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National Evaluation of the GCfAHPC Program

Midpoint Activity Catalogue

Updated April 2025

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How to read this document

This document describes the activities and partnerships undertaken by Primary Health Networks under the Greater Choice for At Home Palliative Care Program. This document contains point-in-time information that should be read with the purpose of gathering insights and ideas for palliative care activities. The intention is for this document to evolve over the duration of the Program.

As part of the Midpoint Evaluation process, PHNs submitted an extensive list of activities undertaken in each of their regions. To maintain the PHN Activity Catalogue as a refined reference tool of the types of activities, partnerships, barriers, and solutions across the GCfAHPC Program, similar activities delivered by a PHN have been synthesised and consolidated.

This document should be read in conjunction with the Midpoint report on the National Evaluation of the Greater Choice for the At Home Palliative Care Program, to understand the extent of strengths, nuances and challenges faced in the design and implementation of activities

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# Scope and Assumptions

## Scope

The content included in the following PHN activity tables highlights PHN activities PHNs at Midpoint of the GCfAHPC Program Evaluation and relevant activity partners.

## Assumptions

* All effort was made to ensure the information provided in this document is up to date and correct at the point the activity tables were finalised for Midpoint (i.e. April 2025).
* PHNs were consulted on numerous occasions to provide input / updates and given multiple opportunities to finalise any outstanding information.
* PHNs were provided the opportunity to validate their catalogues before publication (should the documents or any version of the documents be publicised).

Section 1:

ACT & NSW PHNs



# Summary of ACT & NSW PHN activities

The table below shows which categories PHNs are undertaking activities in at Midpoint. A ‘tick’ means the PHN is undertaking at least one activity within this category.

| PHN | Workforce education and awareness | Awareness in the community | Palliative care medicines | Priority populations | Coordination and integration |
| --- | --- | --- | --- | --- | --- |
| Workforce capability | RACHs | GP Quality Improvement | Service mapping and pathways | Models of shared care |
| Australian Capital Territory  |
| Australian Capital Territory (Capital Health Network)  | ü | ü | ü |  |  |  | ü | ü |
| New South Wales |
| Central, Eastern Sydney  | ü | ü | ü | ü |  | ü |  | ü |
| Hunter New England, Central Coast  | ü | ü |  | ü |  |  | ü |  |
| Murrumbidgee  | ü | ü | ü | ü |  | ü | ü |  |
| Nepean, Blue Mountains  | ü | ü | ü | ü |  |  | ü |  |
| North Coast (Healthy North Coast) | ü | ü |  | ü |  |  | ü |  |
| Northern Sydney  | ü | ü |  | ü |  | ü |  |  |
| South Eastern NSW (Coordinare) | ü |  |  | ü |  | ü | ü | ü |
| South Western Sydney  | ü |  |  | ü | ü | ü | ü |  |
| Western NSW | ü |  |  | ü |  |  | ü | ü |
| Western Sydney (WentWest) | ü | ü |  | ü |  |  | ü |  |

# Australian Capital Territory PHN

## Australian Capital Territory PHN (Capital Health Network)

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Workshops for health professionals and practitioners**: on key national palliative care projects such as ELDAC, PACOP and PEPA. Topics also include palliative care for General Practitioners (GPs), Grief and Bereavement, Mastery of Breathlessness (Baseline), Advance Care Planning (ACP), System Management and palliative care in residential aged care (Baseline). | * Specialist Palliative Care teams
* ACT Palliative Care
* PEPA
* Advance Care Planning ACT
* Health Care Consumers Association
* RACGP
* University of Technology Sydney (UTS) (Baseline)
* Westmead Respiratory Team Southside Physio (Baseline)
 |
| **Creating guidelines**: for paramedics in managing palliative care. | * ACT Ambulance Service (ACTAS)
 |
| **Developing a communication and social media plan**: to raise awareness of palliative care activities, projects and resources amongst the primary health care workforce. This has been done through the promotion of events and workshops.  | * National Palliative Care Projects (PEPA, ELDAC, PACOP, Quality of Care Collaborative Australia, Advance Care Planning Australia etc.)
 |
| **Mentoring and collaboration** of community palliative care nurse specialists. | * Canberra Health Services -Community Care Program
 |
| **Formation of an ACT RACH Community of Practice (CoP): Created for RACH managers** Activity ceased in December 2023. | * None reported
 |
| **Supporting implementation of PACOP in RACHs**: This involves pairing RACHs with GPs to support with palliative care specific education in RACHs.Maintain regular collaboration with RACHs stakeholders. | * PACOP
* PEPA
* PalliativE Aged Care SpEcialists (PEACE) team
* ELDAC
* ACTAS
* PEACE team at Clare Holland House
* Community Pharmacy
* Dementia Australia
 |
| **Implementing a Palliative Care in General Practice (PCiGP) program**: a collaboration with GPs to develop a Quality Improvement (QI) After Death Audit process. CHNPHN is currently studying After Death Audits provided by general practices to decide how best to develop and streamline this process.  | **Baseline*** PACOP
* Murrumbidgee PHNACT Hospital GP Liaison Unit (Calvary and Canberra Health Service)

Midpoint* PCOC
* Participating ACT GPs
 |
| **ACT Breathlessness Intervention Service (ABIS) Pilot**: A program designed to support patients suffering with persistent breathlessness due to chronic disease with physiotherapist and nurse-delivered home visits. The program aims to support patients in self-managing their breathlessness through non-pharmacological interventions aimed at both patient and their carer. The pilot will conclude in December 2024.  | * Southside Physio (pilot delivery)
* University of Technology Sydney (pilot evaluators)
* Canberra Health Services Respiratory Physicians
* ACT Specialist Palliative Care
* GPs (16 practices)
 |

# New South Wales PHNs

## Central and Eastern Sydney PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education Packages for GPs**: Developing packages for GPs as part of Continuing Professional Development to improve their knowledge and awareness for supporting palliative patients.Events include: Management of breathlessness, opioid prescribing, management of end-of-life medications, two webinars on VAD and a CPD event on Dementia and Palliative Care and preparing for death and understanding grief. This webinar was cancelled last minute by Dementia Training Australia due to presenter illness and has been rescheduled for March 2025. Further session planned for April 2025 | * SLHD
* SESLHD
* St Vincent’s Hospital
 |
| **Care worker education program**: A program designed for Aged, Home and Disability Care workers to improve their palliative care knowledge and skills. | * HammondCare
 |
| **Education masterclasses**: A program designed for Registered and Enrolled nurses to build the capability and confidence of nurses to provide palliative care. The program involved in-person (4 courses) and online (8 courses) sessions for practice nurses and nurses who work in RACHs and in-home settings.This program has recently been extended to June 2025.  | * University of Technology, Sydney (UTS)
 |
| **Development of a quality improvement toolkit**: (palliative and end-of-life care) for general practice. The toolkit has been developed leveraging content from Brisbane South PHN, tailored to the needs of the CESPHN region. | * BSPHN
 |
| **‘Live the Life you Please’ film promotion**: aimed at improving death literacy and ACP awareness in the community. Registration is typically high, but actual attendance is approximately 60%. | * Palliative Care Australia
* CESPHNs Healthy Ageing Hubs in Gymea and Newtown.
* Hazlehurst Arts Centre
* The Ritz cinema
* SESLHD, Randwick and Waverley Council and Metropolitan Memorial Parks
 |
| **Development of a Palliative Care Consumer Resource**. An information sheet designed to share information on what palliative care is, how to access it, and help and supports available to the community. | * None reported
 |
| **Hosting community events**: Events aimed at increasing awareness of palliative care including hosting Death Café events, Dying to Know events and Death Festival events | * SESLHD
* Randwick and Waverly Councils
* Metropolitan Memorial Parks
* The Departure Coach and the Death Wife (Death Doula)
* Yvonne Coburn (Palliative Care Australia’s National Champion)
 |
| **Weekly Newsletter**: CESPHN weekly newsletter (Sydney Health Weekly) has been used to promote a variety of Greater Choice palliative care initiatives including CPD events, community events, local pall care service development (establishment of community facing multidisciplinary Supportive Care Clinics run from three hospitals) | * None reported
 |
| **Intellectual Disability Palliative Care Project**: aims to improve afterhours access to palliative care services/supports for people with a neurodisability living in Specialist Disability Accommodation (SDA) and Supported Independent Living (SIL)properties. A nurse will be employed to engage with SDA and SIL properties to assess palliative care competence and awareness of available services. The project will also upskill the community palliative care staff working in SESLHD in providing care for people with intellectual disability and improve knowledge/skills of the disability support workers. | * SESLHD
* Calvary Health Care
 |
| **CALD Death Literacy Project**: aimed at providing education to CALD organisations through a partnership with Dr. Kerrie Noonan. CESPHN will then support those organisations to provide death literacy education to their communities.  | * Dr Kerrie Noonan
 |
| **Developing an online palliative care service directory**: The service directory contains a category for palliative care, within palliative care there are subcategories for priority populations (by LGA and across sectors) and navigation 1-pagers for the community (HealthPathways for patients). | * Bright (web developer)
 |
| **CESPHN Palliative Care Advisory Committee**: CESPHN have a palliative care advisory committee which meets quarterly to brainstorm local Greater Choice palliative care initiatives. | * None reported
 |

