

Appendix 2: National and NSW data on palliative care activity and outcomes

National snapshot data 2013–14

149,800 people died in Australia and over 74,200 (50%) of these people died in hospital (as an admitted patient)

Less than 1% of hospitalizations are palliative-care related

People aged 75 and over accounted for just over half (51%) of all palliative care-related hospitalisations

44% of patients who died as an admitted patient received palliative care

Over half (53%) of palliative care hospitalisations involved cancer as the principal diagnosis

4% of residential aged care residents were assessed as requiring palliative care

1 in 1,000 GP encounters were palliative care-related

59,000 prescriptions that were palliative care-related were provided to almost 29,800 patients

Source: AIHW www.aihw.gov.au Episodes of admitted patient palliative care occurring in hospitals, using data on palliative care-related hospitalisations from the National Hospital Morbidity Database (NHMD).

Australia and NSW hospital activity 2013–14

Activity indicators	National palliative care activity	NSW palliative care activity
Hospitalisations which were palliative care-related:		
– number	62,200	18,010
– increase from 2009–10	11%	n.a
– proportion of all hospitalisations	<1%	<1%
– rate per 10,000 pop	24.1	26.7
– ALOS	11.2	10.9

Source: AIHW www.aihw.gov.au Episodes of admitted patient palliative care occurring in hospitals, using data on palliative care-related hospitalisations from the National Hospital Morbidity Database (NHMD).

NSW Snapshot data from linked data sets: Facts of Death 2011–12

Of 49,801 deaths in NSW in 2011/12, 76% presented to emergency departments and 77% of people were hospitalised at least once in the last year of their lives. This represents 165,000 hospitalisations using 1.4 million bed-days.

The average number was 4.3 admissions per person. 27% of people who died had only one admission but 24% had more than 10 hospitalisations.

The average length of stay (ALOS) in hospital was 13 days, which is three times longer than the average for all patients.

Only 7% of those hospitalized (and who died in that year) received designated palliative care services. About 23% of admissions for those receiving designated palliative care services were on an emergency basis.

Of those admitted to hospital at some time in their last year of life, 61% died in hospital (15% in their first and only admission, and 46% in a subsequent admission) and 39% outside hospital.

People with cancer were more likely than people with other diagnoses to receive designated palliative care services on admission. The most common non-cancer-related reasons for admission to designated palliative care services were congestive heart failure, pneumonitis, pneumonia, and stroke, not specified as haemorrhage or infarction.

The total cost of hospitalisations and non-admitted emergency presentations was about \$1 billion. Of the total cost, around \$977 million was for inpatient admitted care and \$32.5 million was for non-admitted presentation to ED. The average price per separation was \$7,482.

Source: ACI (2015) Fact of Death Analysis 2011/12 – Use of NSW public hospital services in the last year of life by NSW residents. Health Economics and Evaluation Team, and Palliative Care Network. 2015 updated edition, accessed on 12 January 2017 at www.aci.health.nsw.gov.au.