

Palliative Care in Rural Areas: a Pilot Project for Accomplishing Sufficient Care in the Future

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This Project is an important part of the “Taking Care Project” (TCP), a collaboration of the Oncologic-Palliative-Care-Network of Landshut and the University Clinic of Oncology and Hematology of the Ludwig Maximilians University Großhadern, Munich, Germany. It was implemented to improve the medical care for severely ill and complex cancer patients particularly in remote rural areas. The TCP is financially supported by the Bavarian state office for health- and food-safety.

Providing for these palliative-care patients sufficiently will become more problematic in the future. Germany faces an increasing demand of palliative care specialists due to demographic and health care changes. The impending lack of specialists due to concentration in urbanized areas and retirement is highly contrary to the stated demands of professional societies, health insurance companies and politics regarding this topic. This is in particular problematic for rural Bavaria. New approaches are therefore needed.



Methods Key instruments to achieve a better medical standard is introducing special personnel as linkage in both the peripheral practice and the university clinic. **As one part of this pilot project, yearly rotations of young resident doctors from the university clinic to the rural area of Landshut in lower Bavaria has been established for working and education in palliative care.**

The goal of this undertaking is to counteract the future lack of palliative and oncological care specialists and to generate a incentive for young doctors to permanently work in rural areas after completing their specialization. This Project, dubbed the "Taking Care Project" has been implemented 2013 and recently granted financial and political support by the Bavarian Ministry of Health and may be a model project for other areas facing similar problems.

The Projects of the TCP

- **Yearly Rotation of young doctors from the University Hospital to Landshut for training and working in palliative care:**
 1. Training in outpatient palliative care at the oncological and palliative care practice Landshut
 2. Participation in the “specialized outpatient palliative care service”, managing severely ill and dying patients at home with their family
 3. Daily consultation and rounds on the palliative care ward in the general hospital of Landshut
 4. Weekly rounds and consultation as well as general patient management at the Hospice of lower Bavaria in Vilsbiburg
- **Employment of two “Care Takers”, one at the University Hospital Munich, one at the oncological practice in Landshut. Their specific tasks are:**
 1. regular independent visitation of the patients for problem solving, confidence building and psychological help not covered by regular medical personnel
 2. preparation of admissions, releases
 3. patients coordination, documentation and evaluation of standardized questionnaires
 4. Management of tumor board presentations, making appointments for specialist consultation
- **Designation of specific ward and a specific doctor for all patients admitted from the Landshut practice** at the collaborating University Hospital Munich Großhadern, to guarantee continuance and transparency for patient care
- **Monthly specialist consultations in Landshut for patients after or before a complex therapy, including:**
 1. Bone marrow transplantation consultation by senior university physician in Landshut
 2. Surgical consultation for thoracic and liver resections by senior university physician in Landshut
 3. Pain management consultation by senior physician in Landshut

Conclusions

1. Incentives for future doctors to work in rural areas are created
2. The lack of palliative care specialists in rural areas is attenuated
3. Existing gaps between outpatient and inpatient care are closed
4. A state of the art oncological care for seriously ill and the elderly in rural areas is achieved
5. Continuous cross-sectional and quality-assured care of patients with complex diseases is ensured
6. An individual and personalized care is warranted