

Annual Report

2024/2025



Eastern Metro Region Palliative Care Consortium
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2024/2025**



A Message from the Chair

Michael Bramwell

Acting EMRPCC Consortium Chair



On behalf of the members of the Eastern Metropolitan Region Palliative Care Consortium, I am pleased to present the 2024/2025 Annual Report. The Report highlights the collaboration between services to enhance palliative care in our community.

We have had a busy year with activities promoting skill development in palliative care throughout the region. This focus has built the capacity of the health professionals in our region to deliver the best possible palliative care to support the patients/clients and their families. The EMRPCC has funded staff from our services to attend the 2024 Palliative Care Nurses Association Biennial Conference and the 2024 International Conference on Social Work in Health and Mental Health and the 2025 Oceanic Palliative Care Conference. We have also contributed funding to support the employment of several RACP-accredited palliative care registrars across Eastern Palliative Care, Eastern Health and St Vincent's Health Melbourne.

We have been actively involved in multiple networks in the region, including Victorian Palliative Care Networks, Eastern End of Life Care Network and several other local groups and networks. The Consortium and its member agencies have a high profile within the eastern metropolitan region of Melbourne, and we take every opportunity to promote the benefits of palliative care.

The EMRPCC has been well supported again this year by the significant contribution of Sarah Kleinitz, our Consortium Manager. Sarah is a very organised and skilled Consortium Manager who brings her natural warmth, project management skills and encouragement to everyone involved in the Consortium. Sarah's commitment to the Consortium's shared vision has allowed us to achieve what we have in a period of uncertainty.

Special thanks are also extended to Gaylene Coulton, CEO of Eastern Palliative Care; and Dr Aaron Wong, Clinical Director of Supportive and Palliative Care and Dr Yok-Yin Lee, Acting Clinical Director of Supportive and Palliative Care at Eastern Health, who have formed the EMRPCC Executive and have provided a wealth of expertise and knowledge around the palliative care sector in eastern metropolitan Melbourne.

The EMRPCC Advisory Group has provided sage advice and has contributed to the work of the Consortium of the past 12 months. Special thanks to Janeen Cato and Kylie Walters (Bolton Clarke); Mark Boughey (St Vincent's Health Melbourne); Samantha Trevaskis and Sarah Lindsay-MacFadyen (Eastern Health); Anne Gravette, Alisha Jackson and Amanda Noble (Eastern Melbourne Primary Health Network); Tania King and Maria Logan (Eastern Palliative Care); and Linda Nolte (North Eastern Melbourne Integrated Cancer Service).

Over the next twelve months, the members of the Consortium will continue in their efforts to improve the development and delivery of palliative care services in this region.

From the Consortium Manager

Sarah Kleinitz

EMRPCC Consortium Manager



With mixed emotions, I have prepared my final Consortium Manager report for this 2024/2025 Annual Report for the Eastern Melbourne Region Palliative Care Consortium (EMRPCC). As you read this, I will have settled into travel and a career break after years of working for and with non-profit healthcare organisations. The time from September 2022 to April 2025 has been happily spent in this role as EMRPCC Consortium Manager.

It has been a pleasure to work with the EMRPCC partners and their representatives: Eastern Health, Eastern Palliative Care Association Ltd, St Vincent's Health Melbourne, Bolton Clarke, Eastern Melbourne PHN and NEMICS. I have also enjoyed working alongside the amazing staff at Eastern Palliative Care and observing first-hand the incredible service they provide. I must also acknowledge and thank my seven Consortium Manager colleagues across Victoria for their professionalism and support. This cohort of colleagues truly exemplifies the strength of collegiality and collective endeavour.

Working in a Victorian government-funded role and more broadly with health services funded by this government in our post-COVID environment has been challenging. Present funding cannot be stretched to meet the demands and requirements of those needing palliative care in their preferred place of delivery - be that in the place they call home, in aged care or a hospital setting. There has been - and will continue to be - extensive redesign and innovation across the palliative care sector in this region, but greater funding is very much required!

This year the EMRPCC has again concentrated on upskilling and building capacity in the workforce in the Eastern Metropolitan Region. We have encouraged specialist and non-specialist palliative care health workers to increase their palliative care knowledge and skills to further their careers and build capacity in their workplaces. This has included funding several Community Palliative Care registrar rotations, funding places to the 2024 International Conference on Social Work in Health and Mental Health and the 2025 Oceanic Palliative Care Conference and working closely with EMPHN and EPC to run a Community of Practice for GPs working with palliative care patients. The Consortium has also promoted and shared information about education courses, study days and webinars on the EMRPCC website.

EMRPCC is an active participant in the Victorian Palliative Care Network, and I had the honour of chairing this network in 2024. We also regularly meet and communicate with the Regional Palliative Care Consortium Managers and our key stakeholders in other forums.

EMRPCC Governance

EMRPCC is one of eight Palliative Care Consortia in Victoria, which are each a collective of representatives from palliative care services within their respective health regions. These are then represented across the State and connected to peak bodies through the Victorian Palliative Care Network. The palliative care consortia are critical to the Victorian health system and play a key role in implementing palliative care policy and supporting effective palliative care service delivery, including quality end-of-life care in community and inpatient and RACF settings.

We connect the clinicians and practitioners providing the clinical services to the community and deliver access to information, opportunities and forums that respond to identified needs. We act as a conduit between the funded state and federal bodies that influence palliative care and regional stakeholders.

The three funded specialist palliative care services comprise the Consortium Executive and oversee the implementation of the palliative care policy direction of the Victorian Department of Health. As the auspice organisation, Eastern Palliative Care Association Incorporated is the funds holder for the Consortium and hosts the Consortium Manager.

EMRPCC members work together to implement, review and improve services so people in the Eastern Metropolitan Region of Melbourne who are living with a life-limiting condition, their families and their carers have access to a high-quality palliative care system that is innovative and responsive to their needs.

EMRPCC Members

Executive/Voting Members:-



Associate Members:-



EMRPCC Executive	
Role	Responsibilities
* Ensure the Consortium regional plan is implemented * Support the Consortium Chair and Consortium Manager to implement the policy in the region * Ensure financial accountability of the Consortium * Provide quarterly financial reports to the Consortium * Support the Consortium Chair to undertake staff recruitment and performance management	* Make decisions outside of Consortium meetings as delegated by the Consortium * Monitor and report outcomes and achievements against the regional plan to the Consortium * Make decisions on matters that fall within the priorities stated in the regional plan * Report on all decisions for ratification by the Consortium * Make decisions on matters that fall within the priorities stated in the regional plan * Ensure performance management of the Consortium Manager * Promote the profile of the Consortium in the region
EMRPCC Advisory Group	
Role	Responsibilities
* Inform decision making, planning, implementation and care coordination related to policy and strategic planning within the region * Build and maintain relationships with service providers in the region	* Provide advice to the Consortium on relevant issues in a timely manner * Champion the policy and palliative care/palliative approach in own agency

EMRPCC Governance

St. Vincent’s Health Melbourne		Bolton Clarke	
• Michael Bramwell (Acting Chair April-June) • Dr Mark Boughey		• Janeen Cato • Kylie Walters	
Eastern Health		Eastern Melbourne Primary Health Network	
• Dr Yok-Yin Lee (June-October) • Dr Aaron Wong (October-June) • Samantha Trevaskis • Sarah Lindsay-McFadyen		• Alisha Jackson [Exec. Committee by invitation (ex-officio)] • Amanda Noble [Exec. Committee by invitation (ex-officio)]	
Eastern Palliative Care Assoc. Inc.		North Eastern Melbourne Integrated Cancer Service	
• Gaylene Coulton • TaniaKing • MariaLogan		• Linda Nolte	
EMRPCC			
• Consortium Manager (ex officio): Sarah Kleinitz			
KEY: Executive Committee &Advisory Group Advisory Group Executive Committee			
FOCUS AREAS:			
▪ RegionalService Coordination ▪ Referralandcommunication systems ▪ Workforceupskilling and capacity building ▪ Emergingissues for clients and carers ▪ PalliativeCare and VAD interface ▪ Communityengagement ▪ COVID-19management and coordination			
		▪ Member research updates/findings and implications for practice ▪ Stakeholder engagement and updates ▪ Member project initiatives ▪ Member strategic planning directions ▪ Conference and webinar attendance & information sharing ▪ Workforce and staffing issues	