## Hunter New England and Central Coast PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Adapting MBS guides to assist GPs to better support their palliative patients**: MBS guides from other PHNs can be adapted as a guide for GPs on relevant MBS items for supporting palliative patients. | * Local PHN GP Advisor
 |
| **Established two Project ECHO (Extension for Community Health Care Outcomes) Hubs**: One has been developed for Central Coast and one for Hunter New England, to increase knowledge of palliative care among health professionals locally through virtual mentoring sessions.Project ECHO is a telementoring program designed to create virtual communities of learners (i.e. service providers and subject matter experts) to share clinical challenges, relevant resources and learnings.  | * Hunter New England LHD
* Central Coast LHD
* General Practitioners
 |
| **Palliative care event**: HNECCPHN Palliative and End of Life Care Symposium for health workforce in the region held 13-14 June, 2024 including GP dinner and full day of education. | * Hunter New England LHD
* Central Coast LHD
* Community Service Providers
 |
| **Online campaign**: Launched for health care professionals through the PHN website and social media channels for 2023 National Advance Care Planning Week. This included resources and information on how to start conversations, the responsibilities of health professionals, and key links. | * Advance Care Planning Australia
 |
| **Translational research project**: Designed to improve death literacy of allied health professionals on the Central Coast. The research will involve implementation of the Death Literacy Index as a baseline dataset. Participants attending workshops will then use this baseline dataset to develop bespoke death literacy education responses based on identified gaps. The project includes both NSW Health Clinicians and Primary Care Clinicians working in private practice. | * Central Coast Research Institute / Central Coast LHD
* University of Newcastle
 |
| **Education and training**: for RACH nurses on the use of PHN commissioned syringe drivers (for pain medication dispensing) in RACHs to reduce avoidable hospital presentations. A12 Months Syringe Driver project evaluation underway. | * Central Coast LHD
* Hunter New England LHD
* Medilogic (device provider and trainer)
 |
| **Supporting implementation of PACOP**: implementation is supported among RACHs, and RACHs not part of PACOP are being informed of the benefits of participating. | * University of Wollongong (UoW) / PACOP Facilitators
 |
| **Development of community education/awareness video**: “What is palliative care?”Youtube link: https://www.youtube.com/watch?v=lxjbyI5wTPQ | * Hunter New England LHD
* Community service providers
 |
| **Development of HNECC PHN Palliative and End of Life Care Resource Webpage**: The resource is a landing page for work undertaken as part of the Program, including resources and educational material. The webpage contains subpages targeted at specific cohorts including health care professionals, the general community, carers, First Nations people etc.  | * None reported.
 |
| **Palliative Care Community Awareness event**: Hosted on May 23rd during 2024 National Palliative Care Week. Face to face education event held for consumers and general community members to improve health and death literacy and link with local services and resources. | * Hunter New England LHD
* Community Service Providers
 |
| **Development, commissioning and implementation of new EOLC coordination model in primary care**: The non-clinical service is designed to assist people with non-malignant life limiting illness aged over 55 years with limited financial or family support to effectively coordinate their EOLC and documentation, improve their death literacy, and manage referrals to the relevant palliative care professionals. Baptist Care is trialing use of the new model to enable people to undertake end of life planning.**The webpage for the pilot launched in 2024**: End-of-Life Care Coordination ServiceUpdated webpage link here: [Final Footprints Program | BaptistCare](https://baptistcare.org.au/home-care/end-of-life-care-coordination-service/) | * Baptist Care (provider)
* University of Newcastle (formal evaluators)
 |

## Murrumbidgee PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Embedding and expanding PCOC in general practices:** To improve palliative care outcomes and improve early detection of non-malignant palliative care patients. | * PCOC
* Participating GPs
 |
| **Development of the Medication Management toolkit for Palliating In Place (MM-PIP):** The MM-PIP was developed to improve timely access to safe, quality palliative care medicines for residents living in RACHs. | * Evo Health
 |
| **Partnered with PainChek to provide access to the PainChek app for RACHs in the region**: PainChek is a validated clinical software tool that accurately assesses pain in verbal and non-verbal residents to calculate reliable and objective overall pain scores, which supports the delivery of effective pain management.  | * Pain Chek
 |
| **QI Death Audits**: Participating practices will conduct an expected death audit quarterly and undertake a QI activity to address issues identified in the audit process. As part of the QI activities, participating practices utilise the GoShare platform to disseminate a bereavement risk assessment tool to families and carers.  | * Participating GPs
 |
| **Promotion of Compassionate Communities**: Using the Latrobe University Healthy End of Life Project (HELP) framework to improve the quality of life for carers, who care for someone at home with a life limiting illness, particularly dementia. This includes, for example, mapping caring networks who can help with meals, grief services and support for carers. | * None reported
 |
| **Carer education workshops:** Support for carers of people living with Dementia – commissioned to provide 12 workshops in regional settings. The program aims to assist carers of people living in the community with dementia, to prevent and detect conditions that are associated with hospitalisation and to support people to live well longer, in their own communities. | * HammondCare
 |
| **Delivery of ‘Masterclasses’ and workshop:** Aimed at community members, and health professionals, on ACP, identifying care planning outcomes and the importance of self-care. | * None reported
 |
| **Local services directory update:** Reviewing and updating the relevant services and local clinics in the previously developed palliative care local directory resource for community members, made in partnership with Calvary Palliative Care Enhancement Council. | * Calvary Palliative Care Enhancement Council
* Murrumbidgee LHD
 |
| **Online Dementia Resource:** Designed to raise awareness of dementia supports available to access for members of the community in the region. | * Community organisations
 |
| **Palliative care service promotion:** Working with community groups, general practices, local health services and Aboriginal Medical Services (AMSs) to raise awareness of the palliative care services, supports, and events within the region. | * Community groups
* Elders Groups
* AMS
* MLHD
* Home Care Providers
* RACHs
 |
| **Consulting with local Aboriginal and Torres Strait Islander community** to improve access to palliative care at home through Murrumbidgee wide consultation. Includes developing an Aboriginal and Torres Strait Islanders Grief and Bereavement brochure  | * Local Aboriginal and Torres Strait Islanders groups
* Elders Groups
* AMS’s
 |
| **Dementia support:** Working with HammondCare to develop the Dementia Capability Building program for people living with dementia. The program aims to improve carer capacity in caring for people living with dementia. | * Hammond Care
 |
| Multi-Disciplinary Approach to Care Planning: Funding a general practice to host monthly palliative care multi-disciplinary team meetings. This meeting aims to ensure that all health professionals who care for a patient can discuss all aspects of the patient’s physical and supportive care needs, divide roles and responsibilities, and collaboratively plan appropriate care and referrals. MDT meetings have been expanded to additional general practices, fostering collaboration among healthcare professionals and improving care planning for palliative residents.  | * Participating GPs
 |
| **GoShare Collaboration:** Partnered with GoShare to provide end of life resources for GP’s and general practice including localised bundles. | * GoShare
 |
| **Community Engagement:** Supporting local partners with End of Life support groups, alliances, including supporting Calvary Palliative Care Alliance to publish their palliative care directory (riverina). Ongoing discussions with LHACs on access, pathways decision making etc. | * Calvary Palliative Care Alliance
* Berrigan Finley Dementia Alliance
* Local LHACs
 |

## Nepean Blue Mountains PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Palliative Care Grand Rounds:** Grand rounds were held for GPs and GP Registrars within each LGA, led by a staff specialist at NBMPHN, for practices participating in the QI Program to advise one another, look at case studies, and conduct retrospective ‘lessons learned’ discussions on how to improve palliative care delivery.An additional education session was held online on 19th September 2024 with a new title ‘Enhancing Palliative Care: A collaborative approach’. On registration, GPs select priority topics the GPs would like to receive education and training on. NBMPHN will look to host another Grand Round in 2025.  | * Nepean Blue Mountains LHD Supportive and Palliative Care Team
* Participating GPs
 |
| **Palliative care education and training:** Delivered to nurses in RACHs, including on the use of syringe pumps (online training modules available through PallConsult) to reduce avoidable hospital presentations.For the RACHs, Advance Care Planning was promoted and information distributed from Advance Care Planning Australia and ELDAC. | * Nepean Blue Mountains LHD Supportive and Palliative Care Team’s nurse practitioners and clinical nurse consultants
* Participating RACHs
 |
| **Conducting QI Programs with GPs**: the program includes raising capability around ACPs and ACDs. | * Nepean Blue Mountains LHD Supportive and Palliative Care Team
 |
| **Community education:** A suite of resources and activities supporting community education, awareness and decision making through ongoing education on ACP conversations and completing ACDs. This includes:* Hosting ACP and ‘Live Well with Dementia’ events
* The development of palliative care information flyers
* Local Council hosted community events to raise awareness
* Information sessions with palliative care volunteer groups.
* Created and distributed Palliative Care information sheets for the region
* Created and distributed one-page information dementia flyers for each LGA
* Prepared and handed out Death Literacy survey at community events
 | * Local councils
* Community organisations
* Service providers
 |
| **HealthPathways review:** Review of 21 adapted and 8 new palliative care HealthPathways | * GP Clinical Lead for HealthPathways
* GP Clinical Editors
 |

## North Coast PHN (Healthy North Coast)

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Webinar series for health care professionals designed to build service provider capacity**. Topics include:* Advance Care Planning,
* A palliative approach,
* Supporting an expected death at home,
* Identifying deterioration and anticipatory planning.
* Care, grief and bereavement
* Chronic conditions and palliative care
* Carer’s NSW supporting carers
 | * Palliative care specialists, regional service and support providers and Primary Care Providers
 |
| **Education events**: PEPA workshops for Home Care Providers to help develop capabilities in providing a palliative approach to care. | * PEPA
* Community Aged Care Providers
 |
| **Implementation support**: Support implementation of PACOP in RACHs. Participation in the ELDAC RACH Linkages program. | * PACOP
* ELDAC
 |
| **RACH cross-sector meetings**: Designed to promote awareness and connect RACH staff with palliative care resources, information and education opportunities. | * LHDs
* NSW Ambulance Service
* Participating RACHs
* Palliative Care Specialists
* National Palliative Care projects (PEPA, PACOP, ELDAC etc.)
 |
| **Health workforce promotion and awareness activities**:Participation in and presentations to the Northern Rivers Community Aged Care providers and CoPs Social media activity to coincide with significant palliative care eventsRegular articles in HNCPHN Community Practitioner NewsletterPCNSW facilitated online PalliLearn sessions on topics including, ACP and ‘what is palliative care’? | * Community Aged Care Sector providers
* Local Council
* Primary Care Providers
* PCNSW
 |
| **Consumer resource**: Consumer Dementia Booklet developed for the North Coast community, including key steps, information, local services and clinics that focus on dementia. Palliative and end-of-life care considerations and ACP embedded in the comprehensive, localised resource for those embarking on the dementia journey and their carers. | * Port Macquarie and Ballina Dementia Friendly Community Alliances
* Dementia Australia
* MNC local health districts, and aged care service providers.
 |
| **Community awareness and education events**: Hosting of Community Conversation events including: What is palliative care? Planning for end of life. Meet your local palliative care team and the importance of ACP. | * PCNSW
* Aged Care providers (community and residential)
* LHD Specialist palliative Care teams
* NSW Trustee and Guardian
* Community and volunteer organisations – Country Women’s Association, RSL, LilliPilli Ladies Kempseyn
 |
| **Consumer resource**: Develop a palliative care consumer journey booklet including key steps, information, and local service contacts.  | * Northern NSW Health Literacy Project (part of HNCPHN)
* LHDs
* Primary Health Care providers
* Palliative care service and support providers
 |
| **Palliative care webpage**: Developed and published a palliative and EOLC webpage for the North Coast community that includes support services, key information and resources, and ACP information.  | * None reported
 |
| **Building Compassionate Communities activities** | * None reported
 |
| **Map palliative care and EOLC services**: Map services for the North Coast community, including community services and social supports to assist in service navigation and a regionally tailored resource to assist consumers and their supports with information and linkages.Regular review and updates to palliative and EOLC HealthPathways to ensure they are aligned with current best practice and regional requirements. Clinical guidelines and referral pathways are current. | **Baseline*** Social Ventures Australia

