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Indicator Review
National Health Performance Authority
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To whom it may concern

## **Review of Performance and Accountability Framework indicators**

Thank you for the opportunity to contribute to the Review of Performance and Accountability Framework indicators.

Providing high quality palliative and end of life care is an important issue, increasing in concern due to the ageing population and the high burden of complex, chronic diseases.

At present, there is a gap in the indicators, in that none of them measure the quality of provision of end of life care. While it is difficult to develop indicators for high quality palliative and end of life care, a leading indicator is the proportion of people with a chronic, complex disease or a life-limiting disease that have an advance care plan in place. Advance care plans are one of a range of strategies that can support delivery of care aligning with the patient's wishes and value. Palliative Care Australia (PCA) suggests the inclusion of one or more of the following indicators:

- Primary Health Care
  - Proportion of patients with a chronic disease or over 75 years of age that have an advance care plan documented in the patient files (effectiveness, quality, capability)
- Hospital/LHN indicators
  - Where the cause of death is a chronic disease, the proportion of people who received palliative care during their last admission (equity, access)
  - Time from date ready for palliative care to start to commencement of palliative care episode (equity, access)
  - Proportion of deaths in which approaching the end of life was documented in the patient clinical record at least 72 hours prior to death (or on admission where this was less than 72 hours prior to death) (effectiveness, quality, capability)
  - Proportion of patients with a complex chronic disease that have an advance care plan documented in the patient files (effectiveness, quality, capability)

In addition, PCA supports the development of patient reported outcomes across a range of areas of service provision, including in palliative and end of life care. These could be performed by a defined sample audit and be provided annually. Should the National Health and Performance Authority be willing to consider inclusion of patient reported outcomes in future iterations of the Performance and Accountability Framework indicators, we would be willing to provide suggestions in the area of palliative and end of life care.

If you would like to discuss this submission further, please do not hesitate to contact Ms Philippa Kirkpatrick, National Policy Manager on 02 6232 4433 or philippa@palliativecare.org.au.

Yours sincerely

Liz Callaghan

**Chief Executive Officer**