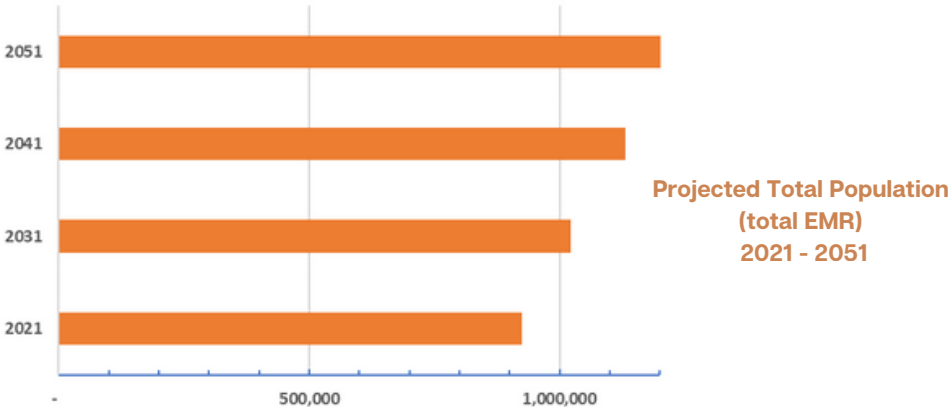
- The EMRPCC Executive met on 6 occasions in 2024/2025.
- The EMRPCC Advisory Group met on 6 occasions in 2024/2025.
- Meetings were held in a hybrid format.

Regional Profile

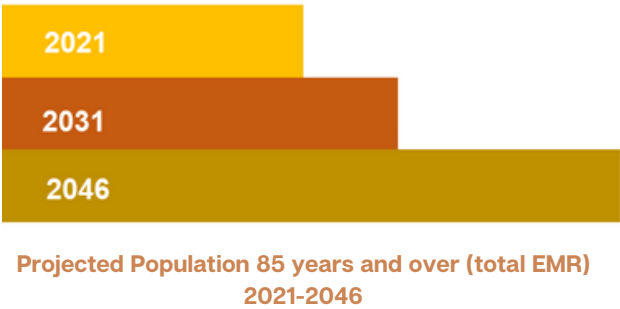
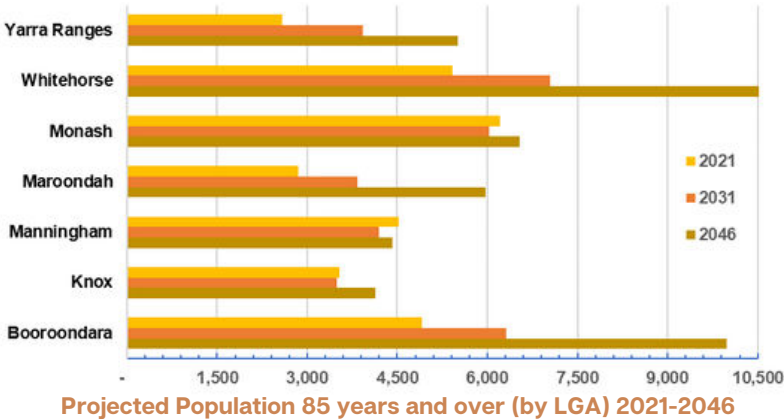


The Eastern Metropolitan Region covers just over 2,025 square kilometres, stretching from the inner suburbs to townships in the Yarra Valley and Dandenong Ranges. The region includes the Local Government Areas of Boroondara, Knox, Manningham, Maroondah, Monash, Whitehorse and Yarra Ranges. People in the outermost local government area experience particular issues with access to a range of services including for their health, due to distance and isolation. There are suburbs of high affluence and pockets of entrenched socioeconomic disadvantage.

At the 2021 Census, the Eastern Metropolitan Region’s population was a little over 1.15 million people. And so, the region is home to just below 18% of the Victorian population and around 24% of Victorians who live in the capital city area of Greater Melbourne. The population in the Eastern Metropolitan Region is projected to increase by just over 1% by 2051.



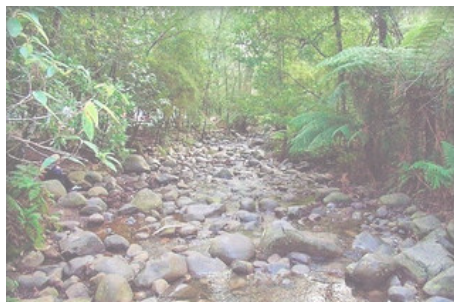
By 2051 the Victorian population will have aged by proportion. The median age is projected to reach 40 by this stage with almost one fifth of the population aged 65 years or older. People aged 65 years and over will almost double to 2 million people and the number aged 85 years and over almost triples to 400,000 people.



Traditional Owners

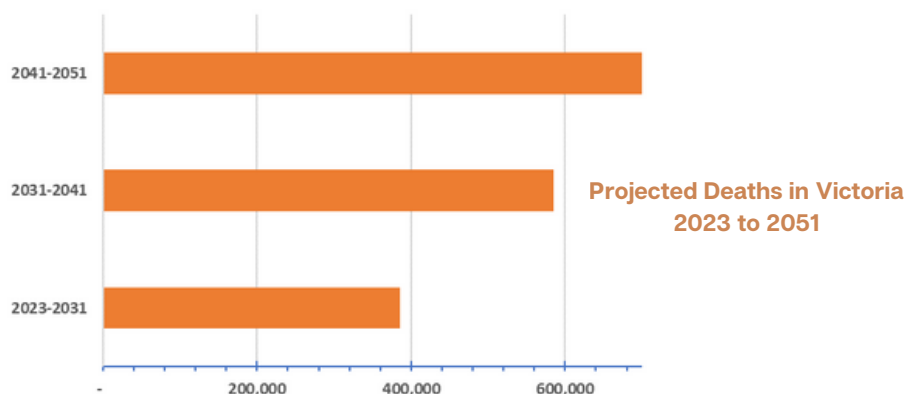


The Eastern Metropolitan Region is situated on the traditional lands of the Wurundjeri people of the Kulin Nation. The Eastern Metropolitan Region Palliative Care Consortium members provide services on the traditional lands and waterways of the Wurundjeri people and offer our respect to their Elders past, present and emerging. We acknowledge all Aboriginal and Torres Strait Islander Communities who live in the Eastern Region.



Palliative Care Services

It is predicted that the increasing demand and expectation for end-of-life care in the home will continue in this region which has fewer hospitals and outpatient palliative care services than others across Melbourne. For both specialist inpatient services and specialist community palliative care services, people are being referred later than was the case prior to the COVID-19 pandemic and are at times dying more quickly.



Eastern Palliative Care Association Incorporated (EPC) is Victoria's largest single provider of specialist community-based palliative care services and offers a full range of support programs. The volume and complexity of the work undertaken by EPC to keep clients in their own homes, safe and supported by high-quality care has multiplied with the number of people who wish to die at home.

The Eastern Metropolitan Region has five publicly funded hospitals and three health services. The Inner East has one hospital and three health services: Peter James Centre, Caritas Christi Hospice and St George's Health Service. The Outer East has four hospitals: Maroondah Hospital, Angliss Hospital, Wantirna Health and Healesville and District Hospital. There are designated palliative care beds across the 2 funded inpatient specialist palliative care health services: Wantirna Health Specialist Palliative Care Unit and Caritas Christi (SVHM). Doctors and nurses also provide specialist palliative care advice to patients being cared for elsewhere in these health services.

