

COMPREHENSIVE PALLIATIVE CARE IN AGED CARE MEASURE

Schedule D - Victoria

PART 1: PRELIMINARIES

1. This schedule has been developed in accordance with clause 13 of the Project Agreement for Comprehensive Palliative Care in Aged Care and should be read in conjunction with that Agreement.
2. This schedule will commence as soon as it is agreed between the Commonwealth and Victoria and expires on 30 June 2024 or on completion of the project whichever is earlier, including final performance reporting and processing of final payments against milestones.

PART 2: FINANCIAL ARRANGEMENTS

3. The Commonwealth and Victoria estimated financial contribution to the operation of this Schedule are shown in Table 1.

| | 2019-20 | 2020-21 | 2021-22 | 2022-23 | 2023-24 | Total |
|--|--------------|---------------|--------------|--------------|--------------|---------------|
| Estimated total budget | 0.000 | 10.526 | 5.676 | 5.938 | 6.234 | 28.374 |
| Less estimated National Partnership Payments | 0.000 | 5.263 | 2.838 | 2.969 | 3.117 | 14.187 |
| Balance of non-Commonwealth contributions | 0.000 | 5.263 | 2.838 | 2.969 | 3.117 | 14.187 |

PART 3: PROJECT MILESTONES, REPORTING AND PAYMENTS

Estimated financial contributions – Projects 1,2,3,4 and 5

| \$million | 2019-20 | 2020-21 | 2021-22 | 2022-23 | 2023-24 | Total |
|--|--------------|---------------|--------------|--------------|--------------|---------------|
| Estimated total budget | 0.000 | 10.526 | 5.676 | 5.938 | 6.234 | 28.374 |
| Less estimated National Partnership Payments | 0.000 | 5.263 | 2.838 | 2.969 | 3.117 | 14.187 |
| Balance of non-Commonwealth contributions | 0.000 | 5.263 | 2.838 | 2.969 | 3.117 | 14.187 |

(a) Project 1 – Local capacity building – Improving access to palliative and end of life care in RACFs

Build capacity in residential aged care facility staff to recognise residents' clinical deterioration and establish processes and pathways to initiate, manage and where relevant escalate care to specialist palliative care providers.

This may include:

- Providing palliative approach to care – training for residential aged care facility (RACF) executive and staff, general practitioners presenters from palliative care sector;

- Comprehensive Health Assessment of the older person training for registered nurses with a similar program for aged care workers;
- Exploring capacity to establish, test and implement a Care Plan for the Dying Resident based on Safer Care Victoria's 2019 Care of the Dying Person project that focussed on inpatient services;
- A mentor program for aged care registered nurses to promote resilience and sustainable palliative and end of life care work practices; and
- Foster collaborative engagement with local community support services to build positive ageing and engagement in local community. This will promote development of sustainable relationships to support social inclusion. This will help residents maximise quality of life and support them, aged care workers and facility staff with socialising death and dying which will in turn support the facilities capacity to support grief and bereavement.

Phased implementation with a cross section of public aged care facilities in public metropolitan, regional and rural communities over multiple years.

(b) Project 2 – RACF frailty assessment tools – incorporate palliative care components

Review assessment processes in residential aged care with the aim to enhance early recognition of decline, reduce unnecessary deterioration, functional decline, decrease unnecessary hospital admissions among residents and incorporate palliative care components to establish baseline data and benchmarking opportunities.

This will build on previous work to enhance early recognition of clinical decline in aged care. In June 2020, during Victoria's second coronavirus (COVID-19) wave, Victoria introduced the COVID-19 Screening tool for residential aged care services to provide early detection of clinical changes to prompt screening for COVID-19. Feedback from residential aged care services using the tool showed that it was useful to identify early clinical deterioration for other common health conditions.

(c) Project 3 - Enhance RACF models of care

Explore models to strengthen Integration across multiple service streams/providers (consultancy services, community (non-admitted) and where available primary health networks.

Explore sustainability of 'palliative care pop-up clinics', 'rounding and admission profiling' with palliative care and aged care clinicians.

Enhancement of Outreach (Resi in Reach) services to include palliative care professionals and partnering with community palliative care providers to support in-situ care for residents with escalating palliative care needs.

Explore models to support joint appointments between palliative care providers and RACFs.

(d) Project 4 - Goals of care for RACF residents without decision making capacity

Partner with health service provider(s) to test, refine and implement resources to support families of residents without decision-making capacity to identify and record goals of care. Well-crafted goals of care can inform maintenance and end of life plans for residents thereby preventing unnecessary transfers to emergency departments for care not aligned to the resident's goals of care.

Where possible test goals of care approach with CALD residents and culturally centric RACFs.