**Midpoint*** Mid North Coast and Northern NSW LHDs
* Ambulance NSW
* LHD Specialist Palliative Care
 |
| **Membership of the NNSWLHD EOL Care Committee**: enables a coordinated regional approach to improving EOLC. | * NNSW LHD
 |
| Develop models of care to improve palliative care services in RACHs. Healthy North Coast is playing a leading role as part of a regional collaborative in designing and implementing an Integrated Model of Support (IMoS) for RACHs. The objective of the IMoS is to join care services to reduce unnecessary hospitalisations and deliver end-of-life care processes that enable the right care at the right time and in the right place, improving outcomes for people living in residential aged care and their families.Key enablers of the model include Advance Care Planning, anticipatory planning, recognising deterioration and the provision of high-quality person-centered palliative and EOL care in RACHs. | * Primary health care providers
* Pharmacists
* Participating RACHs
* NSW ambulance service.
* LHDs
* Participating GPs
* Palliative care specialists
* Scyne Advisory
 |
| **Develop nurse-led early intervention HealthPathways chronic disease management pathways**. The HealthPathways are specifically tailored resources for primary care nurses, supporting the delivery of nurse-led care to patients and improving access to palliative care approaches. The nurse-led pathways facilitate:* Early Intervention in palliative care
* Living with dementia.
* Anticipatory orders and EOLC
* Advance Care Planning

Implementation of these HealthPathways will be supported by a comprehensive range of nurse education and quality improvement activities.The anticipatory orders and EOL care pathway form an integrated pathway that will support RACH staff and GPs to identify deterioration early and enable anticipatory prescribing and care planning | * Australian Primary health Care Nurses Association (APNA)
* Palliative care specialists, service and support providers
* National Palliative Care Projects
* Primary Health Care providers
* Pharmacists
* Allied health
* RACHs
 |

## Northern Sydney PHN (Sydney North Health Network)

Last updated: 17 April 2025

| **Activity** | **Partner(s)** |
| --- | --- |
|
| **Sector Capacity Building in Primary Health:** * Partnering with ‘*Advance Care Planning Australia’* by delivering online professional development webinar for GPs on ACP during National Advance Care Planning Week.
* Partnering with La Trobe University to deliver an online webinar, ‘*HELP App for the Palliative Care Workforce’,* to educate healthcare professionals on the Healthy End of Life Planning Program and the HELP App as a tool for compassionate care through social prescribing.
 | * Advance Care Planning Australia
* La Trobe University
 |
| **Sector Capacity Building in RACH:*** Partnering with PEPA to deliver culturally responsive palliative care in person workshops for RACH staff, ‘Cultural Diversity in End-of-Life Care for an Ageing Population’, to improve appropriateness of care for people from Culturally and Linguistically Diverse (CALD) backgrounds and enhance cultural literacy in this context.
* Partnering with NSLHD to deliver an in person ‘Palliative Education Day - a palliative approach’, for the aged care workforce across the Northern Beaches LGA.
 | * PEPA
* NSLHD
 |
| **Key education events including:** ‘Palliative Care Week Community and Health Forum’, in person key event during Palliative Care Week, which provided opportunity for the 'interconnected tree' of Palliative and End f Life Care to come together, network, share knowledge and learn about key topics that include Compassionate Communities, Advance Care Planning, Allied Health in Palliative Care, HELP App, and Digital Storytelling.Other initiatives included (by audience):**NSLHD Staff**Information Stand: Located at Royal North Shore Hospital during Advance Care Planning Week (March 2024) as a collaborative event by NSLHD and Sydney North Health Network.**Palliative Care Volunteers**In person workshop, held during National Volunteers Week for Palliative Care Volunteers to learn about the Healthy End of Life Program and the HELP App as a tool in a Compassionate Communities model. | * La Trobe University
* Proveda,
* Mona Vale Palliative Care Unit (NSLHD)
* Adolescent and Young Adult Hospice Manly (NSLHD)
* Royal North Shore Hospital (NSLHD)
 |
| **Education webinars**: Codesign of a series of end of life and palliative care education webinars with the Agency of Clinical Innovation | * Local palliative and end of life care working groups
 |
| **Strengthening community networks:** Coordinating the September 2024 NSW Palliative Care Volunteers Managers Education Day with the NSW Network of Managers of Palliative Care Volunteers committee, as part of the approach of collaborating with volunteer groups to strengthen community support networks and enhance the role of volunteers in delivering compassionate care | * Local palliative and end of life care working groups
* Palliative Care NSW
 |
| **Digital storytelling project in aged care:** This project aims to encourage dialogue by facilitating meaningful discussions about end-of-life care, preserve legacy by providing residents a platform to share their experiences and wishes. The initiative uses an App to capture short stories from residents.  | * RSL Life Care
* Twilight Aged Care
* Alexander Aged Care
 |
| **Supporting uptake of helpful resources:** Encouraging service providers to adopt the Healthy End of Life Planning Brief Intervention (HELP BI) to reach community networks such as families, carers and people at the end of life. HELP BI includes an app for carers to access educational tips, personalised care needs, shared rosters and caring networks. The intervention also encourages the use of the HELP Digital Systematic Data Collection for organisations. | * La Trobe University
 |
| * Community education and capacity building events including:
* Community engagement sessions held in the Ryde LGA targeting multicultural seniors. Included a focus on Dementia and Advance Care Planning.
* Last Days Workshops (a collaborative initiative by Sydney North Health Network and HammondCare) that aims to equip participants with practical tools and information for navigating a dying person’s final days. The in-person workshops engaged and partnered with both councils and aged care organisations as providers of meeting places for workshop participants.
* Engaging the Northern Beaches community through expos during Seniors Week and Advance Care Planning Week.
* Engaging the Ryde Community through a health and services expo.
* Engaging and connecting carers and NSLHD Palliative Care Specialists in the Northern Beaches LGA with a series of conversational meet up education sessions on Advance Care Planning.
* Partnering with the Hornsby Village Hub to engage hub members, in the Hornsby LGA, in conversations around end of life and palliative care through a creative arts workshop.
* Partnering with NSLHD and North Narrabeen Surf Life Saving Club to deliver in person education on Advance Care Planning to older people at their local surf lifesaving club, in the Northern Beaches LGA, for Dying to Know Day (D2KD).
* Partnering with Mosman council during National Carers Week to deliver a an in-person wellbeing session for carers and engage conversations around end of life.
 | * Sydney North Health Network
* HammondCare
* Northern Beaches Council
* City of Ryde
* Lane Cove Council
* North Sydney Council
* Hornsby Council
* Mosman Council
* NSLHD
* Hornsby Village Club
* North Narrabeen Surf Life Saving Club
 |
| **Film screening**: 'Live the Life You Please', movie length documentary around death, dying, end of life and palliative care in Australia. The movie screening was followed by a Q+A Panel from Dementia Australia, HammondCare, Proveda, Local General Practitioner and NSLHD Palliative Care Specialist. | * Dementia Australia
* Proveda
* Local GPs
* NSLHD Palliative Care Specialist
* HammondCare
 |
| **Palliative and end of life care service directory**: A detailed directory of palliative and end-of-life care services in Northern Sydney is currently being developed to help individuals and caregivers navigate available support. This directory will enhance understanding of the care landscape and facilitate access to necessary services. | * None provided
 |
| **Multilingual Resource on Palliative and end-of-life care**: A resource for culturally and linguistically diverse (CALD) communities in Northern Sydney. This resource, translated into 3 languages, addresses language barriers and ensures equitable access to care information for diverse populations. | * Alexander Aged Care
* Scalabrini Village
* CASS Care
 |
| **Educational Video on Dementia awareness**: Video is being developed to: * Raise Awareness: Increase understanding of dementia and the needs of individuals with dementia.
* Promote Inclusion: Encourage businesses and organisations to become dementia-friendly.
* Support Networks: Provide resources for better interaction and support for people with dementia and their caregivers.
 | * Northern Beaches Dementia Alliance
 |
| **Engaging the wider palliative care team in the codesign process**: ‘Community Codesign Workshop’, in person event which provided opportunity for the wider palliative care team, that is the 'interconnected tree' of health and community professionals, along with the community of Northern Sydney to come together, network, and collectively engage in the codesign process of initiatives and activities in the SNHN Greater Choice for at Home Palliative Care programs. | * NSLHD
 |
| **Compassionate Communities in Northern Sydney**:Through a compassionate communities model, engaging Proveda to deliver a program designed to connect volunteers with people in the community who are over 65 living with a life changing diagnosis. The aim, to build their social networks, ultimately enabling them to remain at home in the community for longer. Compassionate communities as part of a public health approach, are communities where everyday people, members of the community, play an enhanced role in the support of people as they age, become ill, and at end of life. | * Proveda
 |
| **Northern Sydney Palliative and End of Life Care Networks**:SNHN staff are deeply engaged in numerous working groups and committees, including the NSLHD Northern Sydney Community Palliative Care Working Group, to enhance the quality of palliative care, ensure comprehensive and holistic patient support, stay informed about the latest best practices, and foster collaboration among diverse community and healthcare providers by strengthening collaborative networks. Their involvement allows them to input in decision making, share expertise, and contribute to continuous improvements in care delivery, ultimately benefiting the dying person, their family, loved ones, carers and the broader community and healthcare community. | * Local palliative and end of life care working groups
 |

## South Eastern NSW PHN (Coordinare)

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Virtual education and training packages:** for GPs as part of continuing professional development to improve their knowledge and awareness for supporting palliative patients. This was informed by a Learning Needs survey to primary care service providers to identify gaps for virtual education sessions mapped to CPD for GPs. | * GPs
* LHDs
* General Practice staff
 |
| **Education Event**: Shoalhaven Medical Association Conference dedicated to the ongoing education of doctors in the Shoalhaven region, and to provide support to the medical workforce. The Conference featured talks including ‘Challenges in supporting patients with life-limiting illness at home’, ‘dementia: a terminal illness’, and a palliative care Q&A.  | * Shoalhaven Medical Association Committee
 |
| **GP QI modules**: Developed, reviewed and endorsed QI modules for general practice staff, including GPs, on Advance Care Planning, with training and education for all practice staff. | * Specialist palliative care services
* GPs
* LHD
* Practice Nurse and Managers
 |
| **Web page creation**: Developed a palliative care webpage which includes key areas of interest and information, support and resources for general practices and the community, as well as access to toolkits. Creation of the web page follows a stocktake activity identifying palliative care consumer materials to share with the community. Ongoing promotion to access, maintain currency of information, report  | * Health providers
* Community members
 |
| **Education events**: Commissioned HammondCare to deliver Last Days Foundation Workshops which are education sessions on palliative care to consumers and the community.  | * HammondCare
 |
| Supporting community activities: Acting as co-host at Senior Week Expos and ‘Live the Life you Please’ screening events.  | * Goulburn Council
* Shoalhaven Council
* Bermagui U3A (University of the Third Age)
 |
| **Education workshops**: Cultural content workshop (Gwandalan Workshop) for health professionals with a focus on supporting Aboriginal people. | * Gwandalan palliative care – AGPAL
* Carefinders
 |
| **System cultural review**: Review of local health system with view to support Aboriginal and Torres Strait Islanders culturally competent services. | * LHD
* ACCHOs
* ITC
* Aboriginal service providers
 |
| **Review and update of palliative care pathways**: including Advance Care Planning.  | * GPs
* LHDs
 |
| **Care model review**: In response to increased regional demand for palliative care services, it was decided that the palliative and end of life stepped care model would be reviewed and updated. The model maps patient care needs that relate to a spectrum of services and interventions, using a multidisciplinary care composition. The intention is that the reviewed model will be more responsive, inclusive and effective in meeting the needs of individuals facing life limiting illnesses in the region.  | * General practice
* LHD
* Consumers
* Aged Care
* Multicultural Communities
 |
| **Co-design and development of electronic Palliative Approach Framework (ePAF):** The ePAF is a result of the update to the care model review (above). The overarching goal is to support and strengthen communication and coordination among key care providers and to enhance workforce capacity and capability in the provision of palliative and end of life care. | * Regional service providers
 |

