







Media Release

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Economic Research Proves Palliative Care is Value for Money

New research analysis by the National Centre for Social and Economic Modelling (NATSEM) at the University of Canberra clearly shows palliative care improves the quality of life for Australians while also reducing health care costs across Australia's health system.

Palliative Care Australia (PCA) CEO Liz Callaghan says seven research notes on palliative care's impact on hospitals, home based care, aged care facilities as well as the health cost savings for people with chronic conditions and people who access palliative care early after diagnosis of a serious illness shows that public money invested in palliative care is money well spent.

"Research consistently shows that people who receive palliative care compared with those receiving usual care, have less hospitalisations, shorter lengths of hospital stay, reduced use of Intensive Care Units and fewer visits to Emergency Departments.

"The provision of palliative care in hospitals decreases costs by better matching treatments to patients' and families' preferences and goals of care. This not only improves the quality of end-of-life care but also the quality of dying," Ms Callaghan said.

The cost-savings also extend to home-based palliative care, where 70% of Australians would prefer to die.

"We know that most people would prefer to die at home surrounded by family and friends. When palliative care is provided at home, palliative care patients are almost twice as likely to remain in the community until their death," Ms Callaghan said.

The analysis showed however that the financial costs of caregiving for family members at the end of life are significant, and that a person's desire to die at home often came at a large financial cost to the family. "Reducing hospital use at the end of life can have financial implications for families but the extent of that cost-shifting remains unclear" Ms Callaghan said.

NATSEM's Convenor and Deputy Director of the Institute for Governance and Policy Analysis Professor Laurie Brown says that despite its cost-effectiveness and the recommendation that palliative care is offered early in diagnosis to people, palliative care services are still not used to their full potential in Australia nor funded appropriately to achieve this.

"The strong association between early palliative care and decreased costs suggests that palliative care teams are effective in modifying the care and health trajectories of patients and improving quality outcomes".

"Many Australians reaching the end of life do not receive palliative care, even though when asked, they have clear preferences for the type of care they would like. In 2014-15, of the 76,856 people who died as a patient admitted to hospital, less than half had received palliative care during their final hospitalisation. Also only 4% of residents in aged care had a formal appraisal indicating that they required palliative care and only 1 in 1,000 patient encounters with GPs was palliative care-related," Professor Brown said.

Media contact: Grace Keyworth – 0422 040 576 palliativecare.org.au







PCA CEO Liz Callaghan says the analysis makes a clear case for state and territory governments further investing in palliative care services.

"Palliative care improves symptom management, pain relief and quality of life but people with chronic health conditions such as heart failure and airways disease are still not accessing this support" Ms Callaghan said.

"This research makes a clear case for further investment in palliative care services to improve the quality of life for Australians while at the same time reducing pressure on the health budget. Investment in palliative care should be a priority for all states and territories," Ms Callaghan said.

Find the full research notes here

Media enquiries:

Palliative Care Australia – Grace Keyworth 0422 040 576

Professor Laurie Brown NATSEM, Institute for Governance and Policy Analysis, University of Canberra Ph: 02 6201 2770

Mob: 0407 008 361

Laurie.Brown@canberra.edu.au

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