(e) Project 5 - Resident Elders, promoting culturally safe Aboriginal and Torres Strait Islander palliative and end of life care for elders in RACFs

Partner with Aboriginal and Torres Strait Islander organisations to develop and implement a model of care that supports Elders to access culturally safe and effective palliative and end of life care. This may include:

- Developing scenarios, resources and artefacts that foster discussions and activities to establish goals of care for elders;
- Review and amend referral pathways promoting access to palliative care at a local/regional/Aboriginal and Torres Strait Islander community level; and
- Explore models to actively engage AHCW and liaison officers' engagement

4. In accordance with clause 15 of the Agreement, milestones for projects, their relationship to outputs, expected completion dates, relevant reporting dates and expected payments are set out in Table 2.

Table 2: Milestones, reporting and payment summary

| Output | Milestones | Report due | Payment |
|--|---|--|----------|
| The delivery of projects that expand existing models of care or support new approaches to the way care is delivered. | Execution of this Schedule and agreed Project Activities | Payment following the execution of this Schedule | \$5.263m |
| <p>1 (a) Build capacity in residential aged care facility staff to recognise residents' clinical deterioration and establish processes and pathways to initiate, manage and where relevant escalate care to specialist palliative care providers;</p> <p>2 (b) Review assessment processes in RACFs and RACF frailty assessment tools to incorporate palliative care components;</p> | <p>Interim Performance Report No. 1</p> <p>Undertake initial scoping and research to inform commencement of project 3(c).</p> <p>Commence the development and implementation of stakeholder engagement plan.</p> <p>Commence implementation of stage 1 of project 3(c):</p> <ul style="list-style-type: none"> • Rounding and admission profiling' with palliative care and aged care clinicians • Enhancement of Outreach (Resi in Reach) teams in regional and rural areas to include partnering with community palliative care providers support aged care facilities. | 30/06/2021 | NIL |

| | | | |
|---|---|-------------------|-----------------|
| <p>3 (c) Explore models to strengthen integration across multiple service streams/providers and where available primary health networks</p> <p>4 (d) Partner with health service provider(s) to test, refine and implement resources to support families of residents without decision-making capacity to identify and record goals of care; and</p> <p>5 (e) Partner with Aboriginal and Torres Strait Islander organisations to develop and implement a model of care that supports Elders to access culturally safe and effective palliative and end-of-life care.</p> | <p>Performance Report No. 2</p> <p>Project activities and milestones for this period include:</p> <ul style="list-style-type: none"> • Commence scoping and research to inform projects 1(a), 2(b), 3(c), 4(d) and 5(e). • Commence the establishment of project teams, governance and advisory groups for each workstream. • Commence the development of an evaluation framework that covers the 5 workstreams • Commence a baseline data collection for each project • Commence implementation stage 1 of projects 1(a), 2(b), 4(d) and 5(e). • Continue implementation of stakeholder engagement plan. | <p>30/04/2022</p> | <p>\$2.838m</p> |
| | <p>Performance Report No. 3</p> <p>Project activities and milestones for this period include:</p> <ul style="list-style-type: none"> • Commence implementation of stage 2 of projects 1(a), 2(b), 3(c), 4(d) and 5(e). • Interim reports of 5 workstreams (completion of stage 1). • Identify sustainable changes to models of care in project 3(c) and refine to support ongoing service delivery. • Continue implementation of stakeholder engagement plan. | <p>30/04/2023</p> | <p>\$2.969m</p> |

| | | | |
|--|---|------------|------------------|
| | <p>Draft Final Report</p> <p>(For the period from 1 April 2023 until the end of the Project period 31 March 2024)</p> <p>Project activities and milestones for this period include:</p> <ul style="list-style-type: none"> • Final report of 5 workstreams (completion of stages 1 and 2). • Commence implementation of sustainability options into model of care for residents of aged care facilities. • Finalise resources and education materials for goals of care for residents without decision making capacity and their families. • Complete final data collection incorporating all 5 workstreams. • Communicate evaluation findings to the sector • Release final resources and education material to the sector. <p>Report on the delivery of outputs as set out above.</p> <p>Evaluate the agreed Project as outlined in Table 2 and contribute to the overarching evaluation of the <i>Comprehensive Palliative Care in Aged Care Measure</i>.</p> | 30/04/2024 | \$3.117m |
| | <p>Final Report</p> <p>Submission of FINAL Report to also encompass the additional activities undertaken to 30 June 2024.</p> | 30/06/2024 | NIL |
| | TOTAL FUNDS PAYABLE | | \$14.187m |

Sign off

The Parties have confirmed their commitment to this schedule as follows:

*Signed for and on behalf of the Commonwealth of
Australia by*



The Honourable Greg Hunt MP

Minister for Health

[Day] [Month] [Year]

8/7/2021

*Signed for and on behalf of the
State of Victoria by*



The Honourable Martin Foley MP

Minister for Health

30 / 06 / 2021