RECOGNITION OF AND RESPONSE TO DETERIORATION IN RESIDENTIAL AGED CARE

Nearly one-third of people living in residential aged care (RAC) die within their first year of admission, with death being the leading reason for leaving care. Consequently, recognising palliative care as an integral component of residential aged care is essential.

The Royal Commission into Aged Care Quality and Safety (2021) found that many older people receiving aged care do not receive the evidence-based palliative care they need. This can result in:

- Suboptimal symptom management
- Avoidable hospitalisations
- Increased burden on staff providing care
- Difficult bereavement experiences for families and carers.[1]

To deliver high-quality palliative care, aged care providers and their staff require adequate systems, funding, and training.[2]

In 2023 and 2024, Ballarat Hospice Care Inc. (BHCI) received funding through the Comprehensive Palliative Care in Aged Care (CPCiAC) measure (2018) to strengthen palliative care delivery in residential aged care settings. BHCI partnered with the Grampians Region Palliative Care Consortium and its member organisations, the Grampians Regional Palliative Care Team (Grampians Health) and Central Highlands Rural Health[3] to deliver this project.

About the Project

Title: Comprehensive Palliative Care in Aged Care (CPCiAC) Project

Lead: Ballarat Hospice Care Inc.

Partners: Grampians Region Palliative Care Consortium and its members; Grampians Regional Palliative Care Team (Grampians Health), Central Highlands Rural Health (pilot)

Funding: Australian Government, Department of Health and Aged Care, and Victorian Government, Department of Health; Comprehensive Palliative Care in Aged Care measure (2018)

Duration: 07/2023 – 06/2026

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[1] Royal Commission into Aged Care Quality and Safety (2021): Final Report: Care, Dignity and Respect. Volume 3A. The new system. Web: https://www.royalcommission.gov.au/system/files/2021-03/final-report-volume-3a.pdf. Accessed on 14/07/2026.
[2] Cp. Palliative Care Australia (2017): Ensuring Palliative Care is Core Business for Aged Care. Web: https://palliativecare.org.au/wp-content/uploads/dlm_uploads/2017/05/PCA018_Guiding-Principles-for-PC-Aged-Care_W03-002.pdf. Accessed on 14/07/2026.
[3] Central Highlands Rural Health pilot sites were involved in the 2023/24 pilot.

Background

Research suggests that more than 90% of people who die in residential aged care could benefit from a palliative approach focused on comfort, symptom management, and quality of life. However, this need is often underestimated due to a narrow focus on end-of-life care. This highlights the importance of ongoing assessment and the early identification of palliative care needs.[4]

While many people can be supported by aged care staff and primary healthcare providers, some will require specialist palliative care services. Staff must be able to recognise complex needs and access specialist support when required.

This CPCiAC project aims to strengthen palliative care delivery in residential aged care by enhancing systems that support the early recognition of and response to deterioration, while also building staff knowledge, skills, and capability.

The project focused on implementing a systematic approach to identifying and responding to deterioration, ensuring:

- Regular assessment of every resident to identify palliative care needs and symptoms early, using best-practice assessment tools.
- Timely and appropriate follow-up of identified palliative care needs and symptoms, including referral to specialist palliative care services guided by clear referral criteria.
- Support for collaboration and shared care with general practitioners and specialist palliative care clinicians.
- Support for staff to build their palliative care knowledge and skills.

Photo by Age Cymru

Key Activities

1. **Identify gaps in the provision of palliative care** through engagement with residential aged care (RAC) services (pilot sites) and a systematic literature review.
2. **Develop, implement, and evaluate a pilot framework** that incorporates a model of care for the identification of and response to deterioration, using best-practice tools and integrating external support services.
3. **Review online and printed resources** to assess their accessibility and usefulness, and ensure easy, ongoing access to information and resources beyond the life of the project.
4. **Implementation of pilot project outcomes across residential aged care facilities** (RACFs) in the Grampians region, with a focus on:
   - Supporting RACFs to implement the model of care for the recognition of and response to deterioration, including:
     - the PACOP Deteriorating Resident Tool;
     - a facility-specific process map that reflects available external supports and resources; and
     - the Daily Symptom Assessment Scale.
5. **Supporting quality monitoring** and the **identification of quality improvement activities** to promote the ongoing sustainability of the model of care.
6. **Build palliative care knowledge and skills** within the residential aged care workforce through education, training, and professional development opportunities.
7. **Support shared, person-centred care through collaboration with general practitioners and specialist palliative care services**, promoting the use of evidence-based tools and a shared clinical language.
8. **Dissemination of project resources, outcomes, and key learnings** across the aged care and palliative care sectors.