GP Services

The Eastern Metropolitan Region has around 316 General Practices. The distribution of these may not strongly correlate with population numbers or demand for primary health services including for palliative care.

Building Capacity in the Eastern Metropolitan Region

Funded Places to Conferences Program

12 places funded to attend the 2024 Palliative Care Nurses Association Biennial Conference

EMRPCC funded places for 12 palliative care nurses from its member organisations to attend the Palliative Care Nurses Association Biennial Conference in Melbourne in July-August 2024. They represented Eastern Palliative Care, Eastern Health and St Vincent's Health Melbourne. The opportunity to attend this conference upskilled and built palliative care capacity in this workforce. None of these staff would have likely otherwise been offered a place to attend a multi-day palliative care conference.

5 places funded to attend the 2024 International Conference on Social Work in Health and Mental Health

EMRPCC funded places for 5 palliative care social workers from its member organisations to attend the International Conference on Social Work in Health and Mental Health in Melbourne in November 2024. They represented Eastern Palliative Care and St Vincent's Health Melbourne. The opportunity to attend this conference upskilled and built palliative care capacity in this workforce. None of these staff would have likely otherwise been offered a place to attend a multi-day palliative care conference.

15 places funded to attend the 2025 Oceanic Palliative Care Conference

EMRPCC has funded places for 15 nursing and allied health staff from its member organisations to attend Palliative Care Australia's Oceanic Palliative Care Conference in Brisbane in September 2025. They will represent Eastern Palliative Care, Eastern Health, Eastern Melbourne PHN and St Vincent's Health Melbourne. The opportunity to attend this conference will upskill and build palliative care capacity in this workforce. None of these staff would have likely otherwise been offered a place to attend a multi-day palliative care conference.

GP Community of Practice for Palliative Care

EMRPCC partnered with the Eastern Melbourne PHN and Eastern Palliative Care to fund and facilitate a Community of Practice for GPs who are passionate about their work with palliative care patients. This Community of Practice was designed to elevate best practices and enhance palliative care capabilities within our community. Sessions were held bi-monthly from August 2024 to May 2025, and an additional webinar for GPs and general practice staff was run in February 2025. Topics across these sessions included Advance Care Planning; Communications and difficult conversations in palliative care; Multicultural aspects of shared decision making in palliative Care; and Exploring the role of palliative care in RACF, including for those with dementia.

Community Palliative Care Registrars

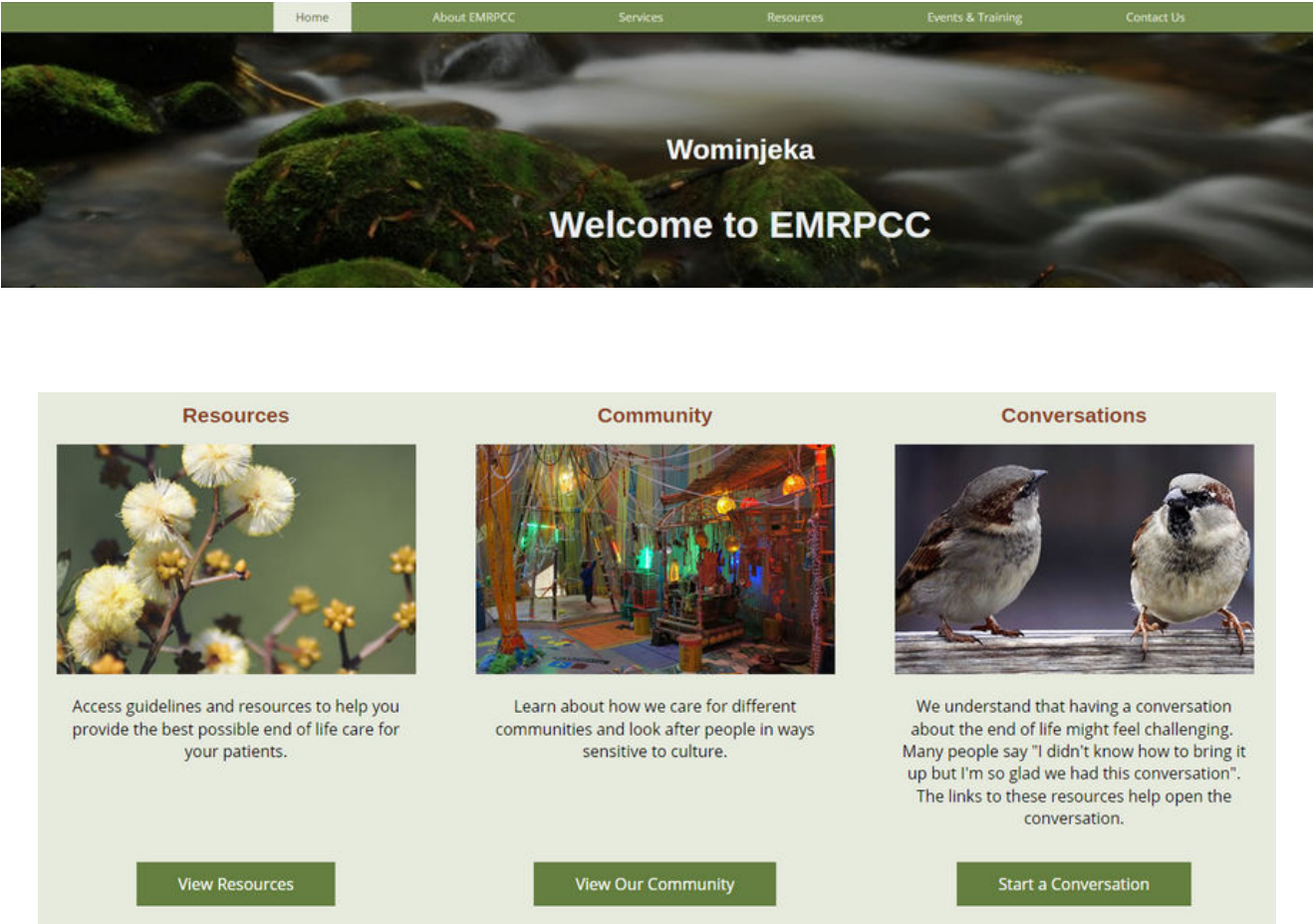
EMRPCC funded a 12-month Community Palliative Care Registrar position for a collaboration between Eastern Palliative Care and Eastern Health from February 2024. This registrar position has been accredited by the Royal Australasian College of Physicians (RACP).

EMRPCC funded a 6-month part-time Community Palliative Care Registrar position for a collaboration between Eastern Palliative Care and St Vincent's Health Melbourne from February 2025. This registrar position has been accredited by the Royal Australasian College of Physicians (RACP).

Building Capacity in the Eastern Metropolitan Region

EMRPCC Website

The EMRPPCC website provides a range of resources and information for health professionals, palliative care patients and their families and carers, as well as the general community. Regular updates include links to education and professional development opportunities and useful resources and newsletters. The EMRPCC website also provides a forum for feedback and enquiries.



Building Capacity in the Eastern Metropolitan Region

Networks

Victorian Palliative Care Network

EMRPCC is an active member of the Victorian Palliative Care Consortium Managers Network and the Victorian Palliative Care Network. Both of which meet bi-monthly. See vicpalliativecareconsortia.au

The Victorian Palliative Care Network has representation from a range of key stakeholders in the sector who meet bi-monthly to discuss emerging issues and enhance coordination and communication across the State. This Network also assists the Department of Health in implementing policies and programs that support people with a life-limiting illness and their carers, families, friends and communities. The EMRPCC Consortium Manager was chair of the Victorian Palliative Care Network in 2024.

