



**Palliative
Care
Australia**

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**National Palliative Care Consensus Statement
and Call to Action**

National Palliative Care Consensus Statement

This National Consensus Statement is a blueprint for action spanning a range of social and health professional issues related to palliative care in Australia. It was developed following a stakeholder forum convened by Palliative Care Australia (PCA) held on 26 May 2011 at Parliament House, Canberra, and represents the forum's collective analysis, evaluation, and opinion. The National Consensus Statement complements the work undertaken by the Australian Government in developing the National Palliative Care Strategy 2010.

Why the need for a National Consensus Statement?

There is a need for clarity on four key issues identified as recurring themes in palliative care internationally and nationally:

- Where people prefer to die.
- The need for advance care planning.
- Access and equity in provision of palliative care services.
- Awareness about palliative care in the general community and in groups of healthcare professionals.

What is its Purpose?

To inform:

- Development of PCA submissions designed to influence the national health reform agenda.
- Development of national policy Position Statements by PCA on the four key issues listed above, including statements which address groups with special needs.
- Health care professionals and managers responsible for the development, implementation and review of palliative care services.
- Program planners and managers, and policy makers responsible for the development of strategic programs dealing with palliative care.

What is Palliative Care?

Palliative care is defined by the World Health Organization (WHO) as 'an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychological and spiritual.'

Who is Palliative Care Australia?

PCA is the peak national organisation representing the interests and aspirations of all who share the ideal of quality care for all at the end of life. PCA works in collaboration with its State and Territory member organisations and the Australian Government Department of Health and Ageing to implement the National Palliative Care Strategy 2010; to raise awareness of palliative and end of life care; improve community understanding about services and their availability; and encourage discussion to support improved knowledge networks.

A Call to Action

This National Consensus Statement is a call to action by PCA and its members to ensure that all Australians have access to quality palliative care and to ensure no Australian with a terminal illness will suffer from preventable discomfort and pain. Palliative care is a fundamental part of Australia's healthcare system and requires adequate resourcing for training of healthcare professionals, appropriate infrastructure and research.

The National Consensus Statement accords with the Australian Government's National Palliative Care Strategy 2010 in recognising a need for Commonwealth, State and Territories to work cooperatively and collaboratively in achieving common and agreed goals to achieve what Australians want - a system that supports all of us to live well at the end of life.

The following priorities have been identified as needing urgent action. Goal statements have been developed that will need refinement and translation into measurable indicators as part of implementing the National Consensus Statement.

1. All Australians must have reasonable access to resources to support them to die in the location of their choice.

Goal:

- That funding is in place by 2015 to ensure reasonable choices in where people want to die.

Most Australians would prefer to die in their own home. This means greater emphasis on end of life 'care in the home' however that is defined and understood by people.

2. A single common legislative requirement regarding advance care planning must be adopted throughout Australia

Goal:

- That national legislation is in place by 2015 supporting advance care planning and associated documentation without unnecessary jurisdictional variation.

Advance care planning supports patients in communicating their wishes about their end of life. An advance care plan should be linked to a personal electronic health record.

3. All Australians have a right to equitable access to quality palliative care when and where needed.

Goals:

- That palliative care services are networked through electronic and e-Health links by 2015.
- That access to specialist clinical services is available when needed in all hospitals, hospices, residential care services and homes.

The objective of 'dying well' is fundamental to palliative care and at the core of quality service provision. Issues to be addressed include access to: appropriate health care, information in a range of languages, specialist clinical care, and carers and volunteers.

4. All Australians must have access to education about dying and death

Goals:

- That information on dying, death and palliative care is available nationally in a range of languages and formats appropriate for Australia's multicultural society by 2015.
- That dying, death and the role of palliative care are integrated into the personal development syllabus of all schools and the development of the Australian Curriculum by 2015.

Talking about dying and death should be normalised and de-stigmatised. Every Australian should understand that dying is a normal part of the life continuum. Information provided should be available in plain English and translated into appropriate CALD and Indigenous languages.

5. Adequate and appropriate education in quality end of life care must be a standard provision for all health professionals.

Goals:

- That revised and updated palliative and end of life care training curriculum be in place in appropriate faculties of tertiary teaching institutions by 2015.
- That the Palliative Care Curriculum for Undergraduates (PCC4U) is in place in all appropriate faculties of tertiary teaching institutions by 2015.

Palliative care must be a core competency for all those involved in providing end of life care and a mandatory requirement in health care teaching institutions. Training in Indigenous and cultural safety must be included. Continuing professional education must be underpinned by a nationally consistent set of core competencies.

6. The Standards for Providing Quality Palliative Care for all Australians (the Standards) must be embedded in all appropriate care settings.

Goal:

- That the Standards are adapted in all services providing end of life care by 2015.
- That the National Standards Assessment Program (NSAP) is aligned with organisational accreditation cycles by 2015.

The Standards need to be universally adopted if they are to support effective, quality, palliative care. They have been designed to be used alongside other standards for health services goals.

7. Appropriate funding must be made available by all levels of government to palliative care services on an equitable population needs basis.

Goal:

- That all funding priorities identified in this Statement are addressed by the Australian Government by 2020, in collaboration with States and Territories (as outlined in the National Palliative Care Strategy 2010).

Areas of immediate concern include better resourcing of tertiary services; increased funding for medical palliative care training places; implementation of national legislation to support advance care planning; access to advance care planning and palliative care for people with dementia; a national 1800 Telephone Information and Support Service; and a national Palliative Care Volunteering Strategy.

8. Research in palliative care must be appropriately funded and targeted.

Goals:

- That palliative care and end of life issues are prominent on the national research agenda and funded for clinical, health systems and social research by 2015.
- Increased number and scope of postgraduate and post-doctoral scholarships in palliative care and end of life issues in place by 2015.
- Increased number of post clinical industry placements available by 2015.

Developing capacity within the palliative care research community must be supported. Funding and resources must be provided to ensure a balance between clinical, health systems and social research. Research must be translatable, inform policy and be communicated and disseminated to those who can make the most effective, timely use of it.