LIST OF RECOMMENDATIONS

Recommendation 1

2.39 The committee recommends that the Australian Commission on Safety and Quality in Healthcare (ACSQH) consider the proposal to implement a national standard linked to accreditation, noting that reforms should not result in increased regulatory burden or complexity.

Recommendation 2

3.80 The committee recommends that the Australian government considers extracting palliative care from the sub-acute care category and create a new funding category of 'palliative care'.

3.81 The committee recommends that in determining the appropriate costing for palliative care services the costs of providing care in the community sector also be calculated and allocations made to support the provision of palliative care services by this sector. The committee acknowledges that any allocations of funds to community sector service providers would require rigorous and transparent governance arrangements to be established.

Recommendation 3

3.82 The committee recommends that the creation of a new palliative care funding category should result in the establishment of a palliative care advisory committee by the Independent Hospital Pricing Authority to advise the Authority on appropriate costing for palliative care services consistent with the activity-based funding approach.

Recommendation 4

3.83 The committee recommends that the development and introduction of consistent national data collection specifically provide for the recording and reporting of palliative care data.

Recommendation 5

5.56 The committee recommends that the government, with the assistance of the Council of Australian Governments, take steps to improve the provision and timeliness of information to palliative care patients, their carers and families. Processes should be put in place to ensure that patients, their carers and families are provided with the right amount of information, in the right format, at the right time and that a 'show bag' approach be avoided.

5.57 The committee recommends that this process begin with a review of the CareSearch website.
Recommendation 6
5.58 The committee recommends that all governments work together to fund minimum levels of bereavement service provision for all families and carers of people with a terminal illness.

Recommendation 7
5.68 The committee recommends that Government give careful consideration to the special circumstances of families caring for terminally ill children when considering future changes to the eligibility criteria for the Carer Allowance and/or Child Care Rebate.

Recommendation 8
5.75 The committee recommends that processes be put in place by the Independent Hospital Pricing Authority to ensure that the calculation of activity based funding for the provision of palliative care takes into account its complexities, including the contribution of carers, and the desirability of its provision across a range of different settings.

Recommendation 9
6.66 The committee recommends that medical workforce training include being educated about existing pathways to specialist palliative care, ensuring that this care is applied effectively to best meet patient need.

Recommendation 10
6.67 The committee recommends that the Australian government create an ongoing and dedicated national scholarship fund for postgraduate studies in palliative care nursing.

Recommendation 11
7.32 The committee recommends that service delivery models include a greater emphasis on community-based care, 'dying in place', and a reduction in unnecessary hospital admissions.

Recommendation 12
8.33 The committee recommends that the Council of Australian Governments consider developing and implementing a case management model.
Recommendation 13

8.34 The committee recommends that the Council of Australian Governments develop and implement a uniform national palliative care pathway that clarifies when general palliative care moves into specialist palliative care, and maps the diagnosis and referral process to ensure that a palliative patient's journey involves coordinated access to all necessary services.

Recommendation 14

8.35 The committee recommends that the Council of Australian Governments review the Medicare Locals structure to consider how the provision of palliative care services, both general and specialist, is integrated into primary health care at the local level.

Recommendation 15

9.20 The committee recommends that the Commonwealth government increase its support for paediatric palliative care research.

Recommendation 16

9.46 The committee recommends that Cancer Australia, in reviewing the distribution of research funding, discuss with funding bodies the capacity to ensure that appropriate levels of funding are being provided to palliative care research.

Recommendation 17

9.48 The committee recommends that governments encourage care providers to provide data to the Palliative Care Outcomes Collaboration and consider making the reporting of this data a condition of public funding.

Recommendation 18

9.50 The committee recommends that the Australian government develop a nationally funded framework for palliative care research, as outlined by the Centre for Palliative Care.

Recommendation 19

9.58 The committee recommends that the NHMRC publicly report the results of its work on alternative therapy claims in relation to palliative care.
Recommendation 20

10.35 The committee recommends that the Council of Australian Governments examine the viability of introducing a national equipment library for palliative care patient needs, examining whether such an approach would allow more efficient and timely provision of available equipment and funds.

