

Senate Inquiry into Palliative Care in Australia

Introduction

Cabrini Health is a large Catholic private sector health service providing acute, sub-acute, and aged care services both within the hospital sector and the community, to the people of Melbourne. Within its services portfolio, Cabrini is proud to provide a significant specialist palliative care service through a 22 bed specialist inpatient unit at Cabrini Prahran, a Community Home Care Program to some 160 patients and families, and a Consultative service to improve symptom management and end of life care in our acute hospitals at Malvern and Brighton.

We have participated in the Catholic Health Australia submission to this very welcome inquiry but wish to supplement with this commentary to raise the issue of health fund interest and participation in palliative care. Cabrini Health is the only specialist PC service in Australia delivering care to patients and families who have private health insurance. Health funds are very wary of entering into the private palliative care arena, and the effects of this are resulting in patients needing palliative care being transferred into the public sector at end of life, or the needs of patients and families not being met at this time.

There is also building evidence of the role of specialist palliative care not only contributing to better clinical and psychosocial outcomes for patients and families during the course of illness, death and then into bereavement care, but also significantly reducing costs which we know can spiral in the last months of life.

Please find commentary to the following criterion:

The funding arrangements for PC provision - including the manner in which subacute funding is provided and spent

There are limited private specialist palliative care services across Australia. This gap in services means that the privately insured patient who receives active treatment for their cancer or other chronic illness from a private specialist and private hospital, is not able to readily access palliative care through the private sector. It is reasonable to assume that privately insured patients generally have an expectation that their private insurance will cover them through all aspects of their illness journey, and not end when curative treatment is no longer appropriate. Some privately insured patients may be able to access private inpatient palliative care, but are missing out on opportunities for comprehensive palliative care in the home because the current funding arrangements favour in-hospital care.

Since April 2007, private health funds have been able to offer broader health insurance. This means funds are able to pay benefits for a wider range of services, effectively removing the boundary between 'hospital' and 'ancillary' insurance. The challenge for the health funds, is being able to fund out-of-hospital care, based on a clear understanding of how people who currently receive their care needs in an inpatient setting can be cared for at home in a 'hospital substitution' model rather than an outpatient/community visit model. Clear criteria need to be developed that define the following palliative care service streams:

1. Specialist Inpatient Palliative Care

- People who receive and will continue to need inpatient palliative care

2. Specialist Community Based Palliative Care

- People who can and will continue to be able to be managed in an out-of-hospital setting

3. Specialist Palliative Care (inpatient substitution)

- People who are currently being managed in an inpatient setting but could be cared for at home if a safe and effective service model could be developed and subsequent funding mechanism could be arranged

In order to ensure transparency, the criteria developed need to clearly demonstrate that the third stream of care is clearly an exercise in hospital substitution and that the risks are minimised, of just adding additional entitlements for out-of-hospital palliative care that can already be and is being delivered outside hospitals, to the growing payments for palliative care by the private health insurance funds.

Recommendation

That the Senate Inquiry examines the role of the private health funds sector in the provision of comprehensive palliative care to patients and families in Australia who are privately insured.

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