

Aligning policy objectives and payment designs in Palliative Care

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Palliative Care: Reform, Funding, Data
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Palliative care stories

- Because they don't class my situation as being "Terminal", even though there is nothing further my surgeons can do for me anymore, palliative care doesn't come to my assistance therefore I'm unable to receive IV pain medication in the home (Submission 282).
- Eastern Palliative Care have refused to help me twice because I cannot ... promise that I will be dead in three months though doctors give me less than 12 months but most of all care is denied me because I do not have cancer (Submission 47).
- Palliative Care gave her an extraordinary good final period of her life in which all members of her family were able to spend quality time with her until she eventually died. We look back on that time with much gratitude for the skills and dedication of the Palliative Care team in making this possible. Thanks to their efforts my sister's death was indeed a 'good death' and one that was accompanied with great dignity (Submission 255).

Directions for funding design in palliative care

Values		
Compassion		Access to care
		↕
		Quality provision
		↕
<i>(Autonomy/ patient choice)</i>		Patient choice of location of death
Social justice/ equity	Minimise financial barriers to access	No/ limit out-of-pocket costs
Responsible use of resources	Efficiency	Activity based funding (at National Efficient Price)

Duckett, Stephen (2018), 'Aligning policy objectives and payment design in palliative care', *BMC Palliative Care*, 17 (42).

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