

Friday, 17 December 2021

**Eastern Palliative Care
Association Incorporated**

ABN 62982157121 | A0036991M

Level 1, Building 2
630 Mitcham Road
Mitcham Victoria 3132

PO Box 2110
Rangeview Victoria 3132

☎ 1300 130 813

☎ (03) 9873 0919

✉ epccip@epc.asn.au

🌐 epc.asn.au

Dear whom it may concern

Federal Budget Submission

Thank you for this opportunity.

I commend the Palliative Care Australia, Federal Election Statement as a clear guide on how to support palliative care in Australia.

Eastern Palliative Care Association Incorporated (EPC) is a community based service supporting more than 500 clients every day – all of whom know they are going to die soon. We experience more than 140 deaths per month and our teams support carers for 13 months after the death of the client. As a community palliative care provider in Melbourne, we understand the need to support carers when someone in their family is known to have a life limiting illness.

In early December 2021, EPC supported 90% of clients to die at home. The Dying Well Report (Grattan Institute, 2014) reported that only 14% of people die at home yet more than 70% of people express a desire to die at home.

Since COVID began in March 2020 we average more than 60% of our clients dying at home. Prior to COVID this figure was 48%. So why the difference?

People do not want to go to hospital since COVID and it has become the community services' work to support clients and carers in order for them to be able to stay at home. Supporting people to die at home is so much more cost effective than hospitalisation and it produces excellent outcomes for clients and carers, but carers need increased access to support in order to be able to manage care until death.

Carers need increased respite and more visits by health professionals. EPC has used its reserves to support this increase in care however this is not sustainable for us into the future.

EPC also supports clients in residential aged care facilities (RACF) and disability homes to be cared for appropriately until death. We work across more than 135 RACF's and we have a dedicated experienced team of health professionals that can support RACF's to provide appropriate and supportive care to both the client and family. Our data, as provided to the Palliative Care Outcome Collaborate (PCOC), as funded by the Federal Government, shows that we achieve 18 of 20 benchmarks for clinical care. Clients in RACF's referred to EPC have much improved outcomes.

We seek the following:

- Increased support for clients.
 - Clients who are dying need improved timely access to Centrelink, My Aged Care, and NDIS.
- Increase support for carers
 - Carers often need to put their life on hold. They need to be able to take time out of work or stop work if care is to be prolonged. Carers are often limited in their ability to be able to get away from the home

Palliative care. Living well every day.



Eastern Palliative Care is a partnership between the Order of Malta, Outer East Palliative Care Service Inc. and St Vincent's Hospital (Melbourne) Ltd



Eastern Palliative Care acknowledges the support of the Victorian Government

and increased ability to have paid carers in the home could increase the quality of life of carers and also their longevity in caring. This can also serve to minimise their bereavement risk post death.

- Increased access to respite. EPC has found that respite by a registered nurse is the single most beneficial element which supports carers – they know the person who is dying will be well looked after. Care during end of life is often complex.
- Increased access to paid medications. Palliative care medication can be expensive. Families can at this time suffer financially and some medication are just too expensive
- Increased access to home equipment to make caring easier and safer. Without equipment and training in the appropriate use of the equipment carers cannot continue.

The desire to want to die at home is strong in the Australian community. It is cost effective to deliver care at home when support is provided to family and carers. We seek improved recognition of the benefit of home based care and in particularly home based specialist palliative care.

Yours sincerely



Jeanette Moody
Chief Executive Officer
Eastern Palliative Care Association Incorporated