



palliAGED

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OPCC, 2025

Purpose

- How does palliAGED help aged care homes address the Strengthened Quality Standards and the 2024 Aged Care Act; and,
- How do we intersect & interact to provide a comprehensive support system.

Comprehensive palliative care needs to include Outcome 5.7 but is enacted within the whole set of standards.

Acknowledges the care context and the care team(s)

Starts with the person

Considers care over time

Recognises bereavement, grief and loss

Looks at interface between health, aged care, primary care and community sectors



palliAGED and aged care

At our heart is evidence.

palliAGED provides the aged care sector with access to active knowledge. We find the evidence on what matters and what works. We assess, synthesise and review with the sector for relevance and utility.

Evidence is organised for use by aged care staff and by services to build workforce capability and support systems and processes of care.



The Evidence Foundation

The Older Person

Culturally safe care
Intimacy and sexual expression
Dignity and respect
Person-centred care

Communication

Advance Care Planning
Talking about end of life
Care coordination
Voluntary Assisted Dying (VAD)

Care Needs

Grief and bereavement
Reducing care burden
Needs assessment
Spiritual Care
Nutritional Care
Symptom Management
Psychosocial care
Syringe Drivers
Recognising
Deterioration
Terminal Care

Complex Needs

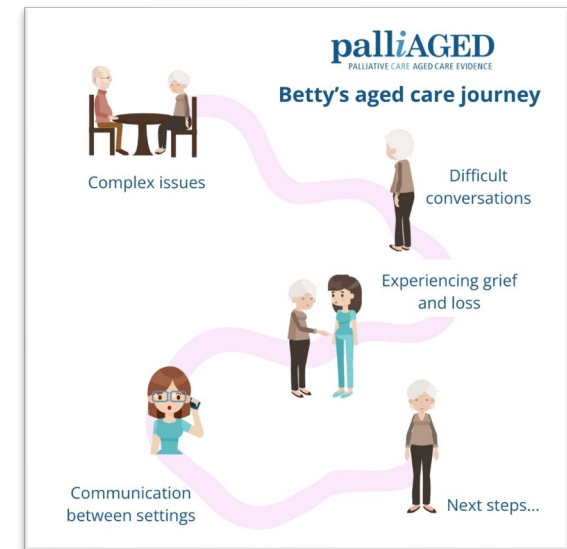
Advanced dementia
Mental illness
Frailty
Multimorbidity

Service Considerations

Models of Care
The Care Environment
Quality Improvement
Workforce Wellbeing
Staff training and education

Topics were negotiated with the sector and are mapped to the standards. The evidence is contextualised for aged care and enable direct access to the evidence base. Each topic has a companion Improving Care page: What I can DO, What I can GIVE, What I can LEARN, What I can SHARE

Translated for use



Preparing services

Website reconfigured to introduce **Supporting Services**

Focus on provider responsibilities

Actionable guidance on how to use resources to address Standards and Act

Suitable for Residential Aged Care and Support at Home Program

Mapped evidence resources

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Action roadmap for Outcome 5.7: Palliative care and end-of-life care

Providers have three main responsibilities with respect to Outcome 5.7 of the Strengthened Aged Care Quality Standards:

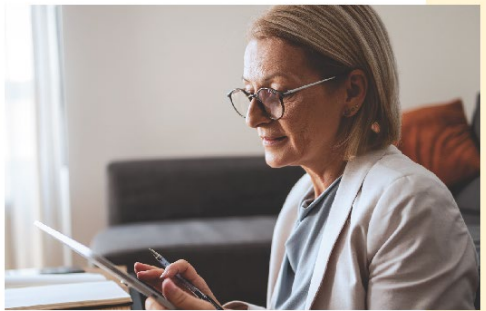
- To recognise and address the needs, goals and preferences of individuals for palliative care and end-of-life care and preserve the dignity of individuals in those circumstances
- To ensure that the pain and symptoms of individuals are actively managed, with access to specialist palliative and end-of-life care when required.
- To make sure that supporters of individuals and other persons supporting individuals are informed and supported, including during the last days of life.

