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Assessing the value of palliAGED resources

Professor Jennifer Tieman & Dr Raechel Damarell
Research Centre for Palliative Care, Death and Dying
Flinders University

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palliAGED is funded by the Australian Government Department of Health, Disability and Ageing

The University acknowledges the Traditional Owners and Custodians of the lands on which its campuses are located, these are the Traditional Lands of the Arrernte, Dagoman, First Nations of the South East, First Peoples of the River Murray & Mallee region, Jawoyn, Kaurna, Larrakia, Ngadjuri, Ngarrindjeri, Ramindjeri, Warumungu, Wardaman and Yolngu people. We honour their Elders past, present and emerging.

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Why this study?

End-of-life care is a core part of the services provided by the aged care sector. An ageing population and increasing demand for aged care services, will increase the sector's role in caring for older people as they decline and die

Aged care reforms highlight the need for person-centred, evidence-based palliative and end-of-life care. Aged care standards include a specific outcome for palliative and end of life care in Clinical Standard 5.

Staff and services can feel challenged by palliative care and can lack confidence and skills in delivering care.

palliAGED provides evidence-based palliative care information, tools, and resources for the aged care sector.
Tools and resources are customised for the scope of practice of different professional groups.

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Aims & Methods

- To investigate how palliAGED resources are accessed, used, and valued by aged care staff across diverse roles and settings
- To explore the impact of palliAGED resources and understand where this impact occurs
- To identify gaps and opportunities to strengthen the relevance, usability, and alignment of palliAGED resources.

Mixed methods study conducted between September and December 2024. Interviews with aged care staff (ordered resources, LMS request) + Focus group with Palliative Care Aged Care Network (PACN) + survey of aged care staff (using Practice Tips booklet).
Independently coded the transcripts within NVivo software using an inductive approach that allowed patterns of meaning—or codes and themes—to be constructed across interviews rather than allocated to predefined categories.

Flinders University Human Research Ethics Committee (ID: 7635).

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Key Findings

Interviews and focus groups (n=19)

Four main themes from qualitative analysis

Theme 1: Readying for Outcome 5.7: The current picture

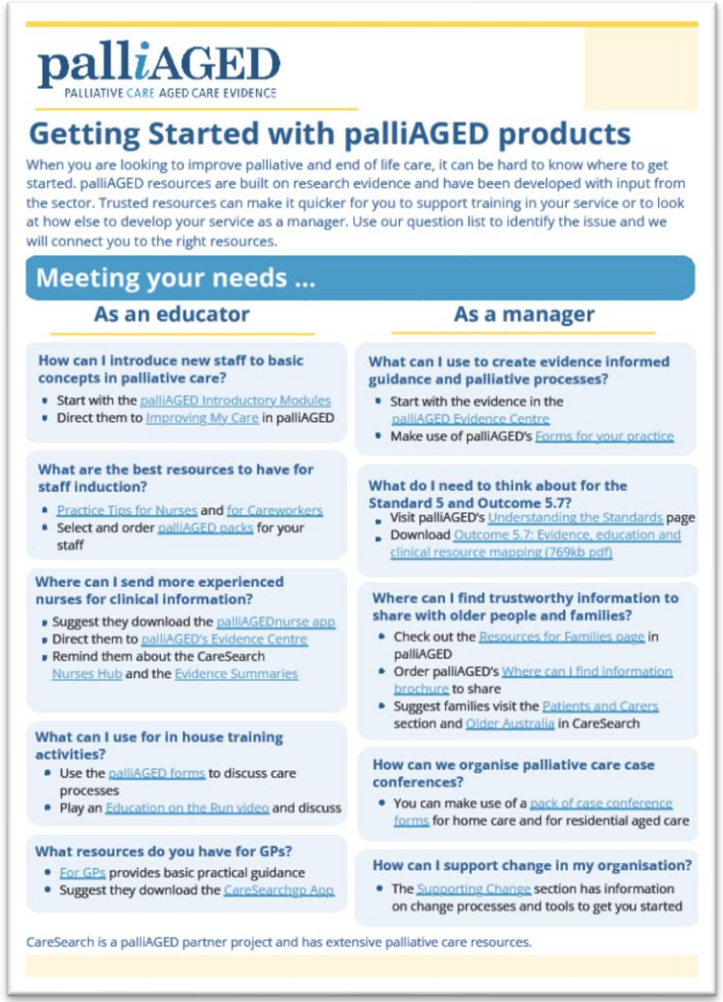
Theme 2: Use of palliAGED resources by the sector

Theme 3: The impact and value of palliAGED resources

Theme 4: What is still needed: Gaps and opportunities for support.

Survey responses (n=11)

Low participation rate but respondents confirmed value of palliAGED resources and described how they had applied knowledge in practice.



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Getting Started with palliAGED products

When you are looking to improve palliative and end of life care, it can be hard to know where to get started. palliAGED resources are built on research evidence and have been developed with input from the sector. Trusted resources can make it quicker for you to support training in your service or to look at how else to develop your service as a manager. Use our question list to identify the issue and we will connect you to the right resources.

Meeting your needs ...

As an educator

How can I introduce new staff to basic concepts in palliative care?
- Start with the palliAGED Introductory Modules
- Direct them to Improving My Care in palliAGED

What are the best resources to have for staff induction?
- Practice Tips for Nurses and for Careworkers
- Select and order palliAGED packs for your staff

Where can I send more experienced nurses for clinical information?
- Suggest they download the palliAGEDnurse app
- Direct them to palliAGED's Evidence Centre
- Remind them about the CareSearch Nurses Hub and the Evidence Summaries

What can I use for in house training activities?
- Use the palliAGED forms to discuss care processes
- Play an Education on the Run video and discuss

What resources do you have for GPs?
- For GPs provides basic practical guidance
- Suggest they download the CareSearchgp App

As a manager

What can I use to create evidence informed guidance and palliative processes?
- Start with the evidence in the palliAGED Evidence Centre
- Make use of palliAGED's Forms for your practice

What do I need to think about for the Standard 5 and Outcome 5.7?
- Visit palliAGED's Understanding the Standards page
- Download Outcome 5.7: Evidence, education and clinical resource mapping (769kb pdf)

Where can I find trustworthy information to share with older people and families?
- Check out the Resources for Families page in palliAGED
- Order palliAGED's Where can I find information brochure to share
- Suggest families visit the Patients and Carers section and Older Australia in CareSearch

How can we organise palliative care case conferences?
- You can make use of a pack of case conference forms for home care and for residential aged care

How can I support change in my organisation?
- The Supporting Change section has information on change processes and tools to get you started

CareSearch is a palliAGED partner project and has extensive palliative care resources.

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1. Readying for Outcome 5.7: The current picture

Participants widely agreed that palliative and end-of-life care is already part of everyday practice in residential aged care. *For many, Outcome 5.7 was viewed, not as a new requirement, but as a long-overdue validation*. But there were the challenges with the low level of palliative care foundational knowledge of new nurses entering aged care.

There's this huge, big baseline information that needs to be poured out and filled into every all the gaps and spaces. That's kind of where we're coming from at the moment. And then hopefully, at a point, there'll be some level of saturation. Then we can start to build, you know, more in-depth focused education.

Providing palliative care is a part of what we do in aged care. I don't think that there has been such a focus on the education. And I think that where we need to go next is to make sure everyone's really very clear about their roles and responsibilities.

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2. Use of palliAGED resources by the sector

Study provided insights into how resources are used within services

Type of service use	Activity examples
palliAGED used in ed & training	Used in team huddles, meetings, toolbox talks, and formal training.
Induction & orientation	New staff are introduced to palliAGED through orientation packs, inductions, and early training.
Champions & peer led	Champions distribute materials, lead team discussions, and model reflective practice
Facilitate reflection & critical thinking	Tip sheets and booklets are used to prompt individual and team reflections, helping staff think beyond clinical tasks to the emotional and holistic aspects of dying
Just in time education	Education is triggered by real-time care needs, such as when a resident begins deteriorating.
Family communication & support	Resources are shared with families to explain care, reassure, and support decision-making
Resources integrated	Resources are incorporated into learning management systems, palliative care kits, and internal procedures
Personal/informal use	Staff members independently share resources, leave them in common areas, or use them in personal education
Supporting CQI	Supports ongoing improvement initiatives, such as staff development days or standards compliance

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3. Impact and value of palliAGED resources

palliAGED resources were seen as a strong fit for their training and care delivery needs.

Valued attribute	Supporting quotes
Brevity	I think the short sharp videos [Education on the Run] are really helpful. The palliAGED ones are brilliant because we can actually do them between handover.
Simplicity	They're very direct and they're very easy to understand.
Format	So I think that the videos [Education on the Run] are amazing as well because they're something that the PCWs will look at and understand. It's visual. If we find a [knowledge or skill] gap, we can just print that one page [tip sheets] and give it to everybody to do a read.
Credibility	The content of them is incredible. And they, you know, they're evidence based and they're amazing resources.
Accessibility and useability	It's been really easy to find stuff on your website. I'm a #1 fan of the tip sheets. For me, it's a valuable resource for the staff here in the facility. .... Sometimes I forget something and then flip and "OK. Then that's it." It's really a good tool that you go back to and it's easy to understand.
Relevance	I found that they're quite informative. Even though they are brief, they're very relevant topics like the myths about morphine, for example.
Enabling compliance	The benefit of the online modules is that record of completion in terms of auditing in terms of compliance, I can say that I've offered the opportunity for people to learn and in the record, they've completed it
Tailored to scope of practice	If we give the education, it's mixed with the registered nurses and the care staff. So there are times that if you talk about the roles of the RN in the same scenario, the care staff say, "Oh, what's that?" So, it's not really specified for them. But with the booklet, they can see the basic things that they need to do without overstepping. And also knowing what the registered nurses are doing. So that's specific for them, which is very good.

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4. What is still needed

Awareness of palliAGED remains limited, especially among frontline care workers and resource can still be improved.

Suggested improvement	Actions to be taken
The Introduction Modules required too much hyperlink navigation to external resources	The palliAGED modules will be reviewed by a working group in the second half of 2025. Content will be revised to align more closely with the new Aged Care Act and Standards. As part of this activity, external links will be minimised with pertinent detail embedded directly within the slides.
Slides in modules felt too low-level or not interactive enough	The revised modules will be produced in Articulate which allows for more interactivity. Knowledge checks, quizzes, videos, and simple animations will be considered for inclusion, alongside more substantive content.
Module interface and design felt outdated	Refresh the module layout and visual design to reflect contemporary online learning standards. Ensure it is clean, modern, and mobile-friendly.
Tip sheets and modules felt visually dated (e.g., 1980s/1990s)	Redesign tip sheets with updated fonts, layouts, and visual branding. Use colour, icons, and formatting in line with contemporary aged care resources.
Bereavement booklet covering both aged care entry and end-of-life felt mismatched	To be considered in future editions
Language in tip sheets may be difficult for careworkers with English as a second language	Review language for plain English use. Consider translating core tip sheets or developing simplified versions with visual aids.

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Conclusions

Staff across different roles consistently described the resources as accessible, relevant, and applicable to daily care, particularly during times of clinical uncertainty or family distress.

The findings indicate that the suite of palliAGED resources, rather than any single product, delivers the greatest benefit.

But broader uptake will require continued efforts to raise awareness across the sector.

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Thank you

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