Eastern End of Life Care Network (EELCN)

The Eastern End of Life Care Network provides an interactive and informative forum for people working and volunteering in end-of-life care and promotes and supports the development of compassionate community initiatives. Meetings represent:

- Bolton Clarke
- EACH
- Eastern Health
- Eastern Melbourne PHN (EMPHN)
- Eastern Palliative Care Association Limited (EPC)
- HomeInstead
- Inspiro
- La Trobe University
- Mullum Mullum Indigenous Gathering Place (MMiGP)
- Natural Grace
- Palliative Care Victoria (PCV)
- Social Health Australia
- Yarra Ranges Council

Other Networks and Groups

EMRPCC supports a range of other networks and groups including:

- Boroondara Aged Service Providers Association
- CarerHelp Diversity National Reference Group
- Eastern Sector Development Team forums
- Valley Service Provider Network
- Yarra Ranges Council Indigenous Advisory Committee

Diversity

EMRPCC member organisations have been working on and supporting initiatives that aim to heighten awareness of inclusive practice.

EMRPCC has partnered with Palliative Care Victoria on the Dignified and Respectful Decision project (Disability and Aged Care Response) which aims to enhance palliative care delivery for people with disabilities and older individuals by improving care coordination and service integration.

LGBTQI+ palliative care

EMRPCC members continue to be aware of and support work to promote LGBTQI+ awareness and rights in palliative care, health care and beyond. EMRPCC connects with other organisations in the region to promote professional and educational opportunities that upskill and build capacity in the workforce in LGBTQI+ awareness and actions.

EMRPCC Partner Reports 2024/2025

Eastern Health



Eastern Health is committed to delivering high-quality, comprehensive and collaborative person and relationship-centered supportive and palliative care. Eastern Health services a large catchment area of approximately 1.6 million people and consists of several health service sites – Box Hill, Maroondah, Angliss, Wantirna, Peter James, Healesville and Yarra Ranges Lilydale. Following a major organisational restructure, Palliative Care is now under Cancer Services, alongside Medical Oncology, Haematology, Voluntary Assisted Dying and Advance Care Planning.

There have been several staff changes. I commenced as the new Clinical Director for the service in December. I am a dual-qualified Palliative Medicine Physician and Geriatrician and have previously held medical leadership positions at the Royal Melbourne Hospital and Austin Health with honorary appointments at both the University of Melbourne and Monash University. I am grateful for Dr Yok-Yin Lee's leadership in supporting and sustaining the service during the transitional period. Sadly, we farewelled Dr Nisha Nadarajan, who has taken up the role of Medical Lead of the Austin Palliative Care Outpatient service. Dr Sarah Tan, a dual-trained Renal and Palliative Medicine Physician, joined our team in June and will assist in the development of our new non-cancer palliative care clinic. Sarah Lindsay-McFadyen is the acting CNC team leader for the Consultation service and Aliesha-Jane Fejgl continues in her role as NUM of Wantirna PCU.

Clinical Care

Wantirna Health Palliative Care Unit (PCU)

Wantirna continues to operate with 28 beds with an average length of stay of 15 days. Our unit receives referrals from multiple areas spanning community, Eastern Health sites, private hospitals and other public health services. The Unit continues to perform exceptionally, meeting and exceeding the national Palliative Care Outcomes Collaborative (PCOC) benchmarks. We are also grateful for the recent installation of beautiful, donated artworks.

Specialist Palliative Care Clinics

Two Oncology Palliative Care clinics have now been established at Box Hill and Maroondah, through a NEMICS grant. These clinics are supported by Dr Yok-Yin Lee, Dr Jack Wang and Danielle Bach. The Box Hill palliative care clinic also offers acupuncture as an adjunct symptom management intervention.

Palliative Care Consultation Service

The consultation service provides comprehensive specialist palliative care advice and support across all Eastern Health sites, as well as phone support for Care at Home/Outreach programs. The service continues to experience high demand with over 1,500 episodes of care in 2024.

EMRPCC Partner Reports 2024/2025

Eastern Health



Community Palliative Care Partnership

Eastern Health Supportive and Palliative Care service is committed to having a close working relationship and collaborating with Eastern Palliative Care (EPC) to ensure smooth care transitions, care coordination and clinical communication. Regular meetings are held at a consortium and service level to facilitate shared discussions of emerging issues and to foster a collaborative response. Drs Kathryn Tham and Jack Wang have appointments across both Eastern Health and EPC. EMRPCC and EPC have also funded a half-time community registrar position employed through Eastern Health. The registrar will have shared education opportunities across both services and will assist in the new non-cancer clinic.

Partnership with local private hospitals/services

Several Eastern Health and Eastern Palliative Care Consultants work at Epworth Eastern as VMOs providing a palliative care consultation service. One of the VMO group members also works at Ringwood and Knox Private Hospitals. The connections across services and organisations encourage a strong working relationship with other specialists, referral bases and optimise communication processes. This has also enabled collaborative opportunities, such as extending the Eastern Health oncology palliative care clinic support to some of the Box Hill Peter MacCallum radiotherapy patients.

Education

The following summarises the educational activities undertaken by our service:

- Establishment of formal weekly palliative care registrar/HMO teaching sessions covering various topics, clinical conundrums and journal club
- SMRPCC special online sessions – Palliative Care in Dementia (Dr Aaron Wong, 12 February) and Delirium at end of life (Dr Grace Walpole, Penelope Casey, Aliesha-Jane Fejgl, 18 March)
- Dr Grace Walpole continues to lead and facilitate various communication skills and shared decision-making workshops through Eastern Health Clinical School and with other external organisations (VitalTalk, Healthcare Communication Collective)
- EMRPCC/EMPHN GP Community of Practice education sessions (led by Dr Katie Tham) – Dr Aaron Wong, Dr Katie Tham and Dr Grace Walpole presented on topics covering dementia in palliative care, palliative care in aged care and communication skills in early 2025
- Asia Pacific Hospice Conference held in Sarawak (April) - Dr Aaron Wong presented 2 sessions - Managing transitions in care and Serotonin syndrome in Palliative Care
- Residential InReach RACH education day at Wantirna, 27 June (Dr Alison Chan, Aliesha-Jane Fejgl and RN Lauren Hamill) presented to aged care workers/clinicians on managing diabetes at end of life and respiration changes at end of life
- Consults Team presentation at Eastern Health Transition to Practice Study Day focusing on the Care and Wellbeing of Complex Patients
- Presentations for intern education, Emergency Department and ward-based sessions

EMRPCC Partner Reports 2024/2025

Eastern Health



- Cancer services grand ground (13/6/25) - Drs Aaron Wong and Grace Walpole presented on Evidence update for medicinal cannabis in cancer care and communication approach to requests for cannabis
- Final year Monash University medical student palliative care education program – Dr Kathryn Tham and Dr Katherine Hauser (Monash Health) have transitioned a series of lectures onto an online recording platform
- Dr Katie Tham presented at the Palliative Care Nurse Practitioner Forum
- National Palliative Care Week media piece for community awareness/education:
- Dr Sarah Tan presented on opioids in kidney failure at the Renal Society of Australasia (June)
- Committee and advocacy representation by clinicians in our service: Membership of Palliative Care Community of Practice (Safer Care Victoria), Palliative Care Victoria Aged Care Special Interest Group, ANZSPM palliative sedation guideline review working group, ANZSPM & ANZSN Kidney Supportive Care special interest group, Member of the Victorian Palliative Care Nurse Unit Manager Forums hosted by SMRPCC

Research/Quality Improvement Projects

Eastern Health Supportive and Palliative Care service undertakes research and quality improvement activities to improve how we care for people living with life-limiting conditions. These are some of the activities/projects over the past 12 months:

- NEMICS professional development grant of \$5000 for building interdisciplinary palliative care research capacity – supported 12 clinicians across the service to undertake courses to increase research knowledge and skills
- Sarah Lindsay-McFadyen (CNC team leader) and Berni Swinkels (PCU nurse) were successful in securing grants as part of the inaugural CareXperience Tank (Patient Experience week) hosted by the Eastern Health Foundation – this will fund 2 projects: Breathing Easier-Enhancing patient comfort with handheld fans, and the Handover Heartwork Project bags for returning deceased patients' belongings to their loved ones
- In partnership with Austin Health and ECRU Oncology, Eastern Health has been confirmed as a participating site for the RESONANCE clinical trial (Site PI-Dr Aaron Wong, Phase I/II medicinal cannabis for quality of life and symptom control in advanced cancer)
- Suba Slater (PCU dietician) is conducting a study looking at Nutrition screening in Palliative Care
- Bessie Wong and her team (Pharmacy) are undertaking a few studies related to polypharmacy and deprescribing and VTE prophylaxis in Palliative Care
- MODEL-PC study (Dr Grace Walpole PI): Driving quality in delirium care through a patient-centred monitoring system in palliative care – 4 publications in progress
- Medical Acupuncture for symptom management (led by Dr Yok-Yin Lee - Implementation process/feasibility, service evaluation, scoping review of role of acupuncture for non-pain symptoms)

EMRPCC Partner Reports 2024/2025

Eastern Health



Case reports in palliative care:

Clinical trial medication prohibitions and national opioid shortage complication pain management (Dr Aaron Wong, BMJ Supp Pall Care, APHC poster)

Serotonin syndrome complicating delirium management on PCU (Dr E Pranoto, Dr A Wong, BMJ Supp Pall Care, APHC oral presentation)

Bridging the Gap – Buprenorphine/Naloxone (Suboxone®) to Methadone Conversion for Pain in Palliative care (abstract submitted to Medicines Management 2025 National conference)

Medication-induced restless legs syndrome in palliative care (in preparation)

- PCOC education and quality improvement work in the consultation service will be led by Dr Andrew Ng and Sarah Lindsay-McFadyen
- Breakthrough cancer pain (BTcP) management - gap analysis of the current Australian landscape (Dr Aaron Wong is a member of the national BTcP expert working group – abstracts presented at PaCCSC/CST research forum, EAPC-published in Palliative Medicine, MASCC-published in Supportive Care in Cancer, manuscript in preparation)
- IMPART (IMproving Palliative care in Residential aged care using Telehealth) NARI steering group member – abstracts presented at ANZSPM, ANZSGM, AAG, ACP-International, OPCC conferences; protocol accepted for publication
- Lee CW, Wong A B, Lazarakis S, Lim W K, Darvall J (2025) Palliative prognostic tools in surgical patients at the end of life: a systematic review. British Journal of Anaesthesia
- Palliative care communication skills workshops - The Australian experience (Dr Grace Walpole, EAPC abstract - published in Palliative Medicine)
- Creutzfeldt-Jakob disease: a single institution case series (International Journal of Palliative Nursing, Danielle Bach - CNC)
- Evaluation of a weight-based process for real-time accurate confirmation of oral liquid controlled drug balances (Journal of Pharmacy Practice and Research, Aliesha-Jane Fejgl & Meegan Callinan CNE)
- A future for the hospital-in-the-home (HITH) deteriorating patient: shifting the paradigm (Dr Aaron Wong and Prof Brian Le) - accepted for publication
- Referral Criteria for Specialist Palliative Care for Patients with Dementia - JAMA Network Open (Delphi expert panel member - Dr Aaron Wong)
- Surefuser use in supporting end-of-life care in residential aged care: a retrospective audit (submitted for publication)

Other conference abstracts submitted/presented include:

ANZSGM Annual Scientific Meeting, Sydney 2025

- Palliative care needs of residential aged care facility residents admitted to a Hospital in the Home service (manuscript in preparation)
- The Residential Care Evaluation and Support Pathway for Optimising Needs in Delirium (RESPOND) implementation evaluation

EMRPCC Partner Reports 2024/2025

Eastern Health



- Prevalence, characteristics, and symptom burden of patients with dementia in an inpatient palliative care unit setting
- The Impact of a Perioperative Care of Older Adults undergoing Surgery (POPS) clinic on Goals of Care completion: Findings from an Australian retrospective cohort study (and APHC)

Asia Pacific Hospice Conference, Sarawak Malaysia 2025

- Enhancing support for palliative care needs of patients with cognitive impairment or dementia living in residential aged care homes through an Australian Hospital at Home service
- Strengthening Palliative Care Support for Residents with Dementia in Residential Aged Care Homes through the RAPID Assist Service
- Serotonin: too much of a good thing?
- Oncology clinical trials prohibited medications complicating cancer pain management and the role of palliative care – 2 case reports

World Hospital at Home Conference, Vienna 2025

- Responding to terminal deterioration in residential aged care homes: Preliminary evaluation of an Australian Hospital at Home (HAH) service
- Challenges of acute transitions from hospital to home for end-of-life care: Lessons learned from a collaborative specialist palliative care and Hospital at Home service pilot

Medicines Management 2025 National Conference

- Unpacking Polypharmacy: Insights into Risk Factors Among Palliative Care Patients
- Deprescribing in Palliative Care: Medication Shifts Across the Patient Journey
- Evaluating the Use of Venous Thromboembolism (VTE) Prophylaxis in Palliative Care: Implications for Practice Bridging the Gap – Buprenorphine/Naloxone (Suboxone®) to Methadone Conversion for Pain in Palliative Care (Case report)

Other research studies/activities/publications in progress:

- Responding to Australia's national opioid shortage: the need for a multi-agency coordinated approach
- Evaluating the characteristics, symptoms and outcomes of Intensive Care Unit patients referred to Palliative Care for end-of-life care
- Prevalence, characteristics, and symptom burden of patients with dementia in an inpatient palliative care unit setting
- NCIS Palliative Care clinic database for audit/evaluation and embedding ESAS into routine clinic symptom assessment and monitoring
- Feasibility of implementing an AI facial analysis technology for pain assessment during terminal care in PCU (Collaboration with RMH and PainChek)

EMRPCC Partner Reports 2024/2025

Eastern Health



Digital transformation work continues to occur with stepped EMR roll-out across Eastern Health sites. Our team has been involved in:

- Co-designing and supporting the implementation of the syringe driver infusion on EMR roll-out at Box Hill
- Improving the Palliative Care/EOLC medication care set and transition it into a Power Plan on EMR
- Updating the layout and content of our internal and external-facing Palliative Care websites

We are in the process of updating the Care plan for the dying person form and undertaking a trial on PCU.

I am thankful for the wonderful, resilient and compassionate team I work with and look forward to supporting growth, research and innovation, as well as strengthening relationships and fostering strategic partnerships to advance palliative care in the region

Dr Aaron Wong
Clinical Director Supportive and Palliative Care

EMRPCC Partner Reports 2024/2025

Eastern Palliative Care Association Limited



The 2024/2025 financial year marked a period of sustained high demand for EPC's services, delivering over 3,000 episodes of care. EPC continued to advance its Value Based Health Care (VBHC) Strategic Plan, focusing on innovation and efficiency to maintain high-quality community care amidst growing regional needs. Without any increases in our Government funding, innovation has remained central to our mission, as we have piloted new initiatives and embraced fresh perspectives to continuously refine the support we offer. Our commitment to evidence-based practice has seen us bring the latest insights and advances into the hands of our teams.

As a result, our services have become not only more responsive, but more personal - adapting to the evolving needs of our diverse community.

Value Based Health Care Strategy and Operational Advances

EPC's VBHC Strategy, called "A Case for Change," is designed for its community. With the growing demand for services, EPC focuses on finding new and efficient ways to maintain its high-quality care. Significant progress has been made in improving allied health and palliative care in residential aged care by using technology to enhance clinician effectiveness and enable various care methods. Better data collection and analysis have provided deeper insights into service costs and value. Leadership and workforce capabilities have been strengthened through continuous education and training. The VBHC Framework emphasises co-design with clinicians and consumers, supported by input from EPC's Consumer Advisory Subcommittee and VBHC Taskforce members.