What needs to be in place?
Five sets of processes need to be in place:

- Processes to recognise the need for palliative care
- Processes that facilitate end-of-life planning conversations
- Care processes to plan and deliver palliative care
- Processes for effective communication
- Care processes that recognise and respond to last days of life

Continue for more detailed information of the five sets of process that you can follow.

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Outcome 5.7: Evidence, education and clinical resources mapping

Quality palliative care and end-of-life care relies on organisational processes and systems, workforce capability and culture, and proactive management and leadership. The resources below have been mapped to aspects of palliative care and end-of-life care that have been acknowledged in Outcome 5.7 of the Strengthened Aged Care Quality Standards. These resources are free to access.

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Using the National Palliative Care Program resources

The Australian Government funds a range of [national palliative care projects](#) primarily focused on education, training, quality improvement and advance care planning. Many of these have specific resources for aged care and primary care.

Advance care planning Learning
These modules from [Advance Care Planning Australia](#) range from an introduction to ACP to more specialised courses for health professionals.
Specific resources:
[Advance Care Planning Measurement \(ACPL\) Tools](#)
[Advance Care Planning and Aged Care](#)

Advance eLearning
The [Advance Project](#) offers a range of learning options for GPs, general practice nurses, and mental health workers to develop their knowledge of, and skills in using screening tools to support the provision of palliative care and advance care planning in everyday general practice.

caring@home
The [caring@home](#) project aims to train nurses to support and enhance the ability of carers to manage subcutaneous medications thereby assisting palliative patients access to timely symptom management.

CareSearch My Learning Modules
The [My Learning Modules](#) aim to demonstrate how to find relevant evidence and how to use the evidence resources in CareSearch to make a difference in clinical care. Two were written for aged care: [My Learning 4: Residential Aged Care](#) and [My Learning 5: Dementia](#).
Specific resources:
[CareSearch 4: Aged Care](#)
[CareSearch 5: Dementia](#)
[Advance Care Planning](#)
[Advance Care Planning](#)
[Advance Care Planning](#)

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Organisational Tips: Supporting staff wellbeing

While staff find meaning and value in their work in aged care services, they can also feel pressures. Some stresses arise from individual characteristics and circumstances while others can result from organisational practices and processes. Burnout contributes to staff turnover. Caring for people coming to the end of their life or who are dying can be an additional source of sadness and distress. This is, however, an important part of aged care. Below we have put together a series of ideas that organisations can implement to support their workforce.

Tip 1 Let's talk about it
Provide opportunities for staff to talk about moral distress or ethical concerns. Aged care workers come from many different backgrounds and can have different cultural or religious perspectives. Getting together to talk about how the team felt about a recent death can provide you with important insights into concerns or worries.

Tip 2 Check in
Check in with those who provided care at end of life to an older person living in your facility or who was receiving care in their home. Acknowledging the loss is validating. It is also a good way to see if the staff member felt comfortable and confident in their skills.

Tip 3 Sort out formal Employee Assistance options
If you have an Employee Assistance program, make sure staff are aware that it is available. Early engagement can help them recognise and manage their sense of grief and loss. Make a list of group providing support to health and aged care professionals.

Tip 4 Make sure workloads are okay
Work conditions can contribute to burnout in aged care. This can be too much work and too many time pressures. It can also be about the feeling that the staff member did not have the time or skills to provide the care they would have wanted.

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Being prepared checklist: Palliative care and end of life

Being prepared means you need to plan and check on how you are going. Self-assess what you already have in place and which items you may need to develop.