## South Western Sydney PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Professional development activities and events**: Continuing Professional Development for GPs to improve knowledge and awareness for supporting palliative patients (including those with dementia) through: * Organising an Education Dementia Immersive Experience (EDIE) event
* Having speakers from the LHD present to local GPs about palliative care and dementia.
* Dementia Diagnosis and the 3D’s (dementia, delirium and depression) - Face to face event for GPs.
 | * Dementia Australia
* Local Health District speakers
 |
| **As part of a Core Palliative Care Medicines educative webinar series, several webinars were held with the twin goals of:*** Discussing the role of anticipatory medicines in care of patients with life limiting illnesses
* Promoting an interdisciplinary approach to palliative care in South Western Sydney
 | * Pharmaceutical Society of Australia
 |
| **Suite of awareness raising events**: Community awareness raising events with speakers on dementia, ACP, palliative care and organ donation. Events include guest speakers from a range of related palliative care services, including a death doula from End of Life Angels to discuss personal ACP needs. Includes Dying to Know Day Expo on 8 August 2024. | * LHD
* Local councils
 |
| **Community connection events**: Wollondilly Café Connect: You Only Die Once: end of life planning workshop: Workshop discussing Advance Care Planning and End of Life Planning  | * Wollondilly Shire Council
* End of life Angels (Service Provider located in Bowral, NSW)
 |
| **Distribution of community resources**: Distribution of a previously created Carer Booklet to build awareness for community members on dementia and palliative care and how to support and care for someone with a life-limiting illness. | * Community Advisory Committee
 |
| **Palliative medicines stockist map**: Increase access to core palliative care medicines by developing an interactive map of community pharmacies that stock the five core palliative care medicines, and education and awareness for community pharmacies and GPs. | * Pharmaceutical Society of Australia (PSA)
 |
| **Launching resource for Aboriginal and Torres Strait Islander peoples**: Launched ‘A Journey into Sorry Business’ booklet for Aboriginal and Torres Strait Islander peoples to understand preferences for death, cultural practices and protocols associated with death. | * Aboriginal Elders
* Aboriginal Land Council
* LHD
 |
| **Resource Creation**: Easy Read Document: was designed for people who are not familiar with English or English is a 2nd language, people with low literacy, people living with a learning disability. Includes:* Facts about Dementia: Uses the 12 risk factors of dementia as described in the 2020 Lancet Report
* Facts about Advance Care Planning
 | * Vision Impaired Macarthur Group – not the co-creator
* Person living with dementia and care (lived experience) co-create the document
 |
| **Community education efforts**: Community education events highlighting the importance of ACP to dementia spanning 4 Council areas and in 6 languages (English, Vietnamese, Mandarin, Cantonese, Arabic, Greek). | * University of Western Sydney (UWS)
* Local Councils
* Service Providers
 |
| **Update HealthPathways**: Updated included dementia (End Stage Dementia) and mild cognitive impairment. | * None reported
 |
| **Resource creation**: Developed dementia and palliative care service directory for community members in both hard copy and online format. | * Dementia Australia
* Advance Care Planning Australia
 |
| **Improving access to pain management support**: Subsidised subscriptions to the PainChek app (which uses AI to measure facial movements and assess pain) for small RACHs to enable them to better identify pain and palliative care needs in patients, particularly for those with limited communication capacity e.g., late-stage dementia. | * None reported
 |

## Western New South Wales PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education and awareness around ACP**: Efforts aimed at service providers in the region to support increased completion of ACPs at an earlier stage, and the overall number of completed ACPs.Tender in process for My Care Future – which incorporates community education and recommendations for clinician education | * LHD
* RACHs
* GPs
* AMS
* Local Government
* Neighbourhood centre
* Community
 |
| **Tender process**: Commissioning for a Volunteer Coordinator to roll out a program of training and workshops for community volunteers who wish to help people understand the importance of, and complete Advance Care Directives. The workshops aim to ensure volunteers are confident in discussing and completing Advanced Care Directives. | * Local service providers
* Local Government
* Neighbourhood centre
* AMS
 |
| **Education event**: Last days workshop hosted by HammondCare for community members, approx. March 2023 | * HammondCare
* Community Service provider
 |
| **Education Event**: Palliative Care Case Studies – Dubbo Face to face for clinicians March 2025 with Staff Specialist Dr Jacqui Caton. | * LHD palliative care specialists
* LHD community palliative care
* GPs
* RACHs
* UNSW
* Specialists
 |
| **Updating HealthPathways**: to support GPs and RACH with referrals and listing the Palliative and End of Life Model of Care on the electronic Palliative Approach Framework (ePAF). The Model helps staff identify which palliative care services are available, and where. In the longer term, this information will be transferred to HealthPathways.Multiple Palliative Pathways released February 2025. | * LHD
* GPs
* RACHs
* Aged Care Service Providers
* Allied Health
 |
| **Education and awareness around palliative care**: Education and awareness among service providers in the region to reduce stigma around palliative care, and to increase collaboration and referrals to palliative care services and supports. These efforts are conducted through a variety of mechanisms and channels including promotion of HealthPathways and distribution of resources and learning tools to care providers. | * LHD
* RACHs
* GPs
* AMS
 |
| **Support through care transitions**: Providing Yellow envelopes (a process to ensure a warm transfer of patients, including all relevant information, between healthcare settings), and a checklist for RACHs, encouraging them to use this model to share key patient information when people are transferred to acute care. | * LHD
* RACHs
* Ambulance
 |
| **Care model mapping and delivery**: Mapping and delivering a model of care for local needs based on palliative care education and advance care planning. This activity includes providing local community groups and service providers with the education they are wanting in palliative care issues; harnessing local resources, hosting events and sourcing online resources. Also commissioning the ‘My Care Future’ a trial of a peer model of support for the completion of Advance Care Directives (ACDs), using skilled volunteers. Testing the feasibility of a peer support model in ACDs in Aboriginal and Torress Strait Islander communities. | * Community members 18+
* Aged Care service providers (HCP and CHSP providers)
* GPs
* LHD
* Palliative Care NSW
 |

## Western Sydney PHN (WentWest)

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Development of resources and training for GPs on palliative care**: Quality Improvement Toolkit, Advance Care Planning Toolkit,Free service directory for health professionals Palliative care education for health professionals built into existing CPD courses  | * Western Sydney Local Health District,
* Silverchain
* ELDAC
* Palliative Care Australia
* PalliAGED
 |
| **Supporting implementation of PACOP in RACHs**: including CoP and peer learning for GPs that visit RACHs. | * Western Sydney Local Health District,
* ELDAC
* Palliative Care Australia
* Local RACHs (64 total)
* PEPA
* IPEPA
* Palliative Care NSW
* Geriatrician
* General Practitioner
 |
| **Educating RACH nurses on how to recognise and respond to deterioration of residents**: The PainChek tool has been provided to RACHs in Western Sydney. This will generate data to improve nursing services. In addition, registered nurses in RACHs have been provided a subscription to Palliative Care Australia with access to educational events, journals and communities of practice to develop their skills and knowledge. | * Western Sydney Local Health District,
* PainChek
* Palliative Care Australia
 |
| **Nurse-led improvements to the Quality and Safety of Residential Aged Care via Project HIRAID aged Care**HIRAID® Aged Care is a model designed to improve the quality and safety of care in residential aged care settings through nurse-led initiatives. HIRAID stands for History, Inspection, Risk, Assessment, Investigation, and Decision-making. It is a structured approach to improving clinical practice and addressing issues that affect the health and safety of elderly residents in aged care facilities. | * University of Sydney
* WSLHD
* UTS
* RMIT
* Deakin University
* NSW Ministry of Health
* Australian College of Nursing, Aged Care Quality and Safety Commission
* Aged and Community Care Providers Association
* Gallipoli Home
* Hardi Aged Care
* Minchbury Manor
* Opal Health Care
* Southern Cross Care
* United Protestant Association of NSW Ltd
* Anglicare
* Baptist Care
* Residential Gardens
* Catholic Healthcare
* SummitCare
* Moran Aged Care
* Bankstown City Aged Care
* Sydney Policy Lab
* SA Health
 |
| **Providing community education on ACP and palliative care**: through sharing resources with libraries and Councils, a targeted webpage and social media. | * Blacktown City Council
* Cumberland Council
* Parramatta City council
* The Hills Shire Council
* WSPHN Citizen Assembly
 |
| **Development of a Palliative Care Community Handbook**: specific for Western Sydney community members and an accompanying online palliative care service directory for the region. | * None reported
 |
| **Development of a Handbook for Families with loved ones in RACHs**: especially those living with dementia, to provide information on ACP, local supports, etc. | * None reported
 |
| **Updating HealthPathways**: To include palliative care for dementia with links to local and Dementia Australia resources. Resources have also been tailored for local CALD communities. | * Dementia Australia
* Western Sydney LHD
 |

Section 2:

NT & QLD PHNs

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# Summary of NT & QLD PHN activities

The table below shows which categories PHNs are undertaking activities in at Midpoint. A ‘tick’ means the PHN is undertaking at least one activity within this category.

