



6 November 2025

## **CEO Roundtable for Palliative Care – Meeting held on 29 October 2025**

### **Communique 13**

At our 29 October 2025 CEO Roundtable for Palliative Care meeting, 19 representatives from organisations with an interest in palliative care met to discuss the latest developments in palliative care in Western Australia.

In particular, the group discussed the recent Palliative Care WA (PCWA) survey results on the question: 'Do Western Australians have enough information on palliative care?'. The sector's opinions were collected over a two-week period. A total of 104 responses were received from a diverse group of responders, including palliative care health professionals, aged care providers, and community members, who made up 37%.

A summary of the confidential results was shared at the meeting. Strikingly only **12.5%** of respondents said that there is **sufficient information about palliative care**.

The key themes raised from the detailed written responses were:

- A lot of people still do not know what palliative care is. There is little discussion until they are faced with a crisis situation.
- Information on palliative care and also Voluntary Assisted Dying (VAD) is not easy to access. You have to know what you are looking for.
- Most people think palliative care is end-of-life (EoL) care.
- A lot of people don't need specialist palliative care, rather they need a palliative approach to their care which could be provided within the community. Getting generalist palliative care is variable. It is very much dependent on GP skill and interest. GPs need more support in providing generalist palliative care and supporting their patients to navigate the system.
- There are differences regarding information and access depending on whether you live in metropolitan or regional areas and what your diagnosis is.
- There is a difference in access based on medical diagnosis.
- Grassroots community education is crucial to promote options available to everyone.

A comprehensive discussion was had on if the results of the survey and accompanied statements were a surprise. The key themes from the discussion are summarised below:

- Literature shows that there are benefits of early access to palliative care, linking in with the primary care clinicians and providing a comprehensive person-centred care plan. Working on a model of care for key diseases is an important step in improving equitable and timely access. MND would be an ideal starting point to integrate with a newly diagnosed patient with a palliative care plan.
- A significant number of people do not need specialist palliative care; they need generalist palliative care with a coordinated care plan. Setting up comprehensive generalist palliative care can be challenging.
- Greater upskilling of carers and families is needed to help them access care in the community.
- It was reported that there is an emphasis on 'survivorship' in cancer treatment, and that clinicians can be hesitant to discuss palliative care.

- A State Government working group is looking at how to improve end-of-life care and early access to services, increasing people's death literacy and normalising conversations about death and dying.
- PCWA has been funded by the WA Department of Health to run Advance Care Planning Support Service sessions (ACPSS) which help the community to think, talk and document their plans for future healthcare.
- Consideration on how to improve access for GPs in goals of care discussions had in the hospital setting.
- Consideration of the impact of the changes in the aged care system commencing 1 November 2025, with the Home Care Support introducing a new EoL care program, <https://www.myagedcare.gov.au/types-care/end-life-care> and <https://www.health.gov.au/sites/default/files/2025-06/support-at-home-program-end-of-life-pathway.pdf> There should be a greater emphasis on having a conversation and planning.
- Need to consider bereavement education and support.
- Greater need for education of allied health professionals, especially paramedics in EoL and palliative care.
- Aware of the gaps in support, especially in rural regions and how to provide for better planning and support.
- Carers and the community at large need more conversations about 'death' making it a mainstream conversation for all. Having early, frequent and normalised conversations on people's wishes.
- Acknowledging and supporting the vital role that unpaid, informal carers play in supporting people to die well.

The CEO Roundtable meets three times each calendar year. The next meeting is scheduled to be in February 2026.



*Meeting attendees from left to right back row: Andrew Allsop, Barbara Voight, Neil Dorgan, Donelle Rivett, Dr Alison Parr, Etta Palumbo, Maeve Egan, Liz Behjat, Anna Kirk, Tim Ryan, Nicole Hoskins, Marnie Chellew-Hawley. Front row from left: Shelly Skinner, Dr Elissa Campbell and Lenka Psar-McCabe.*

## Meeting attendees

- Dr Elissa Campbell, President, Palliative Care WA – meeting facilitator
- Lenka Psar-McCabe, CEO, Palliative Care WA
- Dr Alison Parr, Clinical Lead Palliative Care, WA Department of Health
- Neil Dorgan, A/Program Manager, WA Department of Health End of Life Care Program
- Marnie Chellew-Hawley, Principal Policy Officer (Palliative Care), Health Networks, Department of Health
- Barbara Voight, Nurse Educator, Palliative Care, NMHS
- Nicole Hoskins, Nurse Director, State Health Operations Centre, WA Department of Health
- Richard Newman, CEO, Carer's WA
- Andrew Allsop, Director Clinical Operations, Silverchain Group
- Donelle Rivett, Executive Manager Corporate Support and Projects, Director of Nursing, Bethesda Health Care
- Liz Behjat, WA-NT State Manager, Ageing Australia (PCWA Board member)
- Professor Samar Aoun AM, Perron Institute Research Chair in Palliative Care UWA, Chair of Compassionate Communities Australia
- Etta Palumbo, CEO, Neurological Council of WA
- Tim Ryan, Manager PaSCE, Cancer Council WA
- Anna Kirk, Manager Complex Care, St Johns WA
- Maeve Egan, CEO, MNDAWA
- Shelly Skinner, CEO, Lionheart Camp for Kids
- Jo Micallef, Partnerships, Events and Administration, Palliative Care WA
- Liz Rehfeldt, Marketing and Communications, Palliative Care WA

## Apologies

- Professor Davina Porock, Research Fellow, School of Nursing and Midwifery, ECU (PCWA Board member)
- Jackie Boyce, CEO, Albany Hospice
- Tish Morrison, Program Manager Palliative Care, WAPHA
- Margherita Nicoletti, Clinical Lead End of Life Care, WA Department of Health End of Life Care Program
- Clare Mullen, Executive Director, Health Consumers' Council
- Yasmin Nglasis, CEO, Parkinson's WA
- Catherine Stoddart, CEO, Brightwater Care Group
- James Jarvis, CEO, Busselton Hospice Care
- Amanda Silla, Program Manager, WA Department of Health End of Life Care Program
- Melanie Marsh, Supportive Care Director, Cancer Council WA
- Renae Lavell, Executive Director, Silverchain Group
- Daniel Hitchcock, Director Corporate Services, Hall and Prior
- Dr Ian Dey, Chief Medical Officer, WAVED, Department of Health.