Palliative care needs and supports provided by Palliative Care Connect to individuals living alone

Government of South Australia
SA Health

I would like to acknowledge the traditional owners of the land on which we meet today and pay my respects to their Elders past and present and extend that respect to other Aboriginal and Torres Strait Islander people who are present today.

Living alone with a life-limiting illness is a unique vulnerability

- The number of people living alone at the end of life is increasing
- It is estimated that 28% - 48% of Australians with palliative care needs will be living alone by 2031

(Luc et al. 2026, Aoun et al. 2016)

Living alone with a life-limiting condition

> People living alone may experience greater challenges in meeting their palliative care needs due to:

- limited availability of informal caregiving support
- increased risk of social isolation
- and greater barriers to accessing and coordinating health and community care services

(Luc et al. 2026, Aoun et al. 2016)

Palliative Care Connect

Palliative Care

Statewide Navigation Service

Aboriginal Navigation Service

Grief & Bereavement

Bereavement Navigation Service

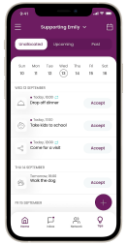
Bereavement Counselling

Volunteer-sector

Palliative Care Volunteering SA

Practical and social support

HEALTHY END OF LIFE PROGRAM



Information and resources

Website: palliativecareconnect.com.au

Objective of the study

- To identify the unmet palliative care needs of people living alone with life-limiting illnesses accessing PCC
- To describe the key supports provided by the project to this group
- To examine the main outcomes achieved

Methods

- Data from 152 Palliative Care Connect episodes of care:

✓ Demographic and diagnosis profile

✓ Reasons for contacting the service

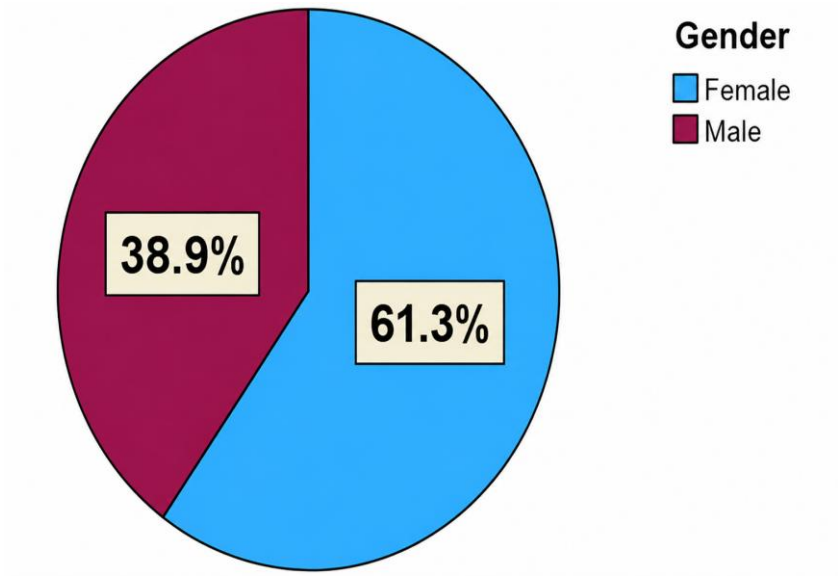
✓ Main supports provided by Palliative Care Connect

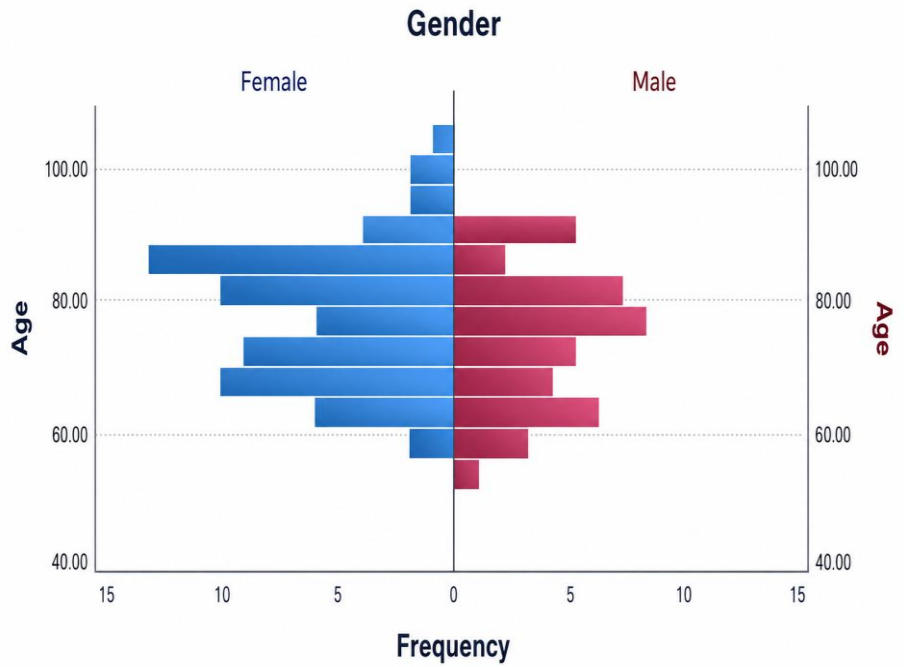
✓ Main navigation outcomes achieved

Demographics (I/II)

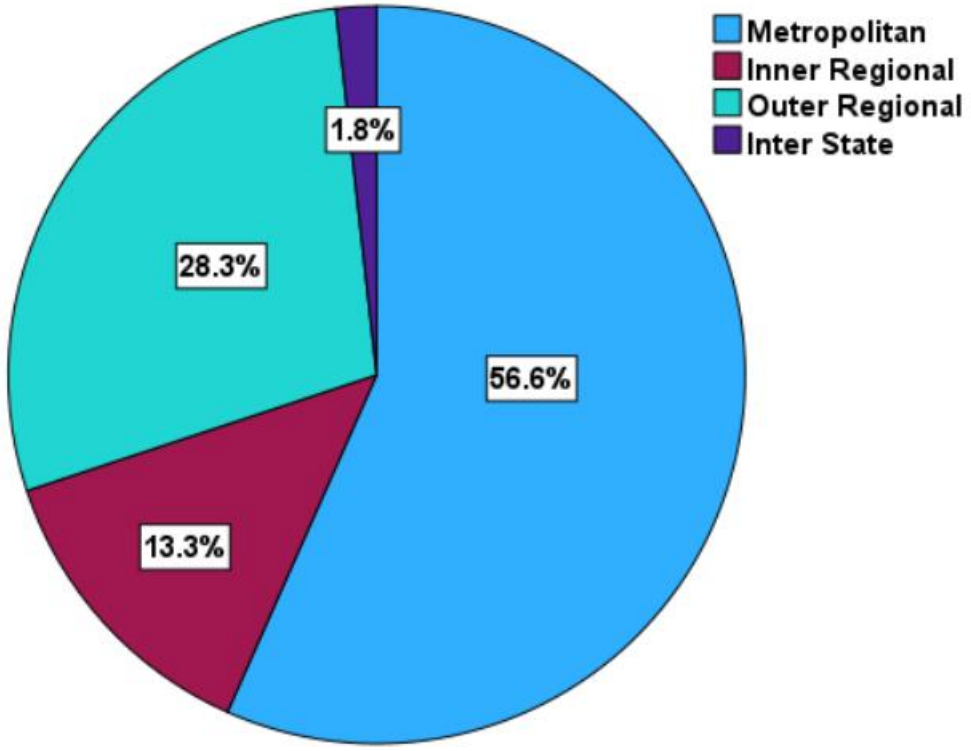
Age range: 52-107 years

Mean age: 77.36 ± 11.62





Demographics (II/II)



Who called the service

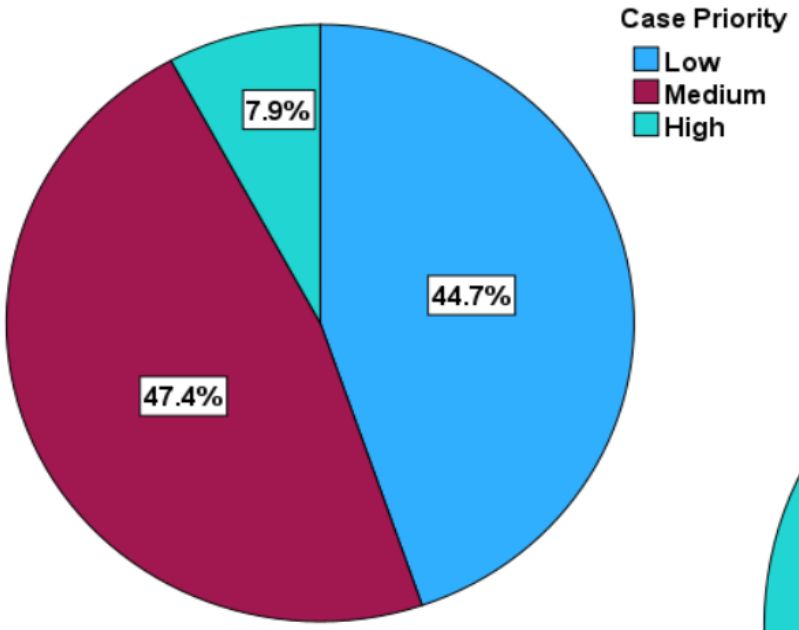
Who called the service	N	Percent
Family member	62	47.3
Patient	49	37.4
Friend	8	6.1
Other	12	9.2
Total	131	100

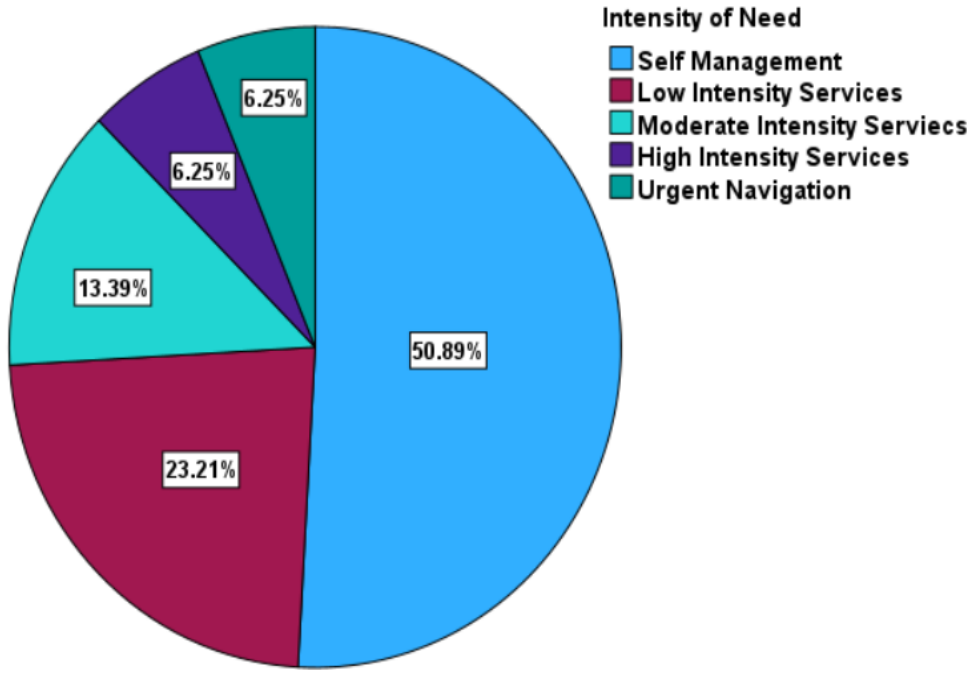
- Patient and family-initiated contacts: Community awareness and accessibility

Diagnosis

Diagnosis	N	Percent
Cancer	83	62.9
Respiratory failure	15	11.4
Cardiovascular disease	9	6.8
Dementia	4	3.0
Other	21	15.9
Total	132	100

Case priority and Intensity of need





Why users contacted Palliative Care Connect

Main reason for contacting PCC	N	Percent
Navigating healthcare system	68	44.7
Access to palliative care	58	38.2
Home-based care coordination	39	25.7
End of life planning	26	17.1
Psychosocial support	21	13.8

Contact reasons per case:
Range: 1- 9
Mean: 2.35 ± 1.56

Supports in place per case:
Range: 1 - 5
Mean: 1.97 ± 0.93

How Palliative Care Connect helped

Main supports provided	N	Percent
General navigating support	63	51.4
Specialist palliative care	26	17.1
Health services navigation	23	15.1
GP	15	9.8
My Aged Care	15	9.8
Advanced care directive	11	7.2
Psychosocial support	11	7.2

Supports provided per case:
Range: 1 – 12
Mean: 2.60 ± 2.03

Referrals made per case:
Range: 0 - 6
Mean: 0.75 ± 1.17

Main achievements of Palliative Care Connect

Main Achievement	N	Percent
Empowerment and informed decision-making	90	59.2
Access to support services	38	25.0
Improved care coordination	31	20.4
Timely access to services	26	17.1
Facilitation of home-based care coordination	25	16.4

Achievements cited per case:
Range: 1- 6
Mean: 2.1 ± 1.34

Conclusion (I/II)

PCC:

- Supporting people living alone to navigate the health and social care system
- Improving access to specialist palliative care
- Responding to strong demand for home-based care coordination

Conclusion (II/II)

- Providing psychosocial supports and facilitating end-of-life planning
- Engaging family members as key partners in care coordination

References

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- Aoun S, Breen LJ, Skett K. Supporting palliative care clients who live alone: Nurses' perspectives on improving quality of care. Collegian 2016; 23: 13-18.

- Aoun S, Kristjanson LJ, Oldham L, Currow D. A qualitative investigation of the palliative care needs of terminally ill people who live alone. Collegian 2008; 15: 3-9.

- Aoun SM, Wall D, Kristjanson LJ, Shahid S. Palliative care needs of terminally ill people living alone: a service provider perspective. Collegian 2013; 20: 179-185.

Palliative Care Connect

1800 PALLI8 (1800 725 548)
Available Monday to Friday from 8:30am to 4:00pm

palliativecareconnect.com.au

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