| PHN | Workforce education and awareness | Awareness in the community | Palliative care medicines | Priority populations | Coordination and integration |
| --- | --- | --- | --- | --- | --- |
| Workforce capability | RACHs | GP Quality Improvement | Service mapping and pathways | Models of shared care |
| Northern Territory |
| Northern Territory  | ü | ü |  |  |  | ü | ü |  |
| Queensland |
| Brisbane North  | ü | ü |  | ü | ü | ü |  |  |
| Brisbane South  | ü | ü | ü |  |  | ü |  | ü |
| Central Queensland, Wide Bay and Sunshine Coast  | ü |  |  | ü |  |  |  | ü |
| Darling Downs and West Moreton  | ü |  |  | ü |  |  | ü |  |
| Gold Coast | ü | ü |  | ü |  |  |  |  |
| Northern Queensland  | ü | ü |  | ü |  |  | ü |  |
| Western Queensland  | ü |  |  | ü |  |  | ü |  |

# Northern Territory PHN

## Northern Territory PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Implementing Project ECHO**: a virtual peer-group learning model, to improve GP capability in palliative care and Advance Personal Planning equivalent of ACP. | * None reported.
 |
| **Advanced Care Planning and Palliative care education and awareness raising**: a broader education and awareness raising activity with planning currently underway to deliver education sessions for PHC providers (including GPs). | * NT Health (Territory palliative care)
* GP Liaison officers
* RACGP
* Interested PHC service providers including GPs across ACCHS, AMS and private practices
* RACHs-
 |
| **Commission localised and workforce capability initiatives**: NTPHN supports two targeted grassroots programs: 1. ACP Facilitator funds the recruitment of an Advance Care Planning Facilitator, a new pilot role based within Territory Palliative Care to focus on education and promotion of advance care planning.
2. Bereavement Network and Community of Practice brings together the resources and knowledge of existing local agencies to provide a readily accessible network of services, creating a Community of Practice to support their work
 | * Top End – Northern Territory of Australia (NT Health)
* Central – Anglicare NT
* NT Health
* NPY Women’s Council.
* PHC service providers across ACCHS, AMS and private practices
 |
| **Promoting Advance Personal Planning**: particularly in RACHs, and the development of an Advance Personal Plan register.  | * Engaging RACHs in the NT (n: 18) taking part in needs assessment
 |
| **Working with First Nations and CALD community members**: to normalise the conversation around end-of-life planning and empower Older Territorians to take control of their future care.This includes commissioning a Seniors’ Advocate: Advance Personal Planning Project (mainstream and CALD communities). Through targeted information sessions and workshops, the project aims to normalise the conversation around end-of-life planning, ensuring that it becomes a standard part of health and wellness discussions | * Council on the Ageing (COTA) NT and partner organisations
 |
| **Update HealthPathways**: to include palliative care and Advance Personal Planning. | * NT PHN HealthPathways team and clinical editors:
* SMEs working in palliative care services across the Northern Territory
* ADHA-
* NT PHN education team and GP liaison officers
 |

# Queensland PHNs

## Brisbane North PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education event:** Hosted annual palliative care education evening for primary care workforce to raise awareness of government funded services, supports, and projects within the region. | * None reported
 |
| **Facilitated event**: Ongoing facilitation of the Brisbane North Community Palliative Care Collaborative- group of cross-sector stakeholders meeting to improve palliative care within the region. | * Brisbane North Community Palliative Care Collaborative
 |
| **Upskilling RACH workers**: Conversation Skills project to equip personal care workers (PCWs) in community aged care and RACHs to have the skills and confidence to have conversations about palliative care, dying and grief. | * Palliative Care Queensland
 |
| **Death over lunch event**: hosted on two occasions with the aim of improving death literacy. | * None reported
 |
| **Increasing pharmacy palliative care capacity**: Development and implementation of an action plan to increase capacity and capability of community pharmacists in supporting safe, quality palliative care at home within the Brisbane North PHN region. There are 4 actions as part of this action plan;1. Palliative Friendly Pharmacies: creating and maintaining a list of pharmacies stocking core palliative medicines and increasing the number of palliative friendly pharmacies.
2. Consumer resources: creating local, specific resources pharmacists can provide to consumers.
3. Pharmacist campaign: increase the knowledge, skills and confidence of pharmacists to support at home palliative care.
4. Prescriber engagement: Encourage prescribers to engage with pharmacists as part of the at-home palliative care team.
 | * Meld Studios (in 2022)
* PallConsult
* Palliative Care Australia
 |
| **Development and implementation of a Disability Action Plan**: to improve access to at home palliative care for people living with disability. Key progress includes the development of a knowledge framework, to help health and disability workers identify what it is they need to know, and available sources of information to build their knowledge and key contacts. This component of the Action Plan was developed over a ten-month consultation process. | * Carol Hope Consulting (2022)
* Brisbane North Community Palliative Care Collaborative
 |

## Brisbane South PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education sessions**: Several education sessions hosted in 2024 for GPs, practice managers, receptionists, and physiotherapists. Education topics covered: advance care planning, management of palliative patients with non-malignant conditions, management of dementia patients, introduction to the basics of palliative care, voluntary assisted dying and its interface with palliative care, and practical support for palliative care patients. | * Metro South Palliative Care Service
 |
| **Delivery of GP education sessions**: for proactive palliative care options for end-of-life care including Advance Care Planning, Voluntary Assisted Dying and Metro South Health Services that can co-coordinate and deliver that care in conjunction with GPs. Resources including the end-of-life audit, checklists and brochures relevant to end-of-life care and relevant services in the Brisbane South PHN (BSPHN) catchment area will be included.  | * Metro South Health
 |
| **Quarterly CoP**: for home care providers and RACHs network meetings to connect aged care providers with palliative care services, and to provide education and awareness of palliative care topics such as dementia, ACP, and early signs of deterioration. | * None reported
 |
| **Establishment of a Community of Practice for GPs**: to be used as means to gather and exchange experiences, educate and upskill, share learnings and engage in peer support.  | * Metro South Palliative Care Service
 |
| **Workshops for language interpreters**: Training and awareness (in-person workshops and online support) for language interpreters on how to access ACP and palliative care information, services, and communicating these to CALD communities. | * 2M Language Services
 |
| **Implementing new models of care**: commencing at Baseline, the project involved implementing a new GP Shared Care model of palliative care with Metro South Palliative Care service, including a GP Nurse Enhancement model, and a QI toolkit. Now at Midpoint, the focus is on implementing a multidisciplinary team shared care model for home-based palliative care between GPs and specialist palliative care services and patients This includes coordination and navigation support, access to resources and mentoring for GPs and patients, and capability building sessions and workshops for GPs.  | * Metro South Palliative Care Service
 |

## Central Queensland, Wide Bay, Sunshine Coast (Country to Coast QLD)

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education and training program**: for GPs on EOLC, grief and bereavement with a focus on ACP. | * Queensland Office of Advance Care Planning
* Hospital and Health Services (HHS)
 |
| **ACP in the community**: Project to raise awareness and understanding of ACP. This includes train the trainer education programs, resources distributed to local clinicians, sharing standardised documentation, and establishing community champions. | * Queensland Office of Advance Care Planning
 |
| **Capacity building project**: Running a hospice capacity building project for 5 hospices to integrate with palliative care services, align capability building domains, develop community linkages and improve relationships. | * None reported
 |
| **Clinical Society events**: covering dementia, the disease process, palliative care, voluntary assisted dying and other topics to bring together service providers to raise awareness of resources at the local and state level.  | * Primary, secondary health service providers
* Community groups
 |
| **Updating HealthPathways data** | * None reported
 |

## Darling Downs and West Moreton PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Palliative care symposium**: for GPs to bring them together and raise awareness of palliative care services in the region over a one-day period. The symposium aimed to deliver a learning opportunity for health professionals caring for older people or those approaching end of life in the West Moreton region, providing opportunities for networking, collaboration and exchange of ideas for health professionals. The symposium also facilitated the provision of information and resources about local programs, services and products to health professionals.  | * Palliative Care Queensland
* University of Southern Queensland (Older Persons collaborative)
 |
| **Workshops for health professionals**: Monthly Courageous Conversations workshops for health professionals and care professionals on palliative care and ACP conversations. A series of Courageous Conversations workshops have been delivered to professional carers and clinical staff across the DDWMPHN region. These workshops assisted to upskill and encourage confidence within the health professional sector to undertake difficult conversations with patients and their families at end of life. The Courageous Conversations workshops focus on communication about serious illness, death, dying and grief.  | * University of Southern Queensland in West Moreton
 |
| **Peer learning**: Implement Project ECHO, a virtual peer-group learning model, to improve GP capability in palliative care and ACP. DDWMPHN are involved in a working group to support this initiative. | * University of Queensland
 |
| **Community workshops**: Commissioned Palliative Care Queensland to deliver Last Aid workshops in the region to help educate the community about the basics of palliative care and care for dying people. These courses are delivered using materials developed by Last Aid International. | * Palliative Care Queensland
 |
| **Developing a local directory**: for the community of key service providers, after hours contacts, and other contacts for palliative care to improve care coordination. Mapping exercise complete, but website is not yet ‘live’. | * None reported.
 |
| **The establishment of a Care at the End-of-Life Collaborative (CAEOLC):** to develop partnerships across government and non-government services to optimise systems, processes and outcomes for people living with life limiting illnesses in the PHN region. CAEOLC has set a series of targets in pursuit of this overarching goal, including the co-design of shared care pathways for people approaching the end of life.As part of engagement and consultation, interviews were conducted with a variety of key stakeholders across the Darling Downs region. Darling Downs CAEOLC commenced in July 2022. Features bi-monthly meetings. West Moreton have 2 yearly forums and communicate via email and newsletter. | * UniSQ
* Queensland Ambulance Service
* Membership of over 50 people from around the region. (rural and remote)
 |
| **Palliative Care service mapping**: Darling Downs Hospital Health Service was engaged by the PHN in August 2022 in a collaboration to complete the mapping of four generic palliative care patient journeys. Throughout the course of the mapping project there has been extensive consultation with a diverse range of stakeholders across the Darling Downs region to support the development of the mapping, final report, and action plan. The aim of the project is to map four journeys of patients identified as having palliative care needs through to death. This also involved a review and update of HealthPathways to identify gaps and ensure palliative care pathways and information are accurate and optimal for the range of supports across the region.This mapping work will be built into Care Connect – a website that holds information on services, resources and information for family and carers.This activity has also involved revisiting mapping work done by the CAEOLC to understand changes that have taken place. DDWMPHN has played a supporting role to DDHS in this component of the activity.  | * Darling Downs HHS.
* West Moreton Health
* Darling Downs Hospital and Health Service
 |
| **Review and update HealthPathways**: to ensure palliative care pathways and information are accurate and optimal for the range of supports across the region. | * None reported
 |

