

Key issues for palliative care in 2010

In this edition, Chief Executive Officer of Palliative Care Australia, Donna Daniell, provides a special feature outlining the key issues for palliative care and PCA in 2010.

This new year – the election year – has opened with much anticipation about Rudd government decisions on health and hospital reform.

Prime Minister Rudd has stated “... this will be a big year for health and hospital reform ... We've increased hospitals investment by the Australian Government by 50 percent already and that's before we get to the next stage of health and hospital investment”.

We all wait with interest.

Perhaps our expectations should be tempered with the reality of our nation's plight as reflected in the 3rd Intergeneration Report released by Treasurer Wayne Swan this week. This report once more highlights the projections for an ageing Australia and the impact of a higher proportion of older people who require more services, but have a smaller contribution to the country's revenue stream.

As Treasurer Swan outlined in his National Press Club address, the reality is that in 2050 we will have 25 percent of our population aged over 65 years – in contrast to 13 percent today.

Everyone involved in health service delivery knows that it is only major, radical and system wide reform – reform that works to connect

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Message from the president

A warm welcome to 2010 and a challenging year ahead.

This year offers an opportunity to see the integration of palliative care across the whole of health – within the context of a federal election and at least 2 state elections, and the continuing process of health reform. This includes reform in the wider health sector as well as the review of the National Palliative Care Strategy.

This year is also my final year as President of Palliative care Australia. When I hand the presidency to Dr Scott Blackwell, I hope we can say that real progress has been made, in recognising the role of specialist palliative care and in supporting primary care to care for people at the end of life.

I hope that we can say that policy makers understand the absolute necessity that we care for people at the end of life as well as we care for people at the beginning of life.



The awareness-raising opportunity, because governments are in election mode, is one where the needs of people with terminal illness need to be placed before our political representatives.

Palliative Care Australia will be coordinating with the sector, drawing upon your expertise, to continue our work in giving politicians and policy makers the tools and information they need to make a difference, to make quality care at the end of life a reality for all.

Professor Margaret O'Connor AM
President



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the disparate components – that will have any chance of delivering on the promise of quality care.

It is our challenge to work to ensure that the interests of palliative care are well positioned in the context of the many layers of activity that have the potential to make a sustained impact on the vision for quality care at the end of life.

In endeavouring to bring the vision to reality, PCA is focusing on several key issues this year.

Health reform

Palliative Care Australia anticipates that the first tranche of health reform initiatives will focus on developing primary care, with a key strategy based on enabling multidisciplinary teams.

Specialist palliative care has a strong record of experience and performance in service models that rely on multidisciplinary teams across care settings and we believe primary care could learn from this.

Community education

The health reform work highlights the importance of health literacy. From our perspective we appreciate the opportunity to foster improvement in literacy around dying, death and loss.

Palliative Care Australia's National Community Education Initiative will further develop and provide access to education materials, with a new set of resources for CALD populations to be launched during National Palliative Care week in May.

Workforce development

This year should see the work of the new National Health Workforce Commission gain traction.

Palliative Care Australia is developing a workforce position statement and currently working to define the national continuing professional education strategy anticipating an opportunity to integrate palliative care education and workforce development from a whole-of-health perspective.

Quality improvement

Participation in the quality improvement initiatives across the palliative care sector is high, as shown by the demand for participation in Palliative Care Australia's National Standards Assessment Program.

This year will see further work to foster recognition of the national standards within primary care and aged care and again in the context of whole-of-health quality standards.

Acute and subacute

In 2009, there was significant work in incorporating palliative care within the context of subacute services. This year will see the evolution of this with the important development of definitions and meaningful performance measures.

Palliative Care Australia recognises that better end-of-life planning for chronic illness can have a major impact on demand management for acute care services. We look forward to collaborating with the Australian Health and Hospitals Association to establish a think tank to explore issues of appropriate care.

Aged care

Clearly the intergenerational report highlights that aging needs better planning. Currently there are two reviews underway which have the potential to strengthen and enable access to specialist palliative care within residential aged care.

These are the [Aged Care Accreditation Standards](#) and the [Aged Care Funding instrument](#).

Disability reform

Palliative Care Australia is keen to explore how the burden of end of life for families and carers can be reduced through its inclusion in the current work on establishing a national disability fund (a proposal is underway for a taxpayer levied insurance pool).