Workforce Development and Training Initiatives

'EPC Foundations, which EPC launched in 2023, is a comprehensive nine-day training course delivered over two to three weeks. This multidisciplinary program continues to accelerate the development of new palliative care nursing and allied health professionals from novices to advanced beginners, ensuring safe and proficient community palliative care delivery. The course also aims to reduce risk, enhance competence and improve staff retention; with participation extending nationally and achieving a 100% retention rate.

With nearly 1,800 client biographies published, a 97% volunteer satisfaction rate, PhD-level research and close to two decades of continuous operation, EPC's Volunteer Services (Biography) is proudly recognised as a national and international leader in the field. EPC also facilitates the (inter)National Biography Practice Group, which currently includes 84 participating organisations from across Australia and New Zealand. As a result of this leadership, organisations continue to engage EPC's Centre of Volunteer Excellence for training - both for leaders of volunteers and volunteer biographers. In the current financial year alone, EPC delivered training on developing a volunteer biography program to 19 services across Australia. Notably, this included the first service working with First Nations Peoples in biography, and through an EPC-funded scholarship initiative, three individuals from a Kenyan hospice. These are both significant milestones for the program.

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Eastern Palliative Care Association Limited



Strategic Partnerships and Collaborations

EPC has continued its partnerships with St Vincent's Hospital Melbourne and Eastern Health for a Community Palliative Care Registrar program. Two registrars were hosted during 2024/2025, with the program aiding workforce development and support for EPC clinicians.

EPC concluded its research collaboration with La Trobe University School of Psychology and Public Health in December. Although the RCT Trial of the HELP Network Centred Care program was unable to recruit sufficient research participants, the HELP App continues to benefit those families utilising it during their end of life period.

EPC's global partnership with Sprink Ltd and healthcare organisations across the world in the implementation of the PerEmpo client goal-setting and shared decision-making tool continued with the rollout of the tool across EPC after a successful pilot project. Locally, EPC is collaborating in a community of practice with the Royal Melbourne Hospital and the Peter Macallum Cancer Institute.

Workforce and Leadership

EPC changed its legal structure from an Incorporated Association to a Company Limited by Guarantee. One of our VBHC framework components is Governance and this change has enabled us to strengthen our corporate and clinical governance through a skilled Board of Directors and Committee structure.

EPC's success is attributed to the dedication of its 170 staff members and 240 volunteers. The commitment of nurses, doctors, allied health professionals, corporate staff and volunteers is highlighted by their unwavering passion and care despite challenging circumstances.

Adjunct A/Professor Gaylene Coulton
CEO

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St Vincent's Hospital Melbourne Palliative Care Services



St Vincent's Hospital Melbourne (SVHM) is committed to delivering best-practice palliative care that enables people to achieve the highest quality of life.

At SVHM, we recognise that contemporary palliative care is not only for people at the end of their lives but also for those living with chronic life-limiting disease. Through clinical care, education, and research, SVHM promotes people's early access to information about palliative care, which supports them in living well and making informed choices.

Clinical Services

Caritas Christi inpatient palliative care unit

Caritas Christi was operating with 16 beds for 2024/2025 with our average length of stay being approximately 14 days. Demand for inpatient care remains strong and the multidisciplinary team has been working with increasing complexity with an increase in patients with NDIS eligibility of the past 12 months. Highlights have included meeting some wonderful people and their families and carers during a really important time of their life. We have also enjoyed the volunteer support provided by our bakers, our volunteer dog visits, companion visitors and our piano players.

Specialist palliative care clinics

SVHM continues to provide specialist palliative care clinics across the week for ambulatory patients; these can be accessed by medical referral by private or public patients, known or new to SVHM. We also have embedded supportive care clinics in partnership with other specialty services, including renal, heart failure, respiratory and now scleroderma. This dual approach has led to more timely palliative care input for patients with both malignant and non-malignant life-limiting conditions. In this 12-month period, CarerHelp also released new resources targeted at rural carers.

Palliative Care@Home

Organisationally, PalliativeCare@Home is part of our national St Vincent's Virtual and Home Division and falls under the management of our acute Hospital in the Home Program (HITH); however, the team remains clinically connected to all our other palliative care services and they have continued their role past the initial 2-year pilot. The team continues to manage patients in the home, to reduce an anticipated extended inpatient hospital length of stay, or to stabilise complex palliative care patients back into the community as an admitted @home patient. This begins the process of then connecting the patient and caregiver with the designated community palliative care providers for ongoing palliative and/or end-of-life care. Connections to other SVHM @home services, such as Aged Care, Residential-in-Reach, are optimising urgent palliative care advice and engagement in Residential Aged Care Facilities.

Palliative Care Consultation Service

The Consultation service provides comprehensive specialist palliative care advice and support across all SVHM campuses, including St John's Ward in Port Phillip Prison. It also extends to St Vincent's Private

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Hospital Melbourne Fitzroy and East Melbourne. The service continues to be well utilised with a steady increase in referrals each year, particularly supporting the increasing medical oncology and haematology clinical trial patient supports. Links to other services such as the Cancer nurse-led SURC (symptoms and urgent review clinic), continue to provide comprehensive and timely support for our Cancer Day Centre and post-treatment community cancer patients.

Regional Specialist Clinics & Call Line Support (Medical)

St Vincent's Palliative Care medical team has worked for over 18 years on building capacity in the Hume Region to support its growth and development. This success has seen a meaningful reduction in clinical support for the East Hume Regional Palliative Care Consultancy Team coming into 2025, while still providing face-to-face and telehealth support for the West Hume community teams. On-call over weekends and public holidays continues for the whole region, as well as supervision and support for medical trainees and nurse practitioners.

SVHM After-Hours Telephone Triage Service (Nursing)

Despite recruitment challenges post-COVID, SVHM continues to participate and collaborate nationally and internationally in palliative care clinical trials. Current trials open to recruitment include a medicinal cannabis trial for patients with advanced cancer, a pharmacogenomic study and an analgesic trial for patients with advanced cancer and neuropathic pain. Our trials ask practical and clinically relevant questions that have allowed the patient to inform and even alter practice.

Psychosocial Cancer Care (PSCC)

The PSCC team provides primary and secondary consultation expertise in the identification, assessment and management of complex psychological and psychiatric issues encountered on the cancer and end-of-life journey across Caritas Christi PCU and Fitzroy Campus inpatient units and outpatients. Consultation and management are provided with behavioural, psychological, psychopharmacological and systemic interventions. Alongside this, music therapy can be offered to patients and families to experience music-based methods in a therapeutic relationship whilst receiving inpatient care.

Across 2024/2025, the PSCC team has continued to provide clinical expertise in these inpatient and outpatient contexts, furthered by an increase in clinical psychology capacities. Alongside specialist clinical care, the team has continued to finalise the empirical analyses involved in a landmark trial utilising psilocybin-assisted psychotherapy.

SVHM After-Hours Telephone Triage Service (Nursing)

This year has been a particularly busy year for the After-Hours Telephone Triage Team (Nursing), who have managed just over 8,300 pagers from registered palliative care clients of approximately 20 community palliative care agencies throughout Victoria. ON any night, there are nearly 2,000 patients supported by this team in collaboration with their community palliative care team.

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These calls are taken from 1630 hours on a weekday afternoon until 0700 the next morning, and for most community services 24 hours a day on weekends and public holidays throughout the year. Most issues were triaged and resolved within 17 minutes of our nurses responding to the initial call. 10% of calls resulted in the after-hours nurse being contacted to do a home visit associated with uncontrolled symptoms or a deterioration in the patient's condition. A further 10% of calls resulted in ED or ambulance recommendation when symptoms could not be controlled or medical intervention was required. This Team supports the patients and carers at home and works with the community palliative care teams to reduce unnecessary admissions to their local ED/hospitals or call-outs whenever possible.