## Gold Coast PHN

Last updated: 17 April 2025–

| Activity | Partner(s) |
| --- | --- |
|
| **Workforce Support**: Facilitating workforce members (GPs, nurses, carers, Aboriginal workers, and allied health workers) to complete palliative care training and offering scholarships for placements in the PEPA/CPCRE program.  | * PEPA
* Centre for Palliative Care Research and Education (CPCRE)
 |
| **Weekly distribution of online newsletters**: to inform recipients of important news and information relevant to their industry. | * None reported
 |
| **Facilitate bereavement workshops**: to educate RACH staff on how to cope with grief and loss. | * Change Futures
 |
| **Health Literacy Resources Booklet**: Promotion and distribution of the ACP Consumer Guide developed as part of the pilot to raise awareness and support consumers to discuss and plan for end of life. Promoted through a series of local events (practice managers breakfast, wound management event for GPs, nurses and RACH and community aged care nurses etc).  | * None reported
 |

## Northern Queensland PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education and training sessions**: GP and nurse education and training sessions (Education Dinners) to upskill workforce on palliative care with a focus on end-of-life medications in Cairns, Townsville and Mackay. | * Cairns Hospital and Health Service Clinical Director and Palliative Care Team
* Townsville Hospital and Health Service
* PallConsult
* Specialist Palliative Care in Aged Care (SPACE)
* Specialist Palliative Care Rural Telehealth (SPaRTa)
* Bluecare
* Pallcare
* Pop-Up Palliative Care Service
* PCA and Caring@Home resources
* PACOP
 |
| **Recruitment and support for participation in PEPA**: EOI sent to health professionals to ascertain interest in participating in PEPA. NQPHN promote the course, follow up with participants to register, cover costs associated with backfilling staff and travel costs. PEPA manage EOI placements. Assistance is provided to successful participants on a case-by-case basis to assist with expenses associated with attending placements or workshops.  | * PEPA
 |
| **Promoting palliative care and ACP with RACHs**: and community based aged care workforce through regular meetings virtually and face to face in Cairns, Torres Strait, Cape York, Townsville, and Mackay regions. | **Baseline*** None reported

**Midpoint:*** RACH Facility Managers with representatives from a majority of RACHs (56 RACHs)
* PallConsult
* Palliative Aged Care Outcomes Program (PACOP)
 |
| **Community workshops**: Compassionate Communities Health Connectors ‘Train the Trainer’ workshops in 14 communities to build community capacity and capability in establishing a wraparound informal support to a person at end of life who wishes to palliate at home. | * Palliative Care Queensland
* Latrobe University HELP App
* Groundswell Project
 |
| **Community Education**: ACP presentations and guest speaking opportunities at community events, seniors’ groups, Country Women’s Association venues, RSLs, Neighbourhood centres, Cairns Regional Council Healthy Ageing Expo, Tablelands Ageing Expo, etc. | * FNQ Dementia Alliance
* Cairns and Region Multicultural Association (CARMA)
* Cairns & Community Dementia Carers Association
* Tablelands Disaster Management Centre
* National Senior Australians Association
* University of the Third Age
 |
| **Community Roadshow**: Working with HammondCare to conduct the Last Days roadshow. Several workshops have been hosted, targeting family members of people with dementia who are at the end of their life. The workshops are designed to equip people with practical knowledge and tools to support someone they care for to navigate the last days of their life. | * HammondCare
 |
| **Journey mapping**: Developed consumer journeys for the community under the Connecting End of Life Care in North QLD. The journey maps are intended to support communities, carers, patients and their loved ones, as they explore how different initiatives could benefit or improve someone’s journey, acting as a key resource in education, group discussions or planning meetings. | * Palliative Care Queensland
 |

## Western Queensland PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **GP education, training and information sessions**: on death literacy, bereavement, grief and loss with a focus on ACP. Includes a webinar series for health professionals throughout Western Queensland. | * Northwest Hospital and Health Service
* Specialist rural telehealth service (SPaRTa)
* WQPHN Primary Care and Chronic Disease team
 |
| **Launched series of the Outback Palliative Care Community of Practice:*** Series 1: focused on grief and bereavement.
* Series 2: focused on promoting available Palliative Care QLD memberships funded by WQPHN and engaging carer and community collaboration in provision of palliative care at home.
* Series 3: End of Life Law
 | * Judith Murray Psychology (Series 1)
* Community Praxis QLD
* GroundSwell Project (Community Care Northern Beaches NSW)
* Palliative Care Queensland
* Penny Neller – QUT End of Life Law
 |
| **Hosted the Roma Palliative Care Education tour**: including seminars and workshops that enhanced health provider linkage to state-wide programs and encouraged local education. | * PEPA
* IPEPA
 |
| **Community awareness events including:*** Dying to Know Day partner program for community members to share stories, build death literacy from each other, provide practical support and advice on how to care for someone or discuss palliative and EOLC.
* Dying to Know Day event collaboration with Longreach Regional Council. Co-hosting a craft morning with local and state-wide service provider representative, providing information on end of life care. Includes. Q&A Panel discussion – ‘You can’t ask that’
* Tea Time chats about palliative care in the community (modelled on death cafes) for community members to share stories, build death literacy from each other, provide practical support and advice on how to care for someone or discuss palliative and EOLC, to how to arrange gardening, who covers costs, etc.
 | * Community Care + Wellbeing
* Sticks and Stones Cafe
* CWA Thallon
* Proveda
* Longreach regional council
* Specialist rural telehealth service (SPaRTa)
 |
| **Collaborative community-focused forums**: in Cloncurry, Winton and St George to educate, problem-solve and raise awareness of palliative care in the region, existing resources and educational platforms for local stakeholders, community members and carers to use. | * Palliative Care Queensland
* NDIS
* Council of the Ageing – Queensland
* NDA
* Peter Westoby
 |
| **Development of a web-based service mapping tool**: for service providers and community members. Phase 1 involves understanding the current situation within the WQPHN region via Service Mapping exercise across the region (including state and federal initiatives) to document existing and planned palliative care and end of life services. Beacon Strategies has been engaged by WQPHN to support the development of the Service Mapping Tool. | * Beacon strategies
 |

Section 3:

SA & WA PHNs

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# Summary of SA / WA PHN activities

The table below shows which categories PHNs are undertaking activities in at Midpoint. A ‘tick’ means the PHN is undertaking at least one activity within this category.

| PHN | Workforce education and awareness | Awareness in the community | Palliative care medicines | Priority populations | Coordination and integration |
| --- | --- | --- | --- | --- | --- |
| Workforce capability | RACHs | GP Quality Improvement | Service mapping and pathways | Models of shared care |
| South Australia |
| Adelaide PHN | ü | ü | ü | ü |  | ü |  |  |
| Country South Australia PHN | ü |  |  | ü |  | ü |  | ü |
| Western Australia |
| Western Australia Primary Health Alliance (WAPHA) | ü |  |  | ü |  | ü |  |  |

# South Australian PHNs

## Adelaide PHN

Last updated: 29 January 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Implementing Project ECHO**: Project ECHO (Extension for Community Healthcare Outcomes) is an evidence-based model which places healthcare providers from diverse settings in direct contact with subject matter experts, through a series of virtual mentoring sessions or webinar sessions, empowering them to provide best practice care for their local communities. | * SA Postgraduate Medical Education Association (SAPMEA)
* CSAPHN
 |
| **Supporting PACOP rollout in RACHs**: by working in collaboration with PACOP to promote local workshops to RACHs. | * PACOP (UoW)
 |
| **Providing palliative care training and education to key health care providers**: in the aged care community sector, particularly for the early identification of patient’s symptoms. | * ECH Aged Care
* Royal District Nursing Service of SA
* HammondCare
* TIME Education and Training
 |
| **Updating HealthPathways**: with new and updated clinical pathways. Promoting and implementing those new pathways via information and education sessions.  | * HealthPathways SA
 |
| **Facilitated workshops**: (run by Dementia Australia) for family, carers and workers of people living with dementia in community. Dementia Australia’s workshops focus on providing knowledge, strategies and support that is aligned with the various stages of dementia, including palliative care. | * Dementia Australia
 |
| **Commissioned Palliative Care SA to provide ‘Nurturing Compassionate Communities’ Program**: to increase awareness and understanding of palliative care; improve knowledge of different supports and services available in relation to serious illness, dying, death or grief; improve death literacy; bring together health, social and community groups through a palliative care plan which provides local direction; and provide strategic support and best practice information to the Greater Choice for At Home Palliative Care Program. Activities have been commissioned to run from August 2023 to June 2025, bringing together the palliative care health, social and community sectors and create a framework of ongoing collaborative support addressing the needs of the community identified. | * Palliative Care SA
* Country SA PHN
 |
| **Death Literacy Working Group established**: to drive the improvement of Death Literacy in South Australia. The Working Group is focused on death literacy and enables the identification of opportunities to facilitate change empowering the community to engage with and make decisions regarding end of life. | * Palliative Care SA
* SA Health
* Council On The Ageing (COTA)
* Flinders University
* University Adelaide
* Dementia Australia
* Country SA PHN
* Office of Ageing well
* Modbury Hospital
* City of Onkaparinga
* Adaptive Grief Counselling
* Carers SA
* CQ University Australia
* Death Literacy Institute
* City of Mitcham
 |
| **Undertake consultative needs assessment**: Engaging with service providers to explore improving ACP knowledge in vulnerable communities with a focus on LGBTIQ+ and homeless. populations.  | * Service providers
 |