[4] Cp. Humphrey G B, Inacio M, Lang C, Churches O F, Sluggett J K, Williams H, Morgan D D, To T H M, Kellie A, Wesselingh S, Caughey G E (2024): Estimating potential palliative care needs for residential aged care: A population-based retrospective cohort study. Australas J Ageing. 2024 Dec;43(4):782-791. doi: 10.1111/ajag.13345. Epub 2024 Jun 24. PMID: 38923185; PMCID: PMC11671706.

Outcomes

- **Comprehensive Palliative Care in Aged Care Resource Review** completed.
- **A Framework for the Delivery of Comprehensive Palliative Care in Residential Aged Care** was developed, piloted, and implemented across the Grampians region. The framework includes a palliative and end-of-life care model supported by best-practice assessment tools.
- **100% of residential aged care facilities (RACFs) in the Grampians region engaged in the project.** Each facility completed a gap analysis and received a tailored roadmap to strengthen the delivery of palliative care.
- **80% of RACFs (42 of 52 facilities) across the Grampians region implemented the palliative and end-of-life care model.**
- **68% of aged care residents across the Grampians region** (1,835 of 2,717 occupied beds) are routinely assessed for palliative care needs and symptoms using best-practice tools from a federally funded program. The model supports timely and appropriate responses to identified needs and symptoms, including referral to specialist palliative care services when required.
- **96% of RACFs across the Grampians region engaged in at least one palliative care education opportunity.** Additionally, 71% of facilities were represented at a minimum of two education opportunities and 42% at three or more, demonstrating both the need for education and a strong willingness to engage.
- **42% of RACFs (22 facilities) nominated palliative care champions** as a result of the project, with 49 new champions identified. This increased the proportion of facilities with a palliative care champion to **82% across the region.**
- **100% of general practitioners (GPs)** providing care to aged care residents across the Grampians region were offered the opportunity to attend an education session. **47% of identified GPs** supporting RACFs participated in education focused on recognising deterioration and the systematic approach implemented within facilities.
- **All specialist palliative care services** providing care to aged care residents across the Grampians region are aware of and actively support the systematic approach when delivering care to residents.
- **Monthly Aged Care Palliative Care Newsletter** distributed by GRPCC to support information sharing and sector engagement.
- **Bi-monthly Aged Care Palliative Care Community of Practice** facilitated by GRPCC to promote collaboration, knowledge exchange, and best practice in palliative care delivery.

Output

- **Systematic review** of barriers and enablers to the provision of palliative care in residential aged care and to the implementation of a sustainable model of palliative and end-of-life care
- **Framework** for the delivery of comprehensive palliative care in residential aged care, including a model of palliative care and end of life care
- **Model of palliative care and end of life care implementation guide** for residential aged care facilities with supporting resources, including (but not limited to)
  - Systematic approach train-the-trainer presentation
  - Systematic approach audit tool (CPCiAC Project)
  - Safer Care Victoria Care plan for the dying person audit tool (CPCiAC Project)
  - Queensland Health End of life care plan audit tool (CPCiAC Project)
  - ELDAC After death audit tool V2 tracker (CPCiAC Project)
  - Outcome 5.7 (Strengthened Aged Care Quality Standards) mapping document
- **Resources for General Practitioners**: Education session and booklet: Recognising deterioration towards the end of life and strengthening the delivery of palliative care
- **Palliative care resource folders** for staff and resident families; distributed to all RACFs
- **Aged Care Palliative Care resource hub;** Web: www.ac-pc.com.au