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| Victoria’s end of life and palliative care framework |
| FAQs |

### Who is this framework for?

Victoria’s end of life and palliative care framework is for everyone, and provides clear vision for end of life care in this state.

The framework has a particular focus on services and asks everyone working in health, human, social and community services to consider the role they play in delivering end of life care. The framework will guide palliative and end of life care service provision by:

* Providing clear expectations
* Guiding services and clinical practices
* Identifying action that will build a sustainable service system
* Ensuring safe and effective end of life care.

### Why do we need an end of life and palliative care framework?

Demand for end of life and palliative care in Victoria is increasing at an average annual rate of four per cent. This is due to a population that is growing and ageing. The prevalence of chronic disease is also increasing. These factors, along with a growing understanding of the benefits of palliative care means that the way end of life and palliative care is provided is unsustainable and will not be able to meet future demand, expectations or needs.

It is no longer possible to leave end of life care to palliative care providers alone. This framework redefines end of life and guides all health, human services and community providers to take responsibility for delivering high quality end of life care.

### What does the framework seek to achieve?

The framework has six goals to improve end of life of care in Victoria. These goals are:

* People experience optimal end of life care
* People's pain and symptoms are managed with quality interventions
* People express and record their values and preferences for end of life care
* Carers are supported
* People are cared for in their place of choice
* Where possible, people die in their place of choice

### What are the priorities of the framework?

The framework is focussed on developing and delivering actions in five priority areas. These are:

* Delivering person centred services
* Engaging communities and embracing diversity
* Coordinating and integrating services
* Making end of life and palliative care everyone's responsibility
* Strengthening specialist palliative care.

### How were the priorities developed?

To develop this framework, the Department of Health and Human Services consulted with communities, consumers, carers and providers about their views and ideas to make end of life and palliative care better.

We heard from almost 700 individuals, families, carers and service providers across the state via an online consultation platform, written submission or at a public forum.

Research and evidence about effectiveness and responsiveness was also reviewed. This evidence guides the actions under each of the priorities.

### How does this framework link with advance care planning and advance care directives?

A key focus of Victoria’s end of life and palliative care framework is to deliver person centred end of life care, which supports genuine choice for individuals, their families and carers.

Advanced care planning, and the ability to document preferences and values, is central to this idea. Talking about death can be confronting, but Victoria's Advance Care Planning Strategy provides a range of resources to help people to have the conversation. These resources and tools can be found at: [www.health.vic.gov.au/acp](http://www.health.vic.gov.au/acp).

The Government has moved to legally recognising advance care directives for current and future conditions and has realised a Position Paper that clearly sets out the legislative changes that will be made to ensure that advance care directives are legally recognised. The position paper can also be found at [www.health.vic.gov.au/acp](http://www.health.vic.gov.au/acp)

What terms does the framework use to describe end of life and palliative care and why?

This framework uses the term 'end of life care' to describe the care that is needed for people who are likely to die in the next 12 months. This is important because people may experience many changes and rapid decline. A focus on the last 12 months allows time for people to plan, engage in purposeful conversations and talk to family, friends and clinicians about what matters most to them.  
  
Palliative care is used in the framework to describe an approach to care that aims to improve the quality of life for people and their families regardless how close they are to death. Palliative care is based on need and provides care and treatment for symptoms, including pain, and provides practical support for people and their families. Using a palliative care approach at the same time as providing other treatments and care can significantly improve quality of life. There is an expectation that clinicians should have at least basic palliative care to support their own patients along their illness trajectory.   
  
Specialist palliative care clinicians and the designated specialist palliative care sector provides care for those with the most complex care needs. Often the most valuable role palliative care specialists can play is supporting other healthcare teams to provide end of life care to their patients.  
  
How will the work of the framework be planned?Each year an annual plan will be developed that is guided by the five priority areas and their aims. In 2016-17 we will focus on reforms that will become the foundations for future plans. These reforms will include:

* Introducing statutory recognition for advance care directives
* Continuing to support advance care planning in our services
* Testing new models of care that promote service coordination and integration
* Developing new models of home based palliative care
* Ensuring consistent care by standardising community palliative care service delivery
* Supporting volunteers
* Promoting equitable access for diverse communities and groups

How will the department work with services to implement the framework?The department will work with a range of services including health services, specialist palliative care services, aged care and disability services and primary health care, including Primary Health Networks across rural and metropolitan Victoria. The aim is to provide the right care at the right time and in the right place by:

* Focusing on people and outcomes
* Enabling local solutions
* Equipping the service system to deliver early and more connected support
* Ensuring safety, quality and innovation
* Using data and evidence for service development and monitoring

Will the Palliative Care Clinical Network have a role in the framework?Yes, the Palliative Care Clinical Network and the Regional Palliative Care Consortia will have roles to play in implementing the framework actions.

The Network will focus on providing advice and expertise in developing key clinical resources and models. The Consortia will have a central role to play in the coordination of services. This will be an important role, particularly in the rural areas.  
  
How will we know if things are getting better?In 2016-17 we will work on developing a set of performance measures to monitor progress towards achieving the framework goals. Some of the measures we need to be able to monitor this are already in place.

For other goals we will need to develop new measures, with a focus on making sure we measure the things that matter to clients, carers and the community. We will develop a client and carer experience survey and look at ways we can monitor important outcomes, such as symptom and pain management, across palliative care services to make sure we are performing as well as we can and identify where we can do better.