Activity or Process	Person responsible	Already in place	Need to develop
Decide on whether a specific role will lead the preparation or if you need a team to have all activities in place for the new requirements.		<input type="checkbox"/>	<input type="checkbox"/>
Become familiar with the Strengthened Quality Standards and understand your provider category and responsibilities.		<input type="checkbox"/>	<input type="checkbox"/>
Make sure your Board or owner is familiar with their responsibilities. Prepare a brief on palliative care and end-of-life care and how your service will manage responsibilities.		<input type="checkbox"/>	<input type="checkbox"/>
Check your workforce capability, review education resources and develop a training plan.		<input type="checkbox"/>	<input type="checkbox"/>
Establish what clinical care processes need to be developed or modified to address Outcome 5.7. Think about your current structure and processes.		<input type="checkbox"/>	<input type="checkbox"/>
Make sure you are aware of your local specialist palliative care services and how your GPs can support end of life care.		<input type="checkbox"/>	<input type="checkbox"/>
Set up a process for documenting palliative care training and implementing key care processes. Think about how to seek feedback from older people and their families.		<input type="checkbox"/>	<input type="checkbox"/>
Consider what data is already being collected for reporting. See if your clinical information system has end of life data points.		<input type="checkbox"/>	<input type="checkbox"/>

Facing the realities

Question of scale

Aged care +/- Healthcare

Multimorbidity, frailty, dementia

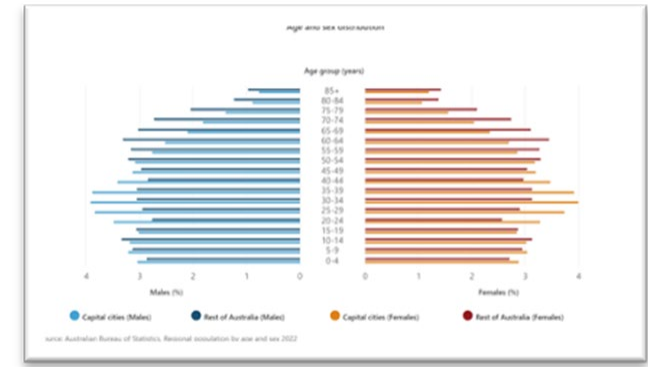
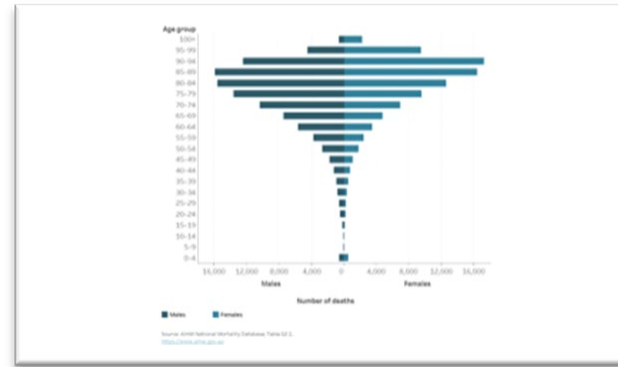
Residential aged care and

Support at Home

Different funding streams,
workforce composition and
turnover

Digital and data agenda

Competing agendas and
priorities with 1 November



There's this huge, big baseline information that needs to be poured out and filled into every all the gaps and spaces. That's kind of where we're coming from at the moment. And then hopefully, at a point, there'll be some level of saturation

Enhancing intersection

Baseline: Inclusions in website and currency of inclusions) (eg Models of Care, Education resources)

Ongoing: Sharing updates through newsletters, LinkedIn, blogs, Working & Advisory groups