National EOL Guidance Framework

The guidance framework seeks to articulate the issues and arrangements for a national system for the delivery of quality care at the end of life in Australia – establishing a framework that shows how the issues work together.

The guidance framework will be released for consultation in late February and we look forward to working together to shape this important document.

Clearly our aspirations are also that the revised National Palliative Care Strategy includes the issues outlined above and is well positioned to inform ongoing investment in the initiatives under the National Palliative Care Program.

Palliative Care Australia welcomes the full evaluation of the program so there is an opportunity to explore the best way forward to sustain the achievements to date and identify ways for alignment and efficiency.

Donna Daniell

Chief Executive Officer

Palliative Care Australia - update

Policy report

Federal Budget

The PCA submission stresses that the 2010-11 Budget provides the government with the opportunity to invest in cost-effective, efficient health system reform for the 100,000 Australians and their families and loved ones whose deaths each year could be categorised as 'expected' and thus require access to better planning and coordination to realise good quality care at the end of life.

The Palliative Care Australia recommendation to provide additional funds for focussed initiatives under the National Palliative Care Program will make this real, and thus make a positive contribution to both patient outcomes and cost-efficiency, consistent with the final NHHRC report which stresses that good quality care at the end of life must become integral to an effective health care system.

Pain summit

There will be a National Pain Summit in March 2010 to consider a draft National Pain Strategy.

The National Pain Summit initiative is led by the Australian and New Zealand College of Anaesthetists (ANZCA), the Faculty of Pain Medicine (FPM), the Australian Pain Society (APS) and consumer group Chronic Pain Australia (CPA).

Palliative Care Australia will be participating in this initiative and will seek to ensure that the relief of pain at the end of life is a key element of the strategy.

Pain position statement

Palliative Care Australia has established an external reference group to advise us on the development of the PCA position statement on preventable pain at the end of life.

NHMRC chronic illness submission

Palliative Care Australia provided consultation comments on the National Health and Medical Research Council (NHMRC) discussion paper *Ethical issues involved in transitions to palliation and end of life care for people with chronic conditions: A discussion paper for patients, carers, and health professionals*.

We agree that the paper's 3 identified ethical priorities – respect for the value of autonomy and dignity; the standards and goals of health care; and acting in the best interests of the individual – are important, and we are happy with this focus.

In particular, PCA supports the broad direction the NHMRC's Australian Health Ethics Committee has taken to articulate the ethical issues involved for people with chronic conditions who face transitions in care as the final phase of life is approaching, but death is not yet imminent – typically the last twelve months of life. We support the paper's

description of this as "the transition phase – a 'no surprises period'".

We noted that it is fundamental that good quality palliative and end-of-life care is a vital component of an effective health care system, and must be integrated into that health care system. The fact that this is often not the case poses overarching ethical issues in terms of the ability of people at the crucial end stages of their lives to access appropriate, quality care in the setting of their choice.

It is important that the fundamental rights of individuals to obtain access to quality care at the end of their lives is recognised and supported as an ethical right. All Australians ought to be able to expect to die with their preventable pain and other symptoms well managed, with the people they wish to be present, and whenever possible, in the place of their choice.

We stressed that access for everyone to a range of advance care planning options is vital to achieving the fundamental ethical issue of meeting the person's needs and upholding their care preferences.

It is unethical to have a system that works to assist people articulate their wishes, and thus raise expectations that these wishes will be honoured by the health system, but then fails to take steps to manage resources to enable these wishes to be realised.

Palliative Care Australia supports the concerns raised by the Australian and New Zealand Paediatric Palliative Care Reference Group, that the scope of the discussion paper is largely limited to adults, and does not attempt to deal with the complexity of ethical issues for children and their families.

We support the suggestion that the NHMRC could either acknowledge that the discussion paper deals with adult issues, or alternatively undertake additional work to fully explore these challenges.

Standards

NSAP roll-out update

Welcome to 2010 and a busy year ahead for the National Standards Assessment Program. Over the Christmas and new year period there has been a great deal of work and progress:

- services in Queensland have been working to submit their self-assessment reports and implement their action plans
- services in New South Wales and the national paediatric cohort are in the process of submitting their self-assessment reports
- services in Victoria, Tasmania and the Australian Capital Territory are beginning the self-assessment stage.

Have you been unable to commence NSAP?

If specialist palliative care services in your state have already begun NSAP but your service has not, you can still sign-up to undertake the NSAP self-assessment process.

