

Research Centre for Palliative Care, Death & Dying

What needs to be done? Driving Change in Aged care to Support Palliative Care Needs

There is an increasing recognition that **Aged care** is a priority for palliative care and Palliative care is a priority for aged care. A national roundtable hosted by RePaDD provided a unique opportunity to bring people together from across different sectors and settings, and with different knowledge, experiences and views to identify critical needs around palliative care and end-of-life as the aged care sector reforms.

What did we learn?

Generous and open discussion provided key insights on the challenges for palliative care going forward as the 2024 Act, strengthened Quality Standards including Outcome 5.7 and Support at Home Program (End-of-Life pathway) come into play. Critical considerations as we transition to the new arrangements were identified.

- We need a sufficient and a sufficiently skilled aged care workforce. There are significant knowledge gaps across the sectors and health professionals and care providers around palliative care and end-of-life care
- Solid education for the sector on how to address and deliver care that meets Outcome 5.7 is essential
- Primary care, GPs and specialist palliative care services are not aware of many of the coming changes
- Unpaid carers are going to continue to shoulder the burden of dying at home. How do we support them?
- The digital and data transformation facing aged care is both necessary and challenging.

Participants also provided expert and practice advice on three specific issues shaping aged care.

Considering Allied Health: The role and contribution of allied health across ageing, deterioration and end-of-life is undervalued and underutilised. The work of allied health professionals was described as Invisible Work with Uncaptured Value. The need to capture the impacts of care provided by allied health through case studies and storytelling is needed along with research on care activities and outcome measurement.

Dying at home: Enabling older people to live and die at home where that is their wish is powerful. There is work to be done to optimise the potential of the end-of-Life pathway under the support at home program. Information gaps, system navigation, communication and coordination, and positive multidisciplinary collaboration must all be addressed. We also need to acknowledge the role of unpaid carers and communities in supporting care across the end-of-life journey at home. Workforce wellbeing must also be prioritised.

Supporting the interface between sectors: A person-centred approach is core to good care and should underpin care transitions and interfaces. Effective communication, agreed coordination processes, shared and timely information is needed between services and sectors. GPs and primary care are also a key partner at the interface between acute care and aged care. Building and supporting the skills, capacity and capability of aged care as a partner in quality palliative care is essential.

What needs to be done?

Participants had many positive ideas of what could be done by RePaDD and its related projects and studies to support:

- Communicate the availability of education and training opportunities that exist and can be freely accessed by aged care
- Build GP and primary care awareness of the changes and expectations of how they will contribute to success of the aged care initiatives
- Support death literacy awareness to build family and community understanding and reduce fear and apprehension
- Promote quality end-of-life care and palliative care as a valued asset in aged care
- Create a how-to-do-it package making sense of the aged care changes relating to palliative care
- Acknowledge grief and loss and support workforce well-being.

The workshop team is working with RePaDD researchers and associated project teams to identify relevant resources that can support the sector during the transition and beyond to support quality and personcentred care for older people at the end of life.

Making use of what is available!

We encourage the use of these openly accessible and free resources provided by the Australian Government:









Palliative Care Connect



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