Education and Support

Carer Help

CarerHelp is a National Palliative Care Project from the Commonwealth Department of Health, Disability, and Ageing. The CarerHelp website is auspiced from within the Centre for Palliative Care. There have been over 24,000 users in the 12-month reporting period, with a strong reach into the general Australian population of families caring for someone at the end of life, and to help prepare them for the caring role. CarerHelp has developed new resources specifically for rural carers and offers online information sessions to carers across Australia.

Program of Experience in the Palliative Approach (PEPA) and Indigenous Program of Experience in the Palliative Approach (IPEPA) – Victoria

The PEPA/IPEPA programs are funded by the Commonwealth Department of Health and Aged Care (auspiced by QUT), with St Vincent's holding the contract for the Victorian program. In the past year, we have built on our deliverable requirements for workshops and placements by augmenting the standard education modules we offer with two new workshop topics. We are undertaking this as a pilot project called POP Up PEPA (PUP). It incorporates two four-hour workshops, "Compassionate Communication in Palliative Care" and "Exploring Loss and Grief in Palliative Care," both of which have been well attended, and participant feedback has been extremely positive.

We have delivered ninety of our core full-day workshop modules, with a focus on delivering these on-site in regional and rural areas to reduce the travel requirements of these participants. Our placement program has enabled 137 participants to undertake 2 to 4-day clinical placements in specialist palliative care, with a focus on regional and rural participants spending a percentage of this time with their local service and the remaining time with a large metropolitan service (if they wish).



Molly, Manager PEPA/IPEPA
with Imogen, IPEPA Project
Officer

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St Vincent's Hospital Melbourne Palliative Care Services



We are fortunate to have ongoing support from our 37 Host Sites across the state which continue to provide engaging learning experiences supported by our trained onsite specialist Mentor team that has grown in number to 55 across the state in the past twelve months. We welcomed Echuca Regional Health Palliative Care team as a new Host Site early in the year. We continue our partnership with Ambulance Victoria, which has resulted in all regional Paramedic Community Support Coordinators completing placements and undertaking Mentor training.



Kerrie PEPA Educator and Michelle PEPA/IPEPA
Admin Officer

Our new IPEPA Project Officer has been undertaking a range of community engagement activities in First Nations communities around the state. We have planned a "Roadshow" that will continue this engagement across the regions to build community awareness and understanding of palliative care using a culturally safe and inclusive "Yarning Circle" approach. Our small team continues to engage with the sector and wider community in Victoria to inform our innovation agenda and ensure our programs are relevant and build knowledge and skills in all aspects of a palliative approach to care.

Research Services

SVHM undertakes research that advances the aims of people affected by serious illness and their family carers. This research is conducted by the Centre for Palliative Care and Palliative Nexus Research Group.

- Improving the well-being of people with advanced cancer and their family carers: An effectiveness-implementation trial of an Australian dyadic digital health intervention (FOCUSau).
- Understanding end-of-life care for patients at St Vincent's Hospital, Melbourne.
- DEPART PAIN - A Phase III, international, multi-center, double-blind, dose increment, parallel-arm, randomized controlled trial of duloxetine versus pregabalin over 14 days for opioid unresponsive cancer-related neuropathic pain.
- TUMORAD A Phase I/IIa, dose escalation and dose expansion, first-in-human, open-label, multicenter, single-arm study evaluating the safety, tolerability, dosimetry, and early efficacy of [177Lu]Lu-SN201 in participants with progressive or treatment-refractory locally advanced unresectable, metastatic or recurrent solid tumors.
- The implementation of early palliative care for people with high-grade glioma: understanding effectiveness, costs and the role of telehealth.
- Personalising pain relief for people with cancer – the right opioid for the right person at the right time.

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- Trial optimising opioid use for cancer pain using precision medicine:
 - Optimising Opioid Treatment for Cancer Pain Using Precision Medicine
 - OPPtIC-2
 - Rapid Pharmacovigilance in palliative care: A prospective observational study – understanding the burden of adverse drug reactions and their impact on symptoms at end of life (Transfusion study).
 - Qualifying meaningful differences in nausea assessment.
 - Care Plus Extend: Regional and metropolitan collaborative models of delivery of early palliative.
 - Establishing criteria for early referral to palliative care for people with non-malignant disease.
 - Exploring the financial impact of caring for people with advanced cancer in the palliative and end-of-life setting: A co-design study with informal caregivers.
 - The COMET Program: Enhancing supportive care trials for community dwelling people with cancer.
 - REVITALISE – building clinical trial capability in regional Victoria.
 - Exploring the views of Thai nationals living in Australia around advance care planning
 - RESONANCE - A phase I/II double-blind, randomised controlled trial assessing effect of medicinal cannabis on quality of life and symptom control in advanced cancer.
 - Aquapro: Psilocybin-assisted psychotherapy for the treatment of depression and anxiety associated with life-threatening illness. Includes an emphasis on examining music related experiences.
 - Virtual reality's use with hospitalized patients and associated psychosocial outcomes: A mixed methods systematic review.
 - St Vincent's Hospital Melbourne Scleroderma Supportive Care Service.
 - The cost of cancer caregiving: piloting a co-designed, comprehensive economic tool for measuring the impact of cancer on informal caregivers.
 - Sustainability and end-of-life care?
 - Amplifying lived experience nationally to improve end-of-life for older Australians
 - Palliative Care Evaluation (PACE) – Community Connect, Palcare@Home.
 - Health economics in palliative care research program.
 - Program of Experience in Palliative Approach (PEPA) Victoria.
 - Improving palliative care in a correctional health setting, evaluating a new model of care.
 - Recognising palliative care needs in a general medical unit (SPICT).
 - Utilising the SPICT tool to improve recognition of the deteriorating patient in General Medical patients.

Publications

SVHM staff are involved in multiple conference presentations and publications in peer-reviewed journals.

PhD students

Our staff supervise multiple PhD candidates. Current topics include:

- Improving support for families in the Intensive Care Unit: Development of an evidence-based model of care that will improve the preparedness of family members for dying, death and bereavement in the adult ICU.
- Health equity in cancer care with marginalised groups.
- Responding to psychosocial distress in advanced cancer patients receiving radiotherapy.

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- Co-Producing Supportive Care Interventions for Young-Onset Colorectal Cancer
- Exploring the value of palliative care
- A qualitative longitudinal study examining perceptions, attitudes and experiences of "Singing for Inspiration".
- Exploring the benefits of a singing for breathing program and other non-pharmacological approaches for people with severe non-malignant lung diseases.
- Exploring the nature and function of hope in the setting of advanced illness.
- Delivering palliative care in Sri Lanka: Understanding what a good death means and empowering the healthcare workforce to provide it.
- Ethical and epistemic implications of emerging trends in the cancer clinical trial landscape.
- Exploring and understanding shared decision-making in major surgery.
- Caring for carers at discharge: Improving hospital to home transitions at end of life.
- Improving palliative care delivered to people with HD (Huntington's disease)
- Evaluating a food-based alternative to a meal-replacement very-low-energy diet
- Perioperative Pharmacogenomic Testing: Feasibility and Improvement in Postoperative Recovery
- Experience of living with, and caring for SSC
- The Use of Mirtazapine for the Management of Side Effects of Chemotherapy in Cancer Treatment: A Systematic Literature Review
- Mental Health in Palliative Care: Thematic analysis of a psychiatrist's and an art therapist's clinical reflexive journals (with Tang Tock Seng Hospital, Singapore; 2019 -)
- "Take the tablet or don't take the tablet?"– Experiences and perceptions of people with cancer on medication adherence and treatment side effects: a qualitative study.
- Use of Design Science Research for Informing the Design and Development of a Mobile Solution to Improve Medication Adherence in Cancer.
- Music therapy in palliative care: support to family caregivers for the improvement of the quality of life.
- Healthcare professionals' attitudes towards and knowledge of the clinical application of classic psychedelics for people with advanced illness.
- Qualitative research training and inter-rating of findings in one study on developing a supported self-help program for late life depression amongst home aged care recipients in Australia.
- The Psychosocial Impact of Cancer of Unknown Primary: A Narrative Literature Review.
- Outcome measurements in different palliative care settings

VOICES for palliative care

- Our palliative care consumer advocacy group (partnership between CPC & UoM) continues to evolve thanks to our dedicated group of people (n=15) with lived experience of serious illness

Michael Bramwell
Operations Manager, Palliative Care Services

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Bolton Clarke



Bolton Clarke is Australia's largest independent not-for-profit aged care provider, supporting more than 130,000 Australians through home and community support (HCS), retirement living and residential aged care. In 2025, Bolton Clarke is celebrating 140 years of caring for Australians. Through a generalist approach to palliative care for clients and residents with a life-limiting illness and for their carers and families, Bolton Clarke provides ongoing support, monitoring, and escalation of clinical deterioration; working collaboratively with specialist palliative care services when symptoms are complex or carers require further support.