Services in New South Wales, Queensland, Victoria, Tasmania and the Australian Capital Territory can sign up and register to commence NSAP at any time.

If you have not yet signed up, contact the NSAP team to discuss options for beginning NSAP at a time that suits your service.

Upcoming activities for 2010

In 2010, the NSAP peer review program will commence. Services that have completed the self-assessment have recently been invited to nominate to undergo a peer review as part of the National Standards Assessment Program.

The first NSAP peer reviewers have been appointed and peer review visits will be scheduled over the coming weeks.

Rollout for services in Western Australia and South Australia will commence in 2010. Currently, NSAP is negotiating with state associations and departments to schedule an appropriate start date.

Contact the NSAP team

nsap@palliativecare.org.au

02 6163 8419



Framework for workforce development

At its meeting in November 2009 on strategic directions, the PCA Council reaffirmed the importance of the development of a strong policy framework around workforce development based on the need to ensure services are staffed by competent and qualified health professionals, capable of meeting contemporary palliative and end-of-life care needs.

The critical importance of developing a more progressive framework for education and training of health professionals was highlighted in the report of the National Health and Hospitals Reform Commission and the Primary Health Care Strategy, with particular emphasis being on the need to:

- move towards a flexible, multi-disciplinary approach to how we educate and train health professionals
- incorporate an agreed competency-based framework as part of a broad teaching and learning curriculum for all health professionals
- build the capacity of the workforce through supporting continuous learning, research and innovation.

A key principle is the imperative of developing a workforce with skills and competencies that is able to support the emerging models of care that reflect both changing

population needs as well as evolving health service delivery structures, and that meet consumer quality and safety standards.

Palliative Care Australia is currently working on two key elements of an overarching workforce development strategy that will support these national reform directions:

- developing an position statement on *Workforce and the end of life*
- a framework for continuing professional education.

These pieces of work are expected to be completed in the first half of 2010.

National Palliative Care Week

Australians love to talk about all kinds of things. We've got opinions on just about everything. But there is one thing we don't like to talk about and that is the prospect of dying. When facing death, people can find themselves not knowing where to get answers to their questions. Palliative Care Australia's National Community Education Initiative for 2010 asks the question 'If only I knew... who wants to talk about dying?'

The National Community Education Initiative (NCEI) for 2010 will focus on helping Australians feel more comfortable with thinking about, talking about, and planning for the end of life. This will be achieved through the creation and dissemination of a range of new and existing resources developed for National Palliative Care Week.

Information will be available at www.palliativecare.org.au and in future editions of the PCA e-bulletin.

Conferences and events

Building our workforce

Third National Palliative Care Education Conference
11-12 February 2010

QUT, Brisbane

Speakers include: Patsy Yates, Peter Carver, Rod MacLeod, Jennifer Tieman, Ron Oliver

e: catriona.bisset@qut.edu.au

w: www.pcc4u.org

Who cares ...

exploring ways to care for ourselves with the same dedication and compassion that we invest in others
Goulburn Valley Hospice Care Service

13-14 May 2010

Shepparton, Victoria

Topics include: caring for the carer; professional supervision as a self-care tool for health care workers; life: a journey of love, laughter, trauma and loss; burnout and the loss of self care; power of hope; anger in palliative care; who is this person?

e: soniaa@hospice.shepparton.net.au

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News brief

Australia Day Honours

Palliative Care Australia would like to congratulate the recipients of 2010 Australia Day Honours.

Dr Peter Ravenscroft became a Member of the Order of Australia for service to the development of palliative care and medicine, particularly as an advocate for improved education of doctors and health workers in the therapeutics of palliative care.

Dr Will Cairns was awarded the Medal of the Order of Australia for service to palliative medicine, and to the community of the Townsville region.

Dr Fabio Brecciaroli was awarded the Medal of the Order of Australia for service to medicine, particularly through the provision of palliative care services, and to the community of the Sunshine Coast.

Palliative Care Clinical Services Capability Framework

Queensland Health's Planning and Coordination Branch has released for broad consultation the draft Palliative Care Clinical Services Capability Framework. Responses to the document are due by close of business on Wednesday 3 March.

To receive a copy of the draft document and accompanying attachments to facilitate the feedback process, please email cscf@health.qld.gov.au. For further information, contact John Haberecht on john_haberecht@health.qld.gov.au or 07 3234 0512.

