Palliative care in a hospital or community residential home

Summary

- There are various reasons for seeking inpatient palliative care instead of staying at home.
- Inpatient palliative care is provided in hospitals and specialist palliative care units.
- End of life and palliative care can be provided in residential aged care.
- Deciding to leave home can be difficult; talk with family members and your doctor.
- Family members or friends can still provide care for you if you have been admitted to an inpatient facility or residential care home.
- Make your transition to inpatient care more comfortable by bringing some special items from home as well as music, photos and books.
- Talk with your doctor about a referral to inpatient palliative care.

There is support available in Victoria if you choose to receive palliative care at home. However, there may be times when you need more care than can be given at home, and you may decide to move into residential care.

If your condition fluctuates, worsens or becomes complex, you may need care in a hospital or an inpatient specialist palliative care unit. Depending on where you live, the closest palliative care unit may be based in a local hospital. Often you can return home after a period of inpatient care.

You may need care at an inpatient palliative care unit or hospital for one or more of the following reasons:

- **symptom management** – assessment, monitoring and nursing care can be provided to manage symptoms such as severe pain and nausea
- **complex needs** – your medical or other needs may become complex and specialist care is more easily available 24 hours a day in an inpatient facility
- **respite** – you may be admitted to care for a few days or weeks so that your family or carer can have a break and take care of their own lives. You can return home after respite care
- **care as the end of life approaches** – you or your carer may decide that it is not possible for you to be cared for properly at home as you approach the end of your life.

**Inpatient specialist palliative care units**

Inpatient palliative care units (sometimes called ‘hospices’) are designed to support you when you can no longer get the care you need at home. Inpatient specialist palliative care units in hospitals are designed to be as ‘homely’ as possible. You are always free to bring in items from home to make your stay more comfortable.

There are usually no limits on visiting hours and your family and friends are encouraged to spend time with you and help with your care if they choose. Some units provide space for a family member or friend to stay overnight.

Inpatient palliative care units can include facilities such as lounges and televisions, music players, kitchens, meditation rooms, internet access and gardens. If you have a particular interest or hobby, ask a family or staff member to get you the things you need to pursue it.

Some palliative care units may have a small number of rooms within a hospital complex, while others may be attached to residential care facilities. Most palliative care units offer single rooms, but this is not guaranteed, so talk to the staff about available options.

A specialist palliative care doctor will manage your medical care along with other specialist palliative care health professionals.
professionals and your GP. If you have been seeing a counsellor, nurse or social worker at home, you will be able to see similar health care professionals while in the palliative care unit.

**Palliative care in public hospitals**

Specialist palliative care staff work in many of Victoria’s major public hospitals. They work together with your community palliative care service to assess and manage your palliative care needs.

You may need to have medical treatment in a hospital as part of your ongoing palliative care program or you may need to have palliative care while you are recovering from surgery. Whether you stay in hospital or go home will depend on your preferences and your immediate needs.

**Palliative care in private hospitals**

A small number of private hospitals across Victoria have dedicated palliative care units or outpatient services. If you have private health insurance, talk with your health insurance company about your options. The specialist palliative care staff in a private hospital will work with your community palliative care team.

You may choose to stay in hospital even if you are given the option of returning home. You may feel safer and more comfortable in hospital, or simply feel like less of a burden on your family. Talk further with your health insurance provider and your family and healthcare team about your options.

**Palliative care in residential care homes**

Depending on your needs, your doctor may suggest that you move into a residential care home. By moving into a residential aged care home or disability accommodation you will get the longer-term care you need as well as managing your end of life care needs.

Residential care homes sometimes have a doctor or specialist nursing staff. The residential care home can also involve the community palliative care service in your area to provide specialist care.

For residential aged care you will need to be assessed by the Aged Care Assessment Service. For more information see the [Aged care homes](https://www.aust.gov.au) fact sheet.

Making the decision to leave home for palliative care

Deciding when to move into a residential aged care home, inpatient palliative care unit or hospital is not always easy.

It is a good idea to talk through the different possibilities with your family and trusted health professional. If your condition deteriorates, or your family or friends are no longer able to care for you, you may need to consider options for inpatient or residential care.

You can document your preferences and wishes for care in an [advance care plan](https://www.betterhealth.vic.gov.au). 

**Continuing to receive palliative care from a relative or friend**

If a relative or friend has been caring for you while you have been receiving palliative care at home, you may want them to continue their caring role to some degree after you have moved into an inpatient palliative care unit or residential care home. Their level of involvement in your care is up to you (and them).

They can have a ‘hands-on’ approach if you wish, or can provide emotional support or help with day-to-day tasks. Talk to your loved one about what level of care they can commit to, and share your decision with the staff at the inpatient palliative care unit or residential care home.

It is important that you or your carer tell the staff about any cultural or spiritual wishes that need to be respected. There should be a quiet and private room provided for you to talk with the staff. Inpatient palliative care units are designed to provide support for both you and your carer.

You may want to bring in some special items from home, such as music, photos and books, to help make things more comfortable for you – or you could ask your carer to help you with this.

It is important for those who have been caring for you at home to remember that deciding to have care provided as an inpatient is not an ‘admission of failure’ or ‘giving up’. They can continue caring for you, but in a different way in a different place.

You can find more information here under the ‘Support for family and carers’ tab.

**Getting a referral to a hospital or inpatient palliative care unit**

If you require admission to a specialist palliative care unit or to a hospital, you will need to obtain a referral from your doctor.

**Where to get help**

You can find a palliative care service in Victoria by using:

- the ‘Find a health service’ search option on the [Better Health Channel](http://www.betterhealth.vic.gov.au) website
- the [Palliative Care Victoria](http://www.palliativecarevictoria.org.au) search directory
- the [National Palliative Care Service](http://www.nationalpalliativecareservice.org.au) online directory.

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**This page has been produced in consultation with and approved by:**

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