A Nurse Practitioner - Palliative Care provides leadership and expertise across the organisation, and works closely with the Bolton Clarke Research Institute, Learning and Development and Clinical Safety and Quality teams to strengthen systems and processes and to enhance a generalist approach to palliative care. Palliative care quality improvement initiatives over the past financial year have included:

- Further development of client outcome indicators and reports
- Client record audits, and
- Implementation and evaluation improvement strategies – HCS Victoria; including the provision of staff education and support and strengthening relationships with specialist palliative care services

In August, Bolton Clarke presented 'Leading the way: specialist palliative care nursing within homecare' at the Australian College of Nursing Forum in Cairns.

Bolton Clarke works in a timely manner with clients and carers to explain upcoming changes to aged care programs and ensure appropriate care delivery in the community setting continues.

Kylie Walters
Clinical Nurse Consultant

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Eastern Melbourne Primary Health Network



Eastern Melbourne Primary Health Network (EMPHN) is a not-for-profit organisation funded by the Australian Government to increase the efficiency of medical services, reduce fragmentation of care and improve health outcomes for everyone, especially the most vulnerable in our community. EMPHN is one of 6 PHNs in Victoria and 31 PHNs nationally.

Greater Choices for At Home Palliative Care

Greater Choices for At Home Palliative Care (GCfAHPC) is an initiative by the Australian government that provides funding to Primary Health Networks (PHNs) to enhance and expand palliative care services in the home and community settings. This program aims to improve access to high-quality care for people with life-limiting conditions who prefer to remain at home by coordinating efforts with general practices and community health services.

EMPHN, along with all PHNs nationally, will continue to receive funding (2025-2029) to deliver the Greater Choices for At Home Palliative Care Measure. This program aims to increase awareness and facilitate access to safe, quality palliative and end-of-life care at home.

EMPHN works with the EMRPCC and its partners to educate and support palliative care services in primary health and community care. This program aims to raise awareness and ensure timely, appropriate care, thereby reducing unnecessary hospital visits. EMPHN continues to enhance the capacity of the primary care workforce and improve coordination between primary care and palliative care providers.

Staffing Update

Over the past year, our Primary Care Innovation Team has experienced several changes. Anne Gravette was appointed as Program Manager, with Alisha Jackson acting in this role for the remainder of the year. Sonya Imbesi resigned in July, leading to further staffing changes. Recruitment was delayed until September due to uncertainty about the program's funding beyond 30 June 2025. In October, Amanda Noble was appointed to the Program Facilitator role and continued with the scheduled activities.

Key Highlights for 2024/2025

Activities over the past 12 months have focused on three key areas:

- Education and training
- Sector engagement, and
- Information sharing and data collection and analysis.

Education and Training

A Community of Practice (CoP) for Palliative Care in General Practice commenced in August. EMPHN in partnership with EMRPCC and Eastern Palliative Care, launched a community of practice for palliative care education aimed at promoting best practice, building capacity and supporting professional development for GPs.

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Eastern Melbourne Primary Health Network



Six sessions were held between August and May with a total of 38 GPs in attendance. Sessions were delivered as an in-person event held at EPC with guest speakers covering a range of topics:

- Palliative Care System Funding in Victoria
- Where to get Help from Specialist Palliative Care
- Minimising barriers to timely access to medical care for patients and their families living at home with death & dying
- Palliative Care in Residential Aged Care Homes, including the role of palliative care for those living with Dementia.
- Communications Skills Workshop for essential conversations in palliative care
- Chronic pain in palliative care: the role of opioids and what to do when they are not working.

Key learning outcomes included:

1. Explain key concepts in palliative care relevant to GPs. This learning outcome was consistently met by the participants, with the majority indicating that they entirely met this objective.
2. Create a learning community for practitioners to share knowledge, resources, and support. This outcome was also largely met, with most participants reporting that they entirely met this goal.
3. Apply effective communication strategies in palliative care. While many participants entirely met this outcome, there were a few instances where it was only partially met.
4. Apply evidence-based practices in palliative care to patient care. This outcome had a mix of responses, with some participants entirely meeting the objective, while others only partially met it or did not meet it at all.

Overall, the responses indicate that most participants did meet the learning outcomes, with some variability in the application of evidence-based practices in palliative care. All participants supported continuing bi-monthly palliative care education sessions, and all agreed that the CoP for Palliative Care was relevant to general practice.

Sector Engagement and Information Sharing

Pharmacy Engagement: Palliative Care Access to Core Medicines (PCAM) project. EMPHN continues to support the onboarding and engagement with community pharmacies to agree to stock the four medicines for use with home-based palliative patients in the terminal phase who require urgent symptom relief.

- Currently, EMPHN have 88 community pharmacies listed on the interactive MAP with 19,179 views
- The PCAM project aligns with the new National Core Community Palliative Care Medicines List developed by caring@home with key national stakeholders.

Feedback from participating pharmacies:

- “Sometimes we are the last point of contact for patients who have gone to several Pharmacies, so we are more than happy to assist and think the program is fantastic”
- “Gratitude from family members in this emotional time”

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Eastern Melbourne Primary Health Network



EMPHN continues to share the new Palliative Care Foundation Training Program for Pharmacists in our catchment. This equips pharmacists in all practice settings with the foundation knowledge, skills and compassion needed to provide exceptional palliative care support to patients through safe and quality use of medicines.

EMPHN palliative care and digital health team members participated in the Eastern Palliative Care Annual Aged Care Expo to promote EMPHN resources and programs to support aged care homes across the Eastern Melbourne catchment. This opportunity highlighted the shared education resources and programs in palliative care to support RACH staff.

In February, EMPHN hosted a webinar, 'Working Together: Enhancing Palliative Care in General Practice' to build palliative care capacity and improve patient support in general practice and residential aged care homes in collaboration with Eastern Palliative Care, Eastern Health Advance Care Planning Team, Victorian Palliative Care Advice Service and a local GP Practice (43 people registered and 15 attended). The top three palliative care further education topics suggested by participants were: Palliative care in aged care and dementia; Communication skills in palliative care; and Core medicines palliative care information.

Data Collection and Analysis

The data sharing agreement between Eastern Palliative Care and EMPHN was finalised, and data from July 2018 to June 2023 was received in early 2024 for analysis. The generated data has revealed palliative care referrals across the EMPHN catchment area; identified the top five general practices referring patients to palliative care; and provided patient statistics and diagnoses. These insights provide EMPHN with opportunities to collaborate with specific general practice providers to further map palliative care services.

Implementation of the 40 new palliative care pathways, including Clinical, Referral, and Palliative Care Resource pages, has been actively promoted during all palliative care education sessions and via EMPHN communication channels. There were a total of 2,697 views across all palliative care HealthPathways pages in 2024/2025, with the top three being Pain medications in palliative care; Pain management in palliative care; and Symptom control in palliative care. Including the new reflective learning component of HealthPathways contributes to CPD hours to assist general practitioners.

Amanda Noble
Program Facilitator – Aged and Palliative Care



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