Advance care planning appears such a sensible and logical process to assist in the approach to death but it has a relatively low uptake. Healthcare professionals have increased their consideration of decisions at end of life and now avenues to better engage the general community need broader discussion.

Aim A meta-analysis and primary research with Australian consumers were used to explore end of life considerations from the perspective of GPs, people in palliative care, consumers and carers. These studies investigated the role GPs play in initiating dialogue, the priorities of people experiencing palliative care and those yet to directly address death and how to assist in a better approach.

Methods 710 general consumers, 302 invited GPs, 692 people in palliative care and 936 bereaved carers were surveyed in 2012. Two focus groups further explored some of the issues raised.

Results Most conversations about death are triggered by a significant decline in health. While GPs are comfortable with the discussion when prompted, less than 2% rate their training as being comprehensive. 52% of consumers do not have a written advance care plan but feel their wishes are known. Carers do not share the same level of understanding. The sharing of an open discussion is hampered by confusing and uncommon terminology and euphemisms.

Discussion There is wide variation of attitudes and experience regarding death. Drivers of this situation are postulated and ideas to address better standards of care and the engagement of consumers earlier in their lives are explored.

Conclusion Greater responsibility of planning for death by families and individuals can be encouraged
by health professionals and community educators through appropriate engagement.