Recommendation 21

10.36 To prevent the mis-prescribing of equipment, the committee recommends that the Australian government investigate current regulation and consider improving regulation of both private and public palliative care equipment providers.

Recommendation 22

10.37 The committee recommends that the Australian government closely monitor implementation of the recent changes to the Home and Community Care program to ensure that the program is meeting the needs of those over 65, and that palliative care recipients who do not fall into the aged care bracket are receiving adequate support.

Recommendation 23

10.38 The committee recommends that the Australian government consider changing the eligibility to Home and Community Care (HACC) to include palliative care patients or carers of such patients, regardless of their age. The committee notes that as the HACC program is linked to funding and funding agreements, the Australian government consider this recommendation in the context of considering changes to the funding model for palliative care.

Recommendation 24

10.39 The committee recommends that the Australian government analyse and identify potential gaps in the provision of palliative care and palliative care funding for people with disabilities, especially in supported accommodation.

Recommendation 25

11.35 The committee endorses the recommendations of Palliative Care Australia that, in relation to Commonwealth funded programs, it support:

- appropriate training and education about cultural perspectives relating to palliative and end of life care issues, in core curricula for all health workers and health practitioners providing services to Indigenous people; and
• inclusion of palliative and end of life related topics in the core curricula for Aboriginal health worker Certificate III and IV continuation of PEPA to build on or develop cultural appropriate education for Indigenous health workers.

Recommendation 26

11.36 The committee recommends that the Australian government increase funding to palliative care programs for Indigenous communities in rural and remote areas, with a particular emphasis on return to country.

Recommendation 27

11.42 The committee recommends that the Australian government give increased attention to the need for improved research, education and services to support the perinatal and neonatal palliative care needs of health professionals, pregnant women and their families and newborn infants.

Recommendation 28

11.66 The committee recommends that, within twelve months, the Australian government review the implementation and evaluation of the recommendations of the Paediatric Palliative Care Service Model Review, and publish the findings of that process.

Recommendation 29

11.67 The committee recommends that there be appropriate formal recognition of the Australian and New Zealand Paediatric Palliative Care Reference Group, and that the Australian government work with the organisation on the development of a paediatric addendum to the National Framework for Advance Care Directives 2011.

Recommendation 30

11.68 The committee recommends that the Commonwealth, state and territory governments consult with palliative care organisations, and existing children's palliative care support services Bear Cottage and Very Special Kids, about the feasibility of, and funding required for, establishing similar facilities in other jurisdictions.

Recommendation 31

12.40 The committee recommends that the federal government initiate a full review of the medications available on the pharmaceutical benefits scheme for palliative care, particularly schedule 8 drugs.
Recommendation 32
12.41 The committee recommends that through the Council of Australian Governments the federal government expedite the introduction of uniform regulations for the supply of schedule 8 drugs.

Recommendation 33
12.42 The committee recommends that the federal government review the role of nurse practitioners and registered allied health professionals in prescribing palliative care medications to remove barriers to accessing such medications in settings of care where these professionals have a central role in care.

Recommendation 34
13.60 The committee recommends that in the next review of aged care accreditations standards, the Australian government consider requiring some form of advanced care training as a component of the standards.

Recommendation 35
13.61 The committee recommends the Australian government increase the level of funding for the Respecting Patient Choices program, to support development of training providers in several jurisdictions, significantly expanding the reach of the program in the aged care sector.

Recommendation 36
13.62 The committee recommends that national model legislation for advanced care planning be developed, and that all governments pursue harmonisation of legislation as a high priority.

Recommendation 37
13.63 The committee recommends that the Australian government fund a national public awareness campaign around advance care planning and directives, starting immediately, and expanding once a process of national harmonisation of advance care planning regulation has been undertaken.

Recommendation 38
13.71 The committee recommends that the Australian government ensure that personally controlled electronic health records have the capacity to include palliative care information, including advanced care plans.