

IMPROVING ACCESS TO PALLIATIVE CARE: November 2015

A significant consequence of Australia's ageing population will be the increased need for palliative care. Changing disease patterns at the end-of-life stage also mean that more people are expected to die from chronic progressive illnesses – and these people are most likely to use palliative care services. With their focus on curative treatment, acute hospitals are often not ideal places for providing appropriate end-of-life care that promotes comfort and quality of life.

Ensuring adequate palliative care services are available in aged care facilities and people's own homes will enable greater numbers of older Australians to die a good death, while better allocating health resources.

Currently, there is concern that the *Aged Care Funding Instrument (ACFI) User Guide* is silent on what a "palliative care program involving end of life care" comprises. There has been a recent Administrative Appeals Tribunal (AAT)¹ decision regarding the ACFI and palliative care where there was a difference of view between the level of care an aged care provider believed they should be delivering and the Department of Health. This was upheld by the AAT.

Following the AAT Decision, the Department of Health stated: *If your service is considering a claim under ACFI 12 item 14 – Palliative Care, please note the following issues from an AAT decision in September 2014:*

ACFI claims under this item must:

- *involve intensive clinical nursing, and/or complex pain management based on an appropriate directive; and*
- *refer to a palliative care program where the care recipient requires 'end-of-life (terminal) care.'*

The NHMRCs *Guidelines for a Palliative Approach in Residential Aged Care* state that end-of-life palliative care is: *'appropriate when the resident is in the final days or weeks of life and care decisions may need to be reviewed more frequently...'*²

The case could be made that palliative care may be necessary longer than the *'final days or weeks of life'* where outside of the aged care sector some programs provide funding for clients in the community with a terminal prognosis of 12 months or less.³

One initiative to improve end-of-life in residential aged care is the Decision Assist project, which aims to strengthen the interface between health and aged care by supporting health and aged care providers caring for older Australians in residential and community aged care who need palliative care.⁴ The project is managed by a consortium of national health and aged care organisations, including Aged and Community Services Australia (ACSA). Elements of the project include:

- A telephone advice service that links aged care providers with expert advice through local palliative care services.
- Training and up-skilling for aged care providers and general practitioners through specialised education.
- Strategies to increase linkages between aged care and palliative care services and the use of Advance Care Directives (ACD).
- Using technology to give general practitioners ready access to specialist medical advice.

Supporting and expanding initiatives such as this will enable more older people, including those with dementia,⁵ to die at home, improving comfort and reducing reliance on inappropriate and costly interventions at the end of life.

¹ www.austlii.edu.au/cgibin/sinodisp/au/cases/cth/AATA/2014/623.html?stem=0&synonyms=0&query=palliative%20care

² <https://www.nhmrc.gov.au/guidelines-publications/ac15>

³ www.hospiceathome.org.au/

⁴ www.caresearch.com.au/caresearch/tabid/2583/Default.aspx

⁵ Alzheimer's Australia and Palliative Care Australia, *Palliative Care and Dementia*:

https://fightdementia.org.au/sites/default/files/20130905_PCA_Alzheimerpositionstatementinfront.pdf

ACSAs POSITION

- Increased support is required for and expansion of initiatives that enable people to die in their own homes and residential aged care.
- That aged care residents requiring palliative care should be provided with block funding for palliative or end of life care where a pathway and care plan has been developed for the duration.
- That the Aged Care Funding Instrument (ACFI) User Guide be amended to better reflect what constitutes a palliative care program involving end-of-life care so that providers can appropriately claim when a care recipient is assessed as requiring such a program. Such a definition should be made in consultation with provider and consumer peak bodies before the User Guide is re-published.
- ACSA supports the use of Advance Care Directives and recommends that the key processes outlined in the Palliative Approach (PA) Toolkit⁶ model of care, including Advance Care Planning and case conferencing, be recognised as important aspects of a palliative care program and be appropriately funded through ACFI mechanisms.

⁶ Palliative Approach Toolkit: <http://www.caresearch.com.au/caresearch/tabid/3629/Default.aspx>
For review November 2016