

## Morning Breakout 2—Policy

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### THE SAFETY AND QUALITY OF END OF LIFE CARE IN AUSTRALIAN ACUTE HEALTH SERVICES: A REPORT ON PRELIMINARY CONSULTATION INTERVIEWS WITH CONSUMERS, CLINICIANS, HOSPITAL EXECUTIVES AND GOVERNMENT POLICY-MAKERS

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**Background** During the course of the Commission's work on recognising and responding to clinical deterioration, it became clear that people who are dying in acute health services do not always receive appropriate end of life care. To scope the issues and identify where the Commission might contribute to improving the quality and safety of end of life care in acute health services, preliminary consultation was carried out.

**Aim** The primary aims of the preliminary consultation were to identify and explore issues that affect the safety and quality of end of life and terminal care in acute health services in Australia and identify current approaches to improvement.

**Methods** A series of focus group and individual interviews were conducted with consumers, clinicians,

hospital executives and policy makers at state and commonwealth level.

**Results** Themes emerging from consultation interviews include: poor recognition of dying by clinicians, and a subsequent lack of timely and appropriate decision-making; ambiguity in the meaning assigned to terms describing end of life, palliative and terminal care; fears held by clinicians; difficulty talking about dying; tensions between paternalistic models of care and patient autonomy; and the absence of pathways for escalating concerns regarding end of life care for patients dying in hospital.

**Discussion** The quality and safety of end of life care in Australian acute health services is variable and frequently sub-optimal because of multiple complex and interlinked individual and systemic factors.

**Conclusion** A formal consultation paper is being developed to test the findings and recommendations of the preliminary consultation more broadly.