PCOC 20 YEARS

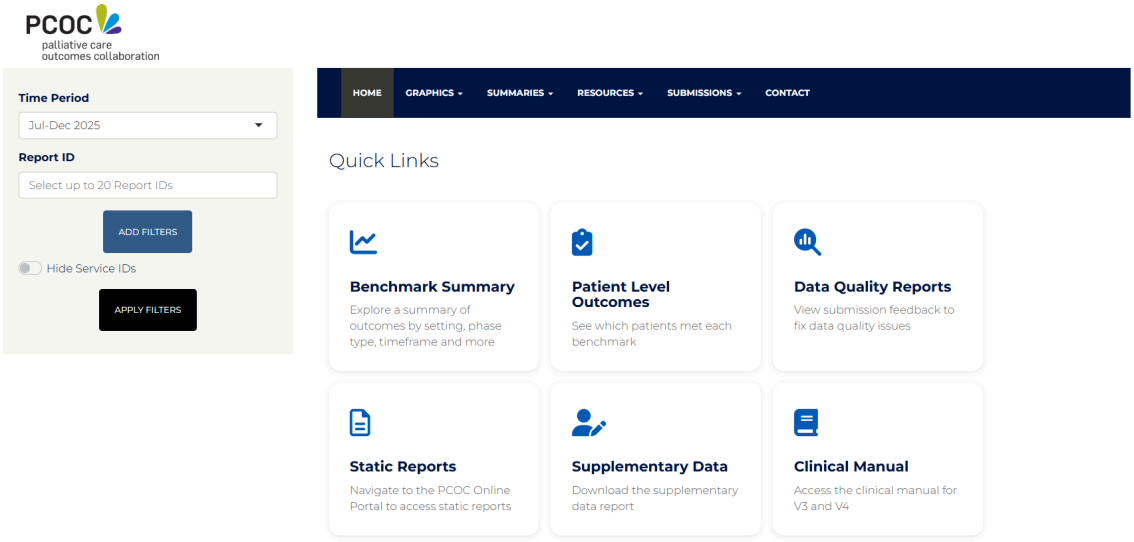
Celebrating 20 years in improving palliative care outcomes

April 2026 Newsletter

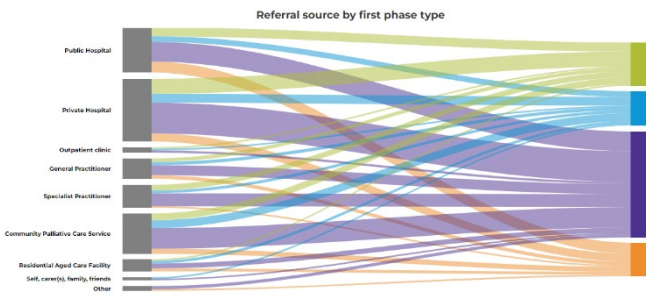
Released! PCOC Interactive Dashboard

We're very excited to announce the launch of the **PCOC Interactive Dashboard!**

This is a **dynamic digital platform** that is **responsive to clinical enquiry** and enables **tailored auditing, trend analysis and benchmarking**.

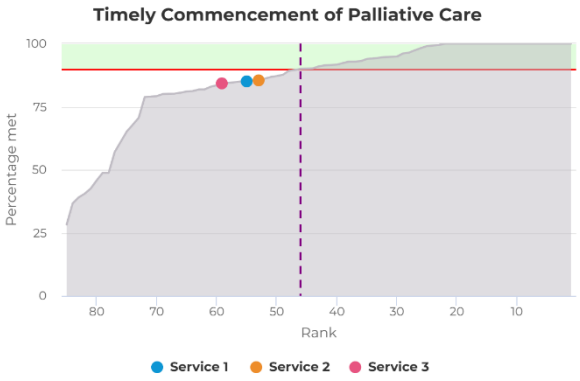


The Interactive Dashboard is an **innovative and secure platform** which allows clinicians to **maximise the rate of quality improvement** within their services by:



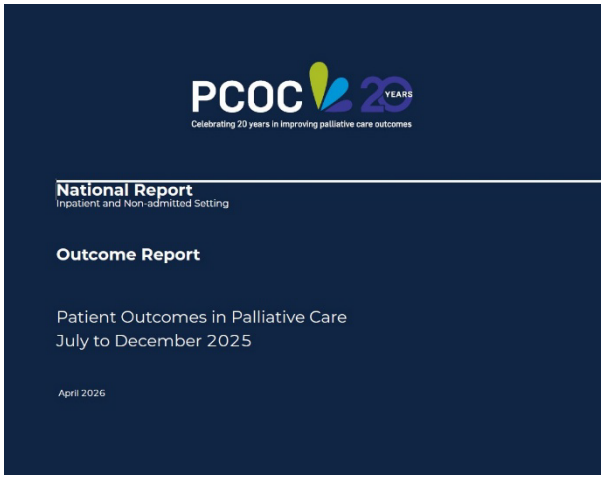
- Creating **customised reports** using filters
- Drilling down from **aggregated to unit record data**

- **Comparing benchmark performance** with more similar services
- Introducing **data and visualisation export functionality** for further analyses and presentations



To apply for access to the dashboard, please get in touch with us at **pcoc@uow.edu.au.**

PCOC National and State Reports (Jul-Dec 25)



The **National Outcomes Report** outlines outcomes of **230 services, 43,153 patients, 53,782 episodes of care** and **110,903 Palliative Care Phases.**

Among important findings, **dementia diagnoses** (including Alzheimers dementia and Other dementia) **increased by approx. 13%** from 2024 to 2025.

State and Territory symptom Outcomes for **NSW and ACT, QLD, SA, VIC, WA** are now **available.**

Head to the Reports page on our website to read more!

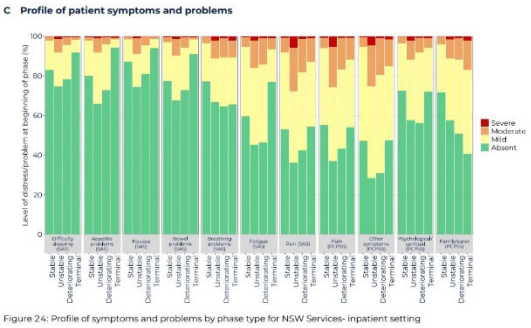


Figure 24: Profile of symptoms and problems by phase type for NSW Services- inpatient setting

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