

5 Advocacy Tips for Allied Health in Palliative and End-of-Life Care in Aged Care

Here are practical tips for allied health professionals to advocate for their role in palliative and end-of-life care to aged care providers. The tips have been tailored to be useful when addressing Standard 5 Clinical Care (applicable to all aged care settings where clinical care is delivered) and specifically Outcome 5.7 Palliative care and end-of-life care of the Strengthened Aged Care Quality Standards.

1

Link Your Practice to Outcome 5.7 Language

Use the exact language from Outcome 5.7 when communicating with aged care providers.

For example:

- “Our service supports the recognition and response to changing needs as individuals approach end-of-life (5.7.1).”
- “We contribute to comfort, dignity, and holistic care planning (5.7.3), including psychosocial and cultural needs.”

This positions your work as essential to meeting compliance and quality benchmarks.



2

Highlight Your Role in Early Identification

Allied health professionals often notice subtle changes in function, mood, or mobility during working with older people. Advocate for your role in:

- Recognising when a person’s health might be deteriorating, flagging this with the aged care provider and how you can contribute moving forward.
- Be familiar with tools like the SPICT or “Surprise Question” which nursing and care staff use to trigger end-of-life care planning. These tools can be found in the [ELDAC Clinical Tools](#) page.

By referring to changes in health similarly identified in the common clinical tools, you can help to trigger care pathways that can support timely palliative and end-of-life care.





3 Advocate for Your Role in End-of-Life Conversations

Outcome 5.7.2 encourages ongoing end-of-life planning. Allied health professionals often have frequent, trusted contact with clients, making them ideal facilitators of these conversations.

- Document discussions about wishes, fears, or advance care planning that may arise during service delivery, and flag or initiate on-referrals where required.
- Suggest training or inclusion in multidisciplinary planning meetings where you can speak to strategies that support comfort and dignity in end-of-life e.g. eating and drinking with acknowledged risk (EDAR).

Allied health professionals working in end-of-life care may find clinical activities become less of a focus but can offer valuable contributions in supporting conversations with staff, clients and their family around managing health deterioration in a way that honours the persons wishes and offers clarity around health expectations.

4 Use ELDAC and palliAGED Resources

Refer aged care providers to evidence-based tools that support your role, or use the resources to upskill yourself in best practice palliative and end-of-life care in aged care:

- [ELDAC Allied Health Toolkit](#): Includes overviews of the roles and end-of-life clinical activities different disciplines can offer, and funding models.
- [palliAGED Evidence, education and clinical resource roadmap](#) lists freely available resources mapped to aspects of palliative care and end-of-life care that have been acknowledged in Outcome 5.7.
- [RePaDD Allied Health Professional Development Plan](#) – has been curated for allied health professionals to upskill and enhance confidence in delivering palliative and end-of-life care.





5

Collect and Report on Outcome Data

In health settings, data drives meaningful change by highlighting needs, identifying gaps, and informing targeted improvements in care and service delivery. To raise the profile of allied health work and outcomes, consider sharing:

- Outcome improvements associated with quality indicators which aged care providers report on quarterly (e.g., reduced falls, reduced malnutrition).
- Outcome improvements in quality of life for the client (and where relevant, their family), linking this directly to Outcome 1.1 Person Centred Care, in the context of palliative and end-of-life care.
- Case studies showing how allied health input has been valuable, particularly within novel service frameworks, can build confidence towards repeat referrals and embedding care pathways into usual practice.

Collating data that clearly demonstrates the value to clients and assists aged care providers in responding to clinical care outcomes will help to embed allied health services into palliative care pathways.



Next steps

- Why not also consider sharing successes in advocating for and delivering excellent allied health end-of-life care with us via the [ELDAC Allied Health Toolkit page](#).
- Would you like to contribute to advancing best practice for allied health professionals in palliative care and end-of-life care for older people? We would love to hear from you! [Get involved](#).
- For further learning on working as an allied health clinician and addressing Outcome 5.7 Palliative care and end-of-life care of the Strengthened Aged Care Quality Standards – why not also check out the new [Allied Health Professional Development Plan](#).