## Country South Australia PHN

Last updated: 29 January 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Implementing Project ECHO Palliative Care:** to enable non-specialist health care workers and GPs in rural and remote areas to learn from metro-based palliative care specialists through online sessions and deidentified case studies.Project ECHO (Extension for Community Healthcare Outcomes) is an evidence-based model which places healthcare providers from diverse settings in direct contact with subject matter experts, empowering them to provide best practice care for their local communities. | * Adelaide PHN
* SAPMEA
 |
| **Interactive two hour online Continuing Professional Development modules**: on syringe drivers, and prescribing opioids, to increase confidence among GPs and health workforce.  | * GPEx
* Rural Support Services (specialist Palliative Pharmacy consulting support)
 |
| **‘Nurturing Compassionate Communities in Country SA’ project**: with Death Literacy Index built in to monitor change in community awareness. So far, 21 public education sessions have been fun across 2023-23 including Last Aid and other consumer education courses.Project will deliver over 60 face-to-face and/or virtual sessions for community members including: PalliLEARN, Last Aid, Health Professional Hot Topic webinars, Palliative Care Round Table sessions with key stakeholders, facilitation of a palliative care survey, production and publication of Palliative Care Plans for each LHN, advice and strategy meetings with CSAPHN, evaluations and online project showcase. | * Palliative Care SA
* The Hospital Research Foundation – Palliative Care
* SA Health, Adelaide PHN (metro focus)
* Carers SA
 |
| **Tailoring the previously developed culturally appropriate educational Aboriginal Peoples ACP, Palliative Care, and End of Life information bundles**: to be freely available on the digital GoShare Plus platform. Four respected local South Australian Aboriginal and Torres Strait Islander community leaders will speak to their communities on these subjects by way of pre-recorded video messages (CSAPHN funds access to GoShare Tool for all General Practices and ACCHO’s).CSAPHN has continued this work by engaging with local Elders to record video messages (in English) for the GoShare platform on ACP and palliative care more broadly. | * GoShare
* Grief and Bereavement Australia
* ACCHOs
 |
| **Compassionate Communities SA Corporative, including LHN, Local Government, businesses and community groups**: to improve the channels of technology used for communication and care jointly provided by GPs and palliative care teams. | * LHN
* Local Government
* Businesses
* Community groups
 |
| **Plan to implement INCA**: (Integrated Share Care Planning Platform) web portal in aged care services, putting the patient at the centre of care, connecting healthcare teams to better manage chronic disease and help keep people well and out of hospital. It allows GPs to create patient-centred, Medicare-compliant GO Management Plans (GPMP), Team Care Arrangements (TCAs) and conveniently share these with other healthcare providers using a secure referral system.   | * LHN
 |
| **Development and integration of the 9 item Likert scale Adult Attitude to Grief (AAG) PROM self-assessment**: into a GoShare bundle to support GPs manage grief and bereavement. General Practices and ACCHO’s will be able to send the bundle via text message to individuals recently bereaved to complete at home or a location of choice. A report is sent back to GPs indicating Severe, High or Low Vulnerability risk which GPs can act upon as appropriate. The AAG is also used to prompt conversation around grief and bereavement between patient and health professionals.  | * Murrumbidgee PHN
* GoShare
 |
| **Supporting SA Health in the development and implementation of the SA Health Palliative Care Navigation Pilot**: to better connect terminally ill patients with local palliative care services, supports and information – CSAPHN Ageing and Palliative Manager sits on Steering Committee. | * SA Health
 |

# Western Australian PHNs

## Western Australia Primary Health Alliance

Last updated: 29 January 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Trial a ‘Palliative Care Champion’ role within general practice**: to undertake audits and QI activities specific to palliative care and coordinate palliative care specific training sessions for clinical staff.The pilot aims to: * Improve awareness and access to palliative care at home.
* Enable the right care at the right time and in the right place to reduce unnecessary hospitalisations.
* Generate and use data to support continuous improvement.
* Use available technologies to support flexible and responsive palliative care at home, including in the after-hours.
* Promote end of life choice through the proactive promotion of ACP during routine health assessments.
* Optimise MBS item reimbursement to support ACP and palliative care provision in general practice.
* Develop a framework for future phases which aim to develop a model of care than can support a planned approach to generalist palliative care.
 | * Quinns Mindarie Super Clinic (Perth North PHN)
* Burslem Medical Centre (Perth South PHN)
* Plaza Medical Group – Kalgoorlie (Country WA PHN)
 |
| **Develop a hard copy and online booklet:** for use and distribution in general practice and acute care settings targeted at people at the end of life and their carers to support them. Produced following consultation with WAPHA CALD and LGBTQIA+ reference groups. Review and refresh will occur every two years. | * Palliative Care WA (PCWA)
 |
| **Increase community awareness of advance care planning:** by working with Linkwest and PCWA to build the capacity of Community Resource Centres to assist with Advance Care Planning.  | * PCWA
* Linkwest
 |
| **Education and training of health professionals:** at ACHHOs that provide chronic disease management to Aboriginal and Torres Strait Islander people on how to recognise deterioration, understand trajectories of chronic disease, what palliative care is, services available, and the communication skills required to have conversations on ACP. | * ACCHOs involved in chronic disease management
 |
| **Working to increase palliative care and advanced care planning awareness with people with sensory loss.**  | * Palliative Care Western Australia (PCWA)
* Translation Interpreter Service
 |



Section 4:

TAS & VIC PHNs

Summary of TAS / VIC PHN activities

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The table below shows which categories PHNs are undertaking activities in at Midpoint. A ‘tick’ means the PHN is undertaking at least one activity within this category.

| PHN | Workforce education and awareness | Awareness in the community | Palliative care medicines | Priority populations | Coordination and integration |
| --- | --- | --- | --- | --- | --- |
| Workforce capability | RACHs | GP Quality Improvement | Service mapping and pathways | Models of shared care |
| Tasmanian PHNs |
| Tasmania PHN (Primary Health Tasmania) | ü | ü | ü | ü |  |  |  |  |
| Victorian PHNs |
| Eastern Melbourne PHN | ü | ü |  | ü | ü |  |  |  |
| Gippsland PHN | ü |  | ü | ü | ü | ü | ü |  |
| Murray PHN | ü |  | ü | ü |  | ü |  |  |
| North Western Melbourne PHN | ü | ü | ü |  | ü | ü | ü |  |
| South Easten Melbourne PHN | ü |  |  |  | ü |  | ü |  |
| Western Victoria PHN | ü |  | ü | ü |  |  |  | ü |

# Tasmania PHN

## Primary Health Tasmania

Last updated: 17 April 2025

|  |  |
| --- | --- |
| Activity | Partner(s) |
|
| **Survey of GPs to determine what educational needs**: From these surveys a series of webinars and workshops have been hosted. Topics include clinical education with CPD components, palliative care and Parkinson’s and the use of HealthPathways data.  | * Community pharmacies
 |
| **Employing a project officer to deliver education and training on palliative care and EOLC**: including Advanced Care Plans and end of life decision making for workforce in RACHs.  | * Palliative Care Tasmania
 |
| **Use of a QI toolkit in general practices**: to assess and improve identification and care via timely identification and management of individuals eligible for palliative care. | * None reported
 |
| **Commissioning community centres and Carers Tasmania**: to raise awareness of palliative care and improve death literacy in the community. For example this is funding supports community centres to set up ‘death cafes.’The second round of grants targets education providers offering courses on sexual relations and intimacy, and relationships within palliative care. The courses also offer education on building confidence and capability for people at the end of life. | * Family Planning Tasmania
* Tasmanian Health Service
* Relationships Australia Tasmania
 |
| **Implementation and promotion of a palliative care information**: on TasCOSS, FindHelpTas platform for consumers and carers. | * TasCOSS
 |
| **Collaborating**: with Palliative Care Tasmania to review, update and distribute the Tasmanian Palliative Caring resource.  | * Palliative Care Tasmania
 |
| **Grief Literacy resource creation**: in collaboration with Palliative Care Tasmania.  | * Palliative Care Tasmania
 |
| **Educational grants**: provided for primary care workforce. | * Tasmanian Department of Health
 |

# Victorian PHNs

## Eastern Melbourne PHN

Last updated: 17 April 2024

| Activity | Partner(s) |
| --- | --- |
|
| **Delivery to GPs of RACGP accredited education series**: focused on issues experienced by GPs in the region such as prescribing palliative care medicines or having difficult conversations.Each education session delivers 2 CPD hours.  | * Eastern Palliative Care (EPC)
* Banksia Palliative Care
* Eastern Metropolitan Region Palliative Care Consortia
 |
| **Provide training and awareness raising to RACHs**: through a partnership with the Eastern Palliative Care and Aged Care Team, facilitating connection with palliative care service providers. Training and awareness raising based on the needs of RACHs in response to survey of RACHs in August 2022. EMPHN has partnered with the Eastern Palliative Care Aged Care Team to support overall palliative care and aged care education to address the gaps within RACHs to promote which education providers can assist if required. Regular promotion of how PACOP, PEPA, ELDAC, PCAS and use of after hours toolkits and BERTIE videos are promoted via EMPHN primary care bulletins, direct emails from RACH support and via our EMPHN website pages. | * Eastern Palliative Care Aged Care Team
* Victoiran Palliative Care Advice Service (PCAS)
* PACOP
* PEPA
* ELDAC
 |
| **Enhancing GP workforce capability**: to access, analyse, assess, and develop future planning with available practice data. This includes:* Establishing collaborative data sharing agreements with strategic partners to maximise use of available practice data (e.g., POLAR)
* Analysing and assessing needs through key data metrics and planning future training development opportunities with insights.Enhancing engagement and connection between GP and local community specialist palliative care services.
 | * Eastern Palliative Care
* Banksia Palliative Care Services
* North Western Melbourne PHN
* Ambulance Victoria
 |
| **Dignified Decisions project**: with Palliative Care Victoria (education targeting the families of residents in aged care, aiming to build death literacy, knowledge of ACP and the goals of aged care more generally). EMPHN has partnered with the Eastern Palliative Care Aged Care Team to support overall education to RACH staff. This includes promotion of the Dignified and Respectful Decisions Partner Toolkit and use of resources. | * Palliative Care Victoria
* Eastern Palliative Care
 |
| **Increase access to core palliative care medicines by developing an interactive map**: for providers and consumers of community pharmacies that stock the five core palliative care medicines. | * Pharmaceutical Society Australia (PSA)
* EMPHN
* NWMPHN
* SEMPHN
 |

## Gippsland PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Education and training for health care providers**: based on work done to identify palliative care education needs in the region. Gippsland PHN surveyed GPs to establish their learning needs for development of a GP Webinar series, including; * The role of the GP in palliative care.
* Anticipatory Prescribing and Medication.
* Voluntary Assisted Dying.
* The role of primary care practitioners in Motor Neurone Disease (MND) care and support networks for Gippsland practitioners.