At the coalface: Cross promotion, sharing each other's information and resources

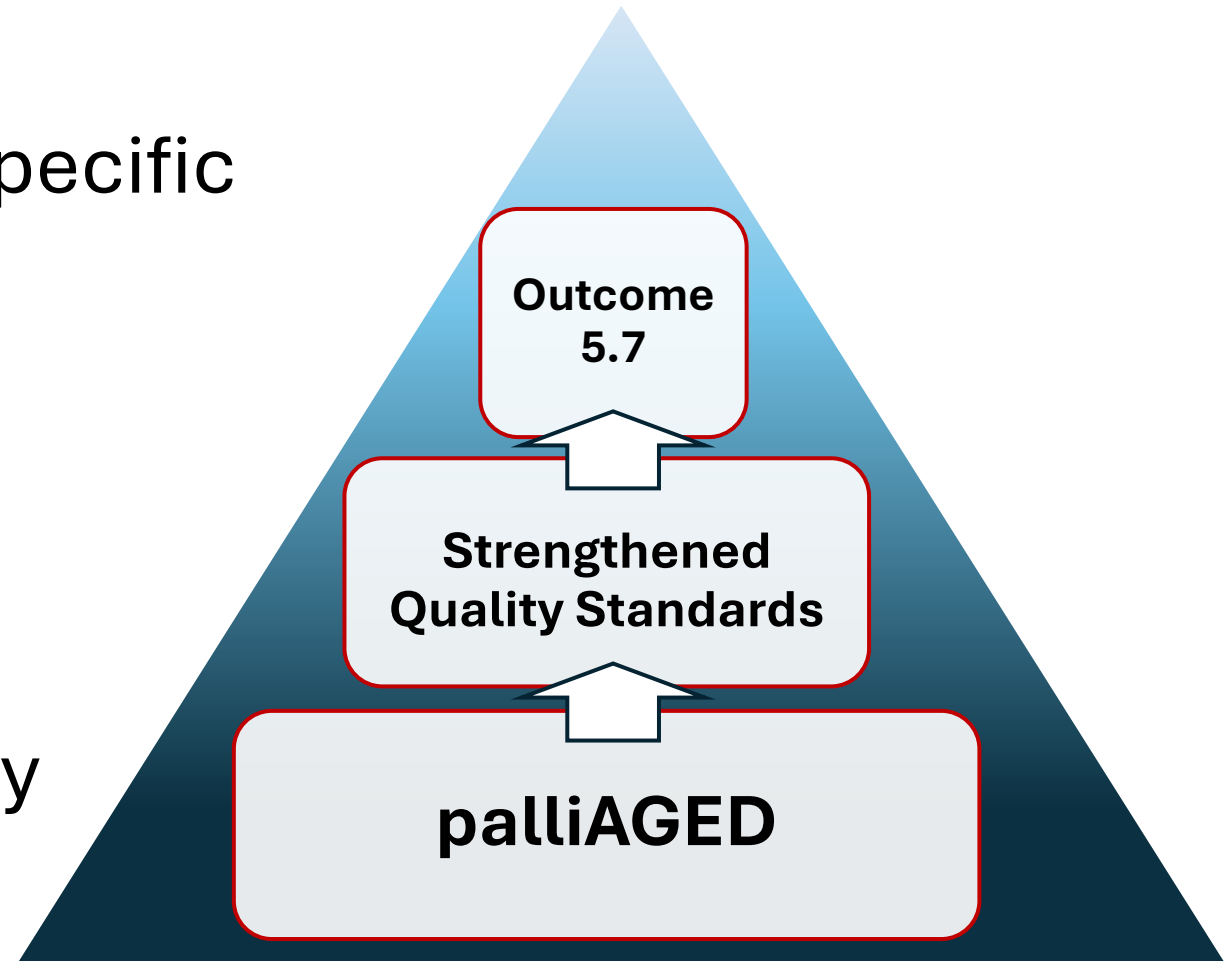
Partners: ELDAC & CareSearch; ELDAC & PEPA

Broader picture: Cross reliance on whole NPCP (eg ACPA, CarerHelp)

I also participated in ELDAC Linkages project which guided us to palliAGED and they sent the resources [initially]. And then I could order resources myself. So that's how I came to know about all the resources you have.

Final message

- Outcome 5.7 sets the specific directions
- Strengthened Quality Standards provide the context and culture
- Sector change requires awareness, accessibility and coordination





Thank you



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