Australian Government

**Treasury Consultation Hub**

27 January 2021

**ANZSPM Pre-Budget Submission 2021-2022**

The Australian and New Zealand Society of Palliative Medicine (ANZSPM) welcomes the opportunity to make this pre-budget submission.

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-limiting illness. Our members are medical practitioners who provide care for people with a life-limiting illness and include palliative medicine specialists, palliative medicine training registrars and other doctors with an interest in palliative care such as general practitioners, oncologists, haematologists, intensivists, psychiatrists and geriatricians.

**ANZSPM writes in support of the Palliative Care Australia (PCA) Pre-Budget Submission**, which speaks more broadly to the National Palliative Care Strategy 2018 and which addresses the broad unmet needs of Australians living with a life-limiting illness. PCA puts forward a compelling and comprehensive case for a significant new government investment in palliative care. The package is summarised below.

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| **Key Initiatives** |  |
| Increase palliative care funding in community-based settings | $240 million per year |
| Increase palliative care funding in hospitals | $50 million per year |
| Increase palliative care funding in residential aged care | $75 million per year |
| **Supporting Initiatives** |  |
| Appoint a Palliative Care Commissioner to coordinate and champion palliative care nationally for older Australians | $1.1 million per year |
| Establish National Minimum Data Sets for palliative care | $10 million over three years |
| Develop a National Palliative Care Workforce Strategy | $750,000 |
| Establish a Palliative Care postgraduate scholarship programme | $20 million |
| Investment in palliative care research | $20 million over three years |
| Development and Implementation of a National Disaster Grief,  Bereavement and Mental Health Framework | $20 million over three years |
| Establish a National Grief Awareness Day | $300,000 over three years |
| Establish an education program on quality use of opioids for cancer pain and pain management in palliative care patients | $2 million over three years |
| **Broader health and Aged Care system Initiatives** |  |
| Fully fund the recommendations of the Royal Commission into Aged Care Quality and Safety | |
| Fully fund the recommendations of the Medicare Benefits Schedule (MBS) Review Taskforce | |

We seek to also inform the Australian Government of the critical areas of investment from the perspective of those clinicians who have chosen to specialise in the delivery of palliative medicine. From the perspective of our membership, we list below the key priorities that, if addressed, would significantly contribute to the Australian Government’s strategic goal of quality palliative care, as and where it is needed.

* Addressing palliative medicine workforce shortages
* Improving palliative care data
* Identifying the needs of the palliative care population as requiring of special consideration in policy and funding for the quality use of medicines
* Investment in research to develop innovative palliative care models, with particular attention paid to optimising transitions between places of care and achieving equity of access and high standards across the wide range of care contexts (home-based, aged care facilities, and regional, rural and remote care delivery; culturally safe palliative care for Aboriginal and Torres Strait Islander Australians; and palliative care in culturally and linguistically diverse communities).
* Investment in research to build the evidence base for palliative interventions.

These critical areas of investment are addressed by PCA’s pre-budget submission, which also makes recommendations for service-focussed and underpinning investments at a time where great need has been identified in this aspect of Australia’s health system.

We also commend PCA for its work with KPMG to rigorously explore the economic case supporting its pre-budget submission, and we commend PCA’s ***Palli8 plan***,an eight-point plan for palliative care in aged care.

ANZSPM is committed to working with PCA, the Royal Australian College of Physicians, industry and government towards achieving significant positive change in this area of high priority for Australians.

We are available for further advice if and as needed.

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Yours sincerely,

A picture containing insect, tea ball

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A/Prof Leeroy William Janice Besch

President Chief Executive Officer