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27 September 2017

Dear Christina,

## **Submission on Draft National Palliative Care Strategy 2017**

Thank you for the opportunity to provide feedback on the Draft National Palliative Care Strategy 2017 (Strategy) on behalf of the Australian and New Zealand Society of Palliative Medicine (ANZSPM).

ANZSPM is a specialty medical society that facilitates professional development for its members and promotes the practice of palliative medicine, in order to improve the quality of care for people with life threatening illness. Our members are medical practitioners who provide care for people with a life-threatening illness and include palliative medicine specialists, palliative medicine training registrars and other doctors such as general practitioners, oncologists, haematologists, intensivists, psychiatrists and geriatricians.

Several of the ANZSPM Council members have already provided verbal feedback and contributed to the consultation process in more detail. The purpose of our written comments is to provide our key points:

1. We support the Strategy recognising that palliative care offers care for people throughout an illness trajectory, not just end of life (introductory comments).
2. ANZSPM is broadly supportive of the six guiding principles on which the strategic focus areas are based.
3. Palliative Medicine Specialists will be essential to provide leadership in achieving the strategic directions of the Strategy to ensure goals are met, and are key stakeholders in

state and national governance structures which will inform how this plan is operationalised and evaluated for success (Strategic Focus 3 and Goal 5).

4. We support the Strategy clearly articulating the need for compulsory palliative care education, as this is critical in undergraduate and postgraduate medical curricula and vocational training (Goal 2 priority area). ANZSPM can play a critical role in contributing to advocacy and discussion with the Royal Australasian College of Physicians and relevant universities for action in these areas, and provide content expertise.
5. Communication skills training and demonstration of ongoing professional development for all medical practitioners in this area should be a specific goal, as it is essential to the delivery of excellent palliative care and is a major gap currently (Goal 2 priority area).
6. The Strategy should address the need for enhanced Palliative Medicine Specialist workforce which will be necessary to deliver the Strategy over 20 years (Goal 6). The Palliative Medicine workforce requirements in regional, rural and remote areas also need to be specifically addressed (Goal 3). It is important to realise this workforce will need to be configured to address increasing multi-morbidity and burden of non-malignant disease, and to be able to address the needs of patients in hospital, community, ambulatory care settings and residential aged care. Specific priorities that address how this will be achieved include additional training positions, novel training opportunities (such as offered by the Specialist Training Program scheme), improved ability to train specialists in rural and regional areas, investment in telehealth approaches, and reduced barriers to allow palliative medicine specialists to develop roles which integrate between State and Commonwealth funded services/positions.
7. Dual trained Palliative Medicine Specialists, who have another specialist qualification (such as geriatrics, respiratory medicine, general medicine) is an emerging strength and will play critical roles in contributing to achieving the goals of the strategy (Goal 3).
8. The Strategy is an ambitious document aiming to address a 20-year timeframe, but lacks structure that plans for short-, medium- and long-term goals. More detail is required on how innovative strategies to address emerging population needs will be developed, evaluated and put into practice. The demographics, size and clinical needs of the population will considerably change in that time frame, as will the health care landscape.
9. A national palliative care strategy to 2023 also needs to have specific goals to address data systems to ensure access to high quality data to identify gaps, success and also evaluate success of dissemination. There is a need for greater focus on the design and collection of meaningful data to provide a more complete picture of the provision of

palliative care across jurisdictions, and greater consistency of service across the country (Goal 5).

As the peak body representing Palliative Medicine Specialists across Australia (and New Zealand), ANZSPM would be keen to provide ongoing feedback as the draft is revised and with respect to development of the Implementation Plan.

Please contact Simone Carton (Chief Executive Officer) on ----- or [-----@anzspm.org.au](mailto:-----@anzspm.org.au) if you require further information on our feedback to date, or if further input is required.

Yours faithfully,

Prof Meera Agar  
President

Simone Carton  
Chief Executive Officer