Practice nurses were offered grants to attend the Palliative Care Nurses Australia (PCNA) online conference. Nurses from 6 general practices took up the grant and provided a summary of learnings that resulted in 2 of the 6 developing their own palliative care quality improvement initiative as a result. | * Palliative Care Nurses Australia (PCNA)
* Victorian Palliative Care Advice Service (PCAS)
* Palliative Care Consultancy Gippsland (PCCG)
* Gippsland Regional Palliative Care Consortium (GRPCC)
* Voluntary Assisted Dying (VAD) Statewide Care Navigator Service
* Gippsland based GP VAD Assessor
* Gippsland based specialist palliative care pharmacist
* MND Victoria
 |
| **Baseline**:**Use of a QI toolkit**: in 5 general practices to assess and improve identification and care via timely identification and management of individuals eligible for palliative care.Phase 1: QI toolkit development is completePhase 2: 12-month toolkit pilot is in progressPhase 3: Evaluation is yet to commence**Midpoint**:5 general practices undertook the Program of Experience in the Palliative Approach (PEPA) Introduction to Palliative Care learning modules, baseline data collection death literacy and death audit surveys and the first of three PDSA cycles to embed the palliative approach to care into work practice. In 2024/25, Practices will undertake the last two PDSA cycles and compete post-pilot survey collections. | * Murray PHN
* Western Victoria PHN
* Participating General practices
 |
| **Plan to update the Gippsland PHN website**: to include a palliative care page to ensure access to evidence based platforms; and training, education and resources from peak bodies. | * None reported
 |
| **“It’s your life: Dying Happens” Community Roadshow**: a series of 3 workshops across Gippsland with speakers from the Victorian Palliative Care Advice Service (PCAS), Ambulance Victoria (AV), Voluntary Assisted Dying (VAD) Statewide Care Navigator Service and Gippsland community palliative care providers. 94 attendees, majority community members. The Roadshow was preceded by a media campaign through local newspapers, social media and radio. An evaluation demonstrated that most attendees gained new knowledge, especially in relation to VAD, the role of AV in palliative care and how the different providers and support organisations work together to provide care. | * Victorian Palliative Care Advice Service (PCAS)
* Ambulance Victoria (AV)
* Voluntary Assisted Dying (VAD) Statewide Care Navigator Service
* Gippsland palliative care community providers
 |
| Planned needs assessment with local Aboriginal and Torres Strait Islander workforce and community: due to commence October 2024 | * Local ACCHOs
* Local Aboriginal and Torres Strait Islander consultant
* Local Aboriginal and Torres Strait Islander Community
 |
| **Plan to improve**: community access to end of life medication and access to stock at community pharmacies. Issues investigated and found localised to one LGA. Further investigations and data collection by Gippsland PHN revealed issues occurring less frequently than perceived. It was decided by local providers to continue to monitor the situation but with no further action at this current time.  | * La Trobe Palliative Care Advancement Group
* Local palliative care community provider
* Pharmaceutical Society of Australia
* Local Supercare community pharmacy
 |
| **Supporting RACHs to implement IMPREST system**: to have ‘ward stock’ of palliative care medicines on site. Gippsland PHN offered small grants to RACHs for IMPREST licence fees and supporting implementation. Gippsland PHN commissioned GRPCC to develop a guide and support RACHs to implement IMPREST. | * Gippsland Regional Palliative Care Consortium (GRPCC)
 |
| **Developing a Decision Support Tool:** to help general health professionals to appropriately refer patients to community/and or specialist palliative care. This will include scoping existing issues with the development of triage tools and meeting education needs in RACHs for the criterion to work effectively. Further analysis of needs and scoping of capacity in the environment revealed further development of a triage tool was out of scope and resources of the GCfAHPC. Plans underway to convert a GP referral to community palliative care form to a practice software template and end-of-life care develop and education package for RNs in RACH regarding palliative and end-of-life care. | * Gippsland Regional Palliative Care Consortium (GRPCC)
 |

## Murray PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Palliative care-related events for Regional Victorian GPs**: Phase 1 (awareness); as part of Continuous Professional Development to educate and raise awareness of palliative care role in the sector. Two sessions were developed:* Session 1: Palliative care in regional Victoria, offered to GPs in the Murray PHN catchment.
* Session 2: Dementia and EOLC planning for GPs in regional and remote Victoria, offered to GPs across regional Victoria.
 | * Gippsland PHN
* Western Victoria PHN
 |
| Palliative Care related events / sessions for Regional Victorian GPs: Phase 2 (capacity building); to connect providers with local services, resources and local referral pathways. 2 sessions were developed:* Session 1: When community palliative care meets general practices (face to face with presence of each catchment local Specialist referral services).
* Session 2: Supporting the palliative care journey of patients in general practices (Statewide CPD webinar in partnership with ADHA).
 | * Specialist palliative care service
* Western Victoria PHN and Victorian PHNs
* Australian Digital Health Agency
 |
| **Use of a QI toolkit**: in 4 general practices to assess and improve timely identification of patients living with life limiting illnesses and care coordination using data auditing.Phase 1: QI toolkit development is complete (localisation of NWPHN to Regional Victoria).Phase 2: 12-month toolkit pilot is in progress.Phase 3: Evaluation is yet to commence. | * Gippsland PHN
* Western Victorian PHN
 |
| **Community events**: Working with Dementia Australia to promote and present a series of free community events on dementia as a palliative care condition, and grief and loss. | * Dementia Australia
 |
| **Delivery of free carer wellbeing sessions**: to connect carers with services offered closer to home and support navigation of grief and loss, inclusive of respite services and DOHAC carer Gateway funded strategies. | * Goulburn Valley Hospice
* CarerGateway providers in Victoria
* FamilyCare – Goulburn Valley
* Uniting – NE Victoria
* Seymour Health
 |
| **Dying to Know Day Sessions**: which supported death awareness, death cafés, resources and information sessions in an expo-event format with stalls from key services in the region. Sessions were completed in August 2023. | * FamilyCare – Goulburn Valley
* Benalla Health
* Goulburn Valley Hospice
 |
| **12-month pilot of the Carers Support Network Strategy**: Using the Compassionate Communities model, Murray PHN are building informal networks / a non-clinical social support group for active end of life carers and a local hospice. | * Goulburn Valley Hospice
* The Groundswell Project
 |
| **Tailored and localised the SWSPHN Journey into Sorry Business Palliative Care booklet**: for the Wiradjuri, Duduroa, Waveroo and Yorta Yorta Aboriginal communities in NE Victoria. | * Albury Wodonga Aboriginal Health Services
 |
| Translation of existing palliative care community resources to AUSLAN: to improve accessibility of collateral to deaf and hard of hearing communities. 5 easy English booklets developed by Palliative Care Victoria. | * Bendigo Deaf Hub
* Palliative Care Victoria
 |

## North Western Melbourne PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Held a Palliative and Aged Care Summit**; face-to-face called the ‘Communication, Collaboration and Coordination: The 3 Cs of Palliative Care in Aged Care’, including speakers and educational talks. Attendees were mostly multidisciplinary health professionals. | * North and West Metropolitan Region Palliative Care Consortium
* Guest speakers including health professionals, the CEO of Palliative Care Victoria, and an ABC broadcaster
 |
| **Hosted and partnered on a series of events supporting health service providers**: Events include navigating difficult conversations in general practice, understanding the role GPs play in community palliative care, medicines in the last days of life, and statewide VAD medical practitioner training days (led by partners). | * VAD Care Navigator Service
* Murdoch Children’s Research Institute
* Banksia Palliative Care
* EMPHN
 |
| **Using QI toolkit**: developed during the pilot to build a library of smaller, qualitative improvement templates. Includes: ‘End-of-Life Care: QI Workbook for General Practice’, and specific QI activities on ACP, palliative care and dementia | * None reported
 |
| **Education and training for GPs and RACHs:*** Palliative care in the community and in RACHs.
* Advance Care Planning.

Work is continuing for these sessions to be recognised by the RACGP as accredited as part of continuing professional development. | * North and West Metropolitan Region Palliative Care Consortium
* Community palliative care providers
 |
| **Palliative care and disability forum**: held 16 May 2024 for national Palliative Care Week | * North West Metro Palliative Care Consortium
 |
| **Increase access to core palliative care medicines**: by developing an interactive map for providers and consumers of community pharmacies that stock the five core palliative care medicines. | * Pharmaceutical Society Australia (PSA)
* EMPHN
* SEMPHN
 |
| **Review and update HealthPathways**: to incorporate palliative care pathways in the region. | * NWMPHN & EMPHN
 |

## South Eastern Melbourne PHN

Last updated: 17 April 2025

|  |  |
| --- | --- |
| Activity | Partner(s) |
|
| **Commenced Advance Care Planning program**: with 2 ACP services in the region providing information sessions to general practices and their patients. General practices complete online modules on ACP, and an audit is done of patients who attended training sessions. | * Alfred Health ACP Service
* Peninsula Health ACP Service
 |
| **Education in general practice**: to provide palliative care education / information sessions across in the region. The aim is to deliver 36 sessions by June 2025. | * Southern Melbourne Region Palliative Care Consortium (SMRPCC)
* South East Palliative Care
* Peninsula Home Hospice
* Calvary Bethlehem
 |
| **Increase access to core palliative care medicines**: by developing an interactive map for providers and consumers of community pharmacies that stock the five core palliative care medicines. | * PSA
* EMPHN
* NWMPHN
 |
| **Build an interoperability function enabling GPs to use palliative care software**: to e-refer patients requiring palliative care from GP medical record systems to palliative care services. | * PalCare Software
* ConsultMed
* Palliative Care South East
* Peninsula Home Hospice
 |

## Western Victoria PHN

Last updated: 17 April 2025

| Activity | Partner(s) |
| --- | --- |
|
| **Workforce education and training**: for general practitioners, practice nurses, registered nurses, community nurses and specialist palliative care nurses on Advanced Care Planning (ACP). | * Barwon Health
* Grampians Health
* South West Health Care
* ACP Australia
 |
| **Baseline**:**Use of a QI toolkit**: in 8 general practices to assess and improve identification and care, via timely identification and management of individuals eligible for palliative care.**Midpoint**:Working together as a regional Victorian collaborative between WVPHN, Gippsland PHN and Murray PHN in the localisation and piloting of a Palliative Care Quality Improvement toolkit in general practices to assess and improve care via timely identification and management of individuals eligible for palliative care.Phase 1: QI toolkit development is complete.Phase 2: 12 month toolkit pilot is in progress.Phase 3: Internal evaluation and reporting. | * Gippsland PHN
* Murray PHN
* Clinical advisory panel including geriatrician, Aboriginal Community Controlled Health Organisation representative, GP subject matter expert and aged care representative
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| **Education and awareness of ACP for the community**: Dying to Know Day small grant rounds were run by WVPHN in both 2023 and 2024, for community organisations to deliver innovative awareness raising initiatives in their local communities. WVPHN partnered with the two regional Integrated Cancer Services and the Grampians Region Palliative Care Consortia to deliver a regional Dying to Know Day media campaign in 2023. | * Anam Care House Colac
* Ballarat Hospice Care Incorporated
* Barwon Health Palliative Care Team
* East Grampians Health Service
* Grampians Health Horsham
* Grampians Regional Palliative Care Team
* Western District Health Service
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| **Enhancing Coordination of local palliative care and support**: A Project Advisory Group meets bi-monthly to oversee the planning and delivery of quality and system improvements initiatives, sharing information and integration opportunities. The Project Advisory Group acts as a coordination body, brining together service providers to deliver on other initiatives (such as Dying to Know Day, or ACP events).  | * Anam Care House Colac
* Ballarat Hospice Care Incorporated
* Barwon South West Region Palliative Care Consortium
* Grampians Region Palliative Care Consortium
* Grampians Health - Horsham
* Grampians Regional Palliative Care team
* Western District Health Service
* Palliative Care Victoria
* Shannon’s Bridge
* Barwon South West Regional Integrated Cancer Service
* Grampians Integrated Cancer Service
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