Roger Woodruff life member of IAHP

Australian physician and author, Roger Woodruff, has been awarded the title of Lifetime Board Member of the International Association for Hospice and Palliative Care for his commitment, service, leadership, vision and contribution to the organisation since its inception. He is the author of *Palliative medicine* and has worked to establish palliative care services in Australia. For more information, see www.hospicecare.com.

ANF calls for calm

The Australian Nursing Federation and the Australian College of Nurse Practitioners have called for calm in the debate around the role of nurse practitioners in the health care system. For further information, see www.anf.org.au.

ABC 4 Corners – looking at palliative care

On Monday 8 February, ABC 4 Corners will broadcast a program on palliative care. The program will follow the stories of four people receiving palliative care and speak to members of the multidisciplinary team. For more information, see www.abc.net.au/4corners.

Sector news

Palliative Care Outcomes Collaboration (PCOC)

The work of PCOC continues with an increase in the number of services receiving a report each 6-month reporting period.

The next report for reporting period July to December 2009 is being prepared. Data to date has been received from 81 of the 94 services who have agreed to submit data. These reports will, for the first time, allow services to compare themselves against the benchmarks and set a target of 10 percent improvement in those measures they are not meeting. For information on these benchmarks and targets [click here](#).

Development of version 3 data has commenced with the aim for all data collected to be meaningful to the sector both for every day clinical decision making and also for service planning. Consultation will commence in March.

Consultation with the palliative care paediatric sector is anticipated to develop a suite of assessment tools that will provide the sector with an opportunity to participate in a national benchmarking process. If you have a strong interest in this area and wish to be part of this consultation process please email pcoc@uow.edu.au.

A DVD to assist staff working in palliative care to understand the value of embedding standardised assessment tools into clinical practice thereby promoting a common language across hospital and community palliative care settings is available on our website. To view this DVD and other educational material see <http://chsd.uow.edu.au>.



CareSearch

New resources

The CareSearch website has numerous pages and collections of information. When looking for clinical information there are six steps you can follow to find the most appropriate type and level of evidence. A new fact sheet called [Six steps to information and evidence](#) describes this approach to finding the evidence in CareSearch. This information sheet can be printed off from the promotional page within the website or can be ordered through natasha.schembri@flinders.edu.au.

The revised [Complementary Therapies](#) page within the Clinical Practice section has been released. It provides an overview of the evidence relating to complementary therapies in palliative care based upon systematic reviews of the area. It also provides information about the evidence for specific complementary therapies.

We would like to invite any researchers conducting palliative care research within Australia to include details of their in-progress work on the Research Studies Register. The register

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Information and resources

Education program in cancer care

The Education Program in Cancer Care (EPICC) is a new educational resource aimed at improving the quality of cancer control, particularly in rural and regional Australia. The resource is tailored to non-cancer specialist medical practitioners.

The resource provides cancer education in:

- general principles of cancer care
- side effects of cancer treatment and symptom management
- oncologic emergencies
- psychosocial care
- follow up.

The resource has been developed by a multidisciplinary group of medical practitioners led by the Medical Oncology Group of Australia and funded by the Australian Government.

For more information, see www.epicc.org.au.

Progress in palliative care: Science & the art of caring

Progress in Palliative Care has released a special issue *Home palliative care services* (Vol 18 No 1) that focuses on services designed to give specialist palliative care to patients and families in their own homes.

The issue contains contributions from writers around the world investigating funding streams, financial resources, and the provision of palliative care at home.

For more information, see www.maney.co.uk/journals/ppc.

Essential practices in palliative care

The International Association for Hospice and Palliative Care (IAHPC) is working on the identification and development of a list of essential practices in palliative care.

The association is seeking physicians, nurses, health clinicians and health aides from around the world to complete a questionnaire.

If you are interested in participating in this project, which will benefit the provision of care for patients with life-threatening conditions around the globe, email admin@iahpc.com stating the following:

- full name
- Profession
- place of work
- location (city, country).

For more information, see www.hospicecare.com.

Working carers gateway

The working carers gateway is a website providing resources for people who are juggling working and caring responsibilities.

The primary aim of the website is to provide information and support to low income and isolated carers in New South Wales.

See www.workingcarers.org.au.

Finding evidence, recognising hype

A new online program, *Finding evidence, recognising hype*, aims to address some of the major barriers to evidence-based prescribing.

The program has six interactive learning modules, each focusing on the key skills needed to make evidence-based decisions about assessing and prescribing new medicines.

