



Trish Doyle MP

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New South Wales Parliament Legislative Assembly

Push for Palliative Petition Debate

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I acknowledge that this is the third debate on a petition with this wording presented to the New South Wales Parliament by Dr Yvonne McMaster.

Dr McMaster is a tireless advocate for palliative care reform and has to date worked with many people to collect more than 83,000 signatures in support of Push for Palliative reforms.

I acknowledge in the gallery today Rita Martin, representing the Nurses and Midwives' Association, as well as people who have travelled from all over New South Wales—from as far as Taree, the Southern Highlands, the Central Coast, the Hunter and the Blue Mountains, to name a few—testament to the breadth of concern for these issues in diverse and disparate communities throughout the State.

I also acknowledge the good work of the NSW Cancer Council and advocates throughout the State.

I have met with Dr McMaster in recent months and I spoke in this place a fortnight ago about the need for the New South Wales Government to do more to improve end-of-life care for patients in our hospitals and aged-care facilities and for people who wish to die with dignity in their homes with their families and community support teams around them.

Dr McMaster has shown how investment in community-based palliative care would provide net savings to the State while at the same time offering dying people the quality end-of-life care they are calling for.

Her colleague Dr Anthony Ireland has estimated that an additional investment of \$27 million would meet the funding gaps and lack of capacity within our health system for quality palliative care.

They calculate that such an investment would reduce costs elsewhere in the health system by some \$140 million, with reduced presentations at emergency departments and shorter average length of stay for patients who attend a hospital.

Currently there are around 36,000 deaths per annum where a person had visited a hospital in the year preceding their death, with an average of four hospitalisations per person. This adds up to around 30 hospital bed days per death at a cost of almost \$1 billion.

Not only is the use of emergency departments in a hospital an expensive way to manage palliative care; it also produces less than ideal outcomes for patients.

I note the Minister's written response to this petition in which she refers to funding and staffing within the broader health system that will apparently be deployed to provide palliative care on an ad-hoc basis.

In my view, this is an inadequate response to a growing area of need within the health system.

I implore the New South Wales Government to make direct and targeted investments in palliative care, in line with the recommendation of experts like Dr McMaster and Dr Ireland, to ensure better outcomes for the dying and to relieve pressure on our already overstretched emergency departments.