

# Palliative care decision making groups

## Role statements

The attached role statements have been developed as part of stage one of the palliative care decision making groups project.

The role statements, outline the roles, responsibilities, relationships and structure of palliative care consortia, the palliative care advisory committee, statewide services and academic units (palliative care decision making groups). The role statements are intended to be clear, consistent and achieve effective implementation of the *Strengthening Palliative Care* policy.

It is important that all decision making groups are clear about their role in implementing the *Strengthening Palliative Care* policy. Palliative care decision making groups, and particularly palliative care consortia, are key drivers in implementing the policy. Regional plans developed by consortia should ensure the implementation of the policy principles in that region. The role of palliative care decision making groups will be especially important in the upcoming evaluation and refresh of the *Strengthening Palliative Care* policy.

Extensive consultation was undertaken with palliative care decision making groups in developing these role statements.

All Department of Human Services (DHS) funded palliative care decision making groups are required to incorporate these role statements into their work from 2008, noting that not all aspects of the role statements are mandatory. The role statements will be reviewed in August 2010.

For the purpose of developing and implementing these role statements, DHS funded palliative care decision making groups and services are defined as those which receive funding from the Cancer and Palliative Care Unit. The DHS funded decision making groups and services include all palliative care consortia and statewide palliative care services, most of the palliative care academic units, all community palliative care services, inpatient palliative care services and palliative care consultancy services. A list of DHS funded palliative care services is available at: [www.health.vic.gov.au/palliativecare/contacts.htm](http://www.health.vic.gov.au/palliativecare/contacts.htm).

Stage two of the project will commence in October 2008. The aim stage two is to develop strategies to achieve a consistently sound approach to decision making. In order to achieve this DHS will work with decision making groups to:

- assess current decision making skills and knowledge against current good practice models
- determine any gaps in decision making skills and knowledge, including succession planning, which need to be addressed
- make recommendations for addressing these gaps.

These role statements can also be downloaded from [www.health.vic.gov.au/palliativecare](http://www.health.vic.gov.au/palliativecare).