The program is primarily aimed at general practitioners, but also available to pharmacists, nurse practitioners and other interested health professionals. The program has been approved for RACGP and ACCRM CPD points.

To find more information or to enrol, see www.nps.org.au/ferh.

Sector news

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provides a means of sharing information, developing linkages, preventing duplication and promoting awareness of current research activities. You can download a [registration form](#) from the website and email the completed form to caresearch@flinders.edu.au.

CareSearch is available at www.caresearch.com.au



Palliative Care Nurses Australia

Conference

Excellence and innovation is the theme for the 3rd biennial PCNA conference. For more information, see the conference website at www.pcna2010.org.au.



Have something for the e-bulletin?

Do you have an upcoming event, know of a new resource, have information of interest to the sector?

PCA invites contributions from readers seeking to promote their activities in the palliative care sector.

Contact editor@palliativecare.org.au or 02 6232 4433.

PCA member organisation updates

Palliative Care Australia's membership comprises the eight state and territory palliative care organisations and the Australian and New Zealand Society of Palliative Medicine. These organisations created and share the vision, mission and aims of Palliative Care Australia and operate through a federated governance structure.

Together, the Palliative Care Australia members network to foster, influence and promote local and national endeavours to realise the vision of quality care at the end of life for all.

Palliative Care Council of South Australia



PCCSA seeking executive officer

The Palliative Care Council of South Australia, the peak body for palliative care in South Australia and PCA member organisation, is seeking to appoint an executive officer.

The executive officer will work with council members on strategic and policy issues, and have responsibility for managing day-to-day operations, marketing and fundraising, and financial, staff and project management. The role also involves maintaining and enhancing relationships with a range of organisations including government agencies, interstate equivalents, the national peak body, local partners, community groups, and members.

Further information, including a job specification is available from Elizabeth Keam on 08 8291 4137 or 0412 036 977 or by emailing pallcare@pallcare.asn.au.

Applications close on Monday 15 February.

Palliative Care Victoria

PCV appoints new Chief Executive Officer

Odette Waanders has been appointed the new Chief Executive Officer of Palliative Care Victoria.

Odette has extensive experience in government and community organisations in Australia and New Zealand, covering a range of policy, advocacy, representation and service management roles.

She has had roles as National Director of Age Concern New Zealand, Policy Manager of Aged & community Services Australia, and most recently responsibility for risk, marketing, organisational development and fundraising at Catholic Homes.

For more information, see www.pallcarevic.asn.au

Palliative Care
V I C T O R I A

Conferences and events

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Medicines in peoples' lives

National Medicines Symposium 2010
National Prescribing Service
26-28 May 2010
Melbourne Convention and Exhibition Centre
w: www.nms2010.org.au

Searching for balance

Palliative care volunteers conference
Palliative Care Council of South Australia
20-21 May 2010
Adelaide
t: 08 8291 4137
w: www.pallcare.asn.au

Looking in, looking out

Palliative Care Queensland biennial conference
21-22 May 2010
Ipswich
t: 07 3633 0096
w: www.palliativecareqld.org.au

PCNA 3rd Biennial Conference

27-28 August 2010

Brisbane
w: www.pcna.org.au

ANZSPM conference

15-17 September 2010
Adelaide
w: www.anzspm.org.au

Innovations – updating professional practice in palliative care

Barwon Health Palliative Care Program
21-22 October 2010
Torquay, Victoria
Keynote speakers: Dr James Tulsy, Liese Groot-Alberts, Professor Michael Ashby
t: 03 5279 2800
e: heatherca@barwonhealth.org.au

Changing the national perspective on hospice palliative care

2010 Canadian Hospice Palliative Care Association Conference
28-31 October
Westin Ottawa – Ontario, Canada
Call for abstracts – close February 19
w: <http://conference.chpca.net>

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Contact editor@palliativecare.org.au or 02 6232 4433

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TAS	Tasmanian Association for Hospice and Palliative Care PO Box 834 Kingston TAS 7050	t: +61 3 6285 2514 f: +61 3 6239 6030 w: www.tas.palliativecare.org.au e: tahpc@intrepidonline.com.au
ACT	ACT Palliative Care Society PO Box 88 Civic Square ACT 2608	t: +61 2 6273 9606 f: +61 2 6273 9590 w: www.pallcareact.org.au e: office@pallcareact.org.au
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