

Revisit review of South Australia's *Palliative Care Services Plan 2009-16*

Executive briefing – October 2018

Health Performance Council



Government
of South Australia

Health Performance Council

Acknowledgment

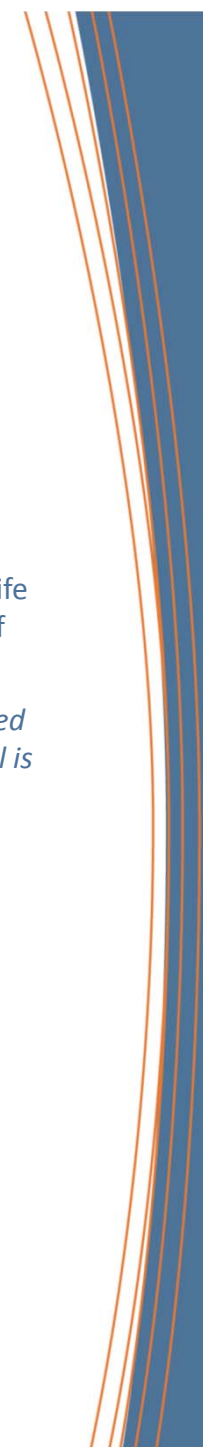
The Health Performance Council acknowledges the Aboriginal peoples of South Australia. Aboriginal peoples in their diversity have demonstrated resilience and continue to make significant contributions to South Australia, despite the ongoing effects of colonisation and dispossession.

The Council acknowledges the spiritual relationship Aboriginal peoples of South Australia have with their respective countries, and respects their cultural and heritage beliefs which are still important to them today.

Definition of palliative care

Unless otherwise specified, this executive briefing and our revisit review uses the terms ‘palliative care’ and ‘end-of-life care’ interchangeably, as does Palliative Care Australia – the national peak body for palliative care – in its definition of end-of-life care:

Palliative care is person-centred and family-centred care provided for a person with an active, progressive, advanced disease, who has little or no prospect of cure and who is expected to die, and for whom the primary treatment goal is to optimise the quality of life.



EXECUTIVE SUMMARY

Achievement of SA Health's *Palliative care services plan 2009-16* (the plan) to expand and reshape end-of-life services in South Australia has been uneven.

FINDINGS

- **Key objectives** of the SA Health plan **achieved in part**.
- **Lack of progress** due to contested resources, service variability between LHNs, and absence of central coordination and governance.
- **Confusion** about the plan's strategic intent, desired outcomes and explicit priorities.
- **Despite shortfalls** in implementing the plan, **excellence in end-of-life care is found** within LHNs & individual work units, and among highly-regarded, compassionate staff.
- Delivering **future improvements will depend on consistent quality of care and efficiencies** between all levels of government, the private sector and non-government organisations.

IMPACTS

- **Consumers:** Cannot be sure they are more likely now than before the plan was introduced to receive the palliative care they want, where they want it.
- **SA Health:** Pressure on staff, financial and other resources in many parts of the system.

Lack of action has resulted in: less community-based care than was promised, high levels of hospitalisation and acute care treatments, pressure on carers, disruption, delays, and inconsistent quality of care.

TEN KEY RECOMMENDATIONS

- Finalisation of our revisit review coincides with SA Health's new *End of Life Care Strategy*.
- Our recommendations are useful in ensuring SA Health's strategy leads to initiatives with measurable, evidence-based health and wellbeing outcomes.

We recommend the Minister for Health and Wellbeing, through SA Health's *End of Life Care Strategy* and other policies and activity:

1. Develop a strategic and **statewide model of care**
2. Embed **person-centred care** into the model of care
3. Ensure **equal access** to care for all South Australians
4. Improve **health and wellbeing outcomes**
5. Expand **care in the community**
6. Support **paediatric palliative care**
7. Ensure **high-quality and consistent care**
8. Develop a **workforce** that is expert, responsive and culturally mature
9. Establish **effective governance and accountability** mechanisms
10. Develop and implement **policy that is evidence-based**.

Recommendations developed noting the South Australian Government's investment in increased palliative care support outlined in the 2018-19 Budget, and the Commonwealth Government's announcement of a Royal Commission into aged care.

FINDINGS

- In many cases, the plan's objectives and **goals were implied** rather than explicit.
- **Absence of strategic structure** meant deliverables not systematically identified and prioritisation of outcomes unclear.
- Baseline measures, measurable performance indicators and **targets largely absent**.
- **No accountability framework** provided.
- Following our detailed examination of the plan, **four key objectives** were identified:
 1. Improved health and wellbeing
 2. Person-centred care
 3. More care in the community
 4. Consistent service delivery.
- We identified **eight goals** that assist in delivering the plan's key objectives:
 1. Establish a statewide, integrated service model
 2. Improve care in the community and at home
 3. Improve care in the hospital setting
 4. Build the capacity of the specialist and generalist workforce
 5. Ensure access and equity in service delivery
 6. Increase consumer knowledge and respect consumer choice
 7. Deliver high-level and consistent quality and efficiency
 8. Enhance the state's research, policy and planning endeavours.
- Within each goal, we found **supporting initiatives**, totalling 32 across all goals.

ACHIEVEMENTS AND OUTCOMES

Status of the plan's 32 initiatives									
Achieved	3	Partially achieved	10	Discontinued	2	Not achieved	6	Data not sourced	11

- **Initiatives achieved** in full or in part under the plan include:
 - Formation of three integrated regional services
 - Reforms in workforce structures and roles
 - Initiatives to increase and recognise consumer knowledge and choice
 - Expansion of community-based care.
- **Less successful** initiatives include:
 - Proposals to establish strategic and statewide systems of quality and efficiency
 - Data collection, research and evaluation
 - Policy and planning.
- Two **initiatives started but subsequently disbanded** (establishment of a Palliative Care Clinical Network and a research collaborative).
- Of major concern to us is the **difficulty in sourcing data to draw reliable conclusions** on over one-third of identified initiatives, as well as five additional identified proposals.

Paucity of data hampers our independent external review process, raises issues about the policy and planning mechanisms within SA Health on strategic end-of-life care services, and prevents the establishment of benchmarks as a basis of future measurement.

CLOSING STATEMENTS

- South Australians ask for high-quality, reliable and accessible end-of-life care that is available to them, and respects their choices, no matter who they are and where they live.
- However, the existing system does not provide that care, or access to it.
- SA Health is developing and implementing its new *End of Life Care Strategy* and the activities to achieve its goals.
- Initiatives for increased palliative care support announced in the 2018-19 South Australian Budget include funding for the establishment of a statewide clinical network to deliver a new palliative care services plan.
- We recommend that any end-of-life care strategy and palliative care services plan ensure every South Australian – no matter who they are, where they live, or what illness they have – has access to the highest quality care to allow them to live and die well, and that this should be the foundation of an equitable system of care.
- Strategic and statewide models of care should identify clear and measurable health, wellbeing and psychosocial outcomes for consumers, their families and carers.

CONTEXT

- This review is a five-year revisit and update of our 2013 midpoint examination (*Improving End of Life Care for South Australians*) of SA Health's *Palliative Care Services Plan 2009-16*.
- We are committed under the *Health Care Act 2008* to provide independent and evidence-based appraisals of the performance of South Australian health systems.
- This includes returning to our previous reviews to determine what initiatives have been implemented since then and if they worked.
- There is a growing demand and increased public attention on the quality and availability of end-of-life care in South Australia.
- Since the plan's establishment, end-of-life care is an increasingly important item on the public agenda; and the subject of numerous investigations, reports, strategies and guidelines.
- We consider the provision of quality end-of-life care to be an important measure of a humane 21st-century society and an essential element of this state's healthcare system.
- This revisit review is a priority topic of our 2015–2018 review program.
- All of our reports are available for download on our website: hpcsa.com.au



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