

Media Release



**Palliative
Care
Australia**

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Rudd Government called on to confront the reality of *end of life* in health care reform

Palliative Care Australia has welcomed announcements on increased hospital bed funding by Commonwealth, State and Territory Governments.

“However if reform is to be meaningful, tough questions about how Australia will deliver upon the needs for the increasing proportion of the population living with chronic illness, ageing and terminal illness must be answered,” said Donna Daniell, CEO of Palliative Care Australia (PCA).

“The Rudd Government has the opportunity to lead in confronting the reality for quality care at the end of life and to consider questions about what quality care really looks like for Australians facing the end of their lives,” Ms Daniell said.

The PCA Budget priorities submission, *Quality care at the end of life: Creating a new reality* presents a number of pressing priorities and challenges to the new Rudd Government. PCA outlines issues and opportunities for a better future for quality care at the end of life for services development, aged care integration, primary care linkages and consumer and community participation. It highlights the opportunities to address these major health and social needs.

Ms Daniell said that genuine health reform must commit to answering the tough questions such as:

- Are people in hospital beds due to need, or lack of viable choices?
- Are health interventions being delivered in the absence of informed consumer choice and decision making about how they wish to be cared for?
- How well skilled and educated is the workforce and our community to delivery quality care at the end of life?
- Is the health system designed to ensure timely access to the right expertise and evidence in quality care at the end of life?

Evidence confirms that while the majority of people die in hospital, between fifty and seventy percent of these people would prefer to die in their own home.”¹ The inability to access essential pain and symptom medicines in the home or in residential aged care facilities contributes to the chaos of casualty and inpatient hospital services. The expertise and evidence behind specialist palliative care services is not always available in time to meet the needs of patients, their families and carers,” Ms Daniell said.

PCA is calling on the Rudd Government to lead the collaboration of Australian governments towards creating a new reality for quality care at the end of life in Australia by ensuring that appropriate funding for Palliative Care services is given priority in the 2008-2013 Australian Health Care Agreements,” Ms Daniell said.

Palliative Care Australia (PCA) is the peak national organisation representing the interests and aspirations of all who share the ideal of quality care at the end of life for all.

¹ Grande GE, Addington-Hall JM and Todd CJ. (1998) ‘Place of death and access to home care services’ *Social Science Medicine*, 47 (5); 565-579.

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