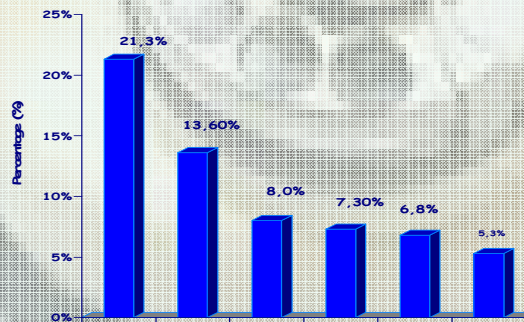


Mostly physical symptoms and end of life care (68.2%) were nominated as emergency requests ( $\chi^2(4)=44.1$ ,  $p<0.001$ )

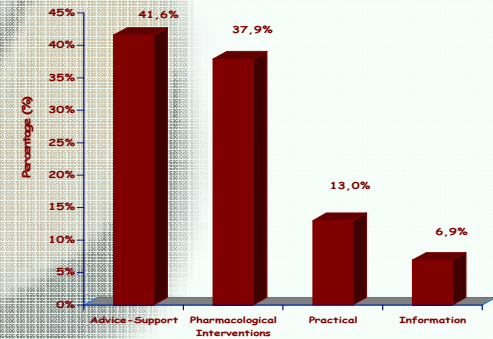
## Call Request Categories



## Most Prevalent Call Requests' in Symptoms/ Problems Category



## On Call Interventions



Nurses were able to effectively address patients' requests by telephone in 69.3% of cases, while a doctor's advice was needed in 22.7%. Moreover only in 2.5% hospital admission was advised, and while there have been 3 home visits.

**Conclusions:** Telephone consultations by palliative care nurses, can, in our setting, address patients' and caregivers' needs during OOH effectively, without a home visit, or inappropriate hospital admissions.

**Acknowledgement**  
This project was held during the Leadership Course of the European Palliative Care Academy (EUPCA). The European Palliative Care Academy (EUPCA) is funded by the Robert Bosch Stiftung. It is a joint project of the Robert Bosch Stiftung, the University Hospital of Cologne/ Germany, the Nicolaus Copernicus University in Torun/ Poland, the Hospice Casa Sperantei in Brasov/ Romania and King's College London/ United Kingdom. EUPCA identifies and trains emerging leaders across Europe so that they are able to contribute to advancing palliative care and addressing future challenges in this important field. It is implemented in collaboration with the European Association for Palliative Care (EAPC). Steering Committee Members: Louise Baker-Schuster, Dr. Catherine Evans, Gerrit Frerich, Flavia Hurducas, Reverend Dr Piotr Krakowiak, Dr. Bernadette Klapper, Dr. Jonathon Koffman, Nicoleta Mitrea, Prof. Daniela Mosoiu, Prof. Liliana Rogozea, Prof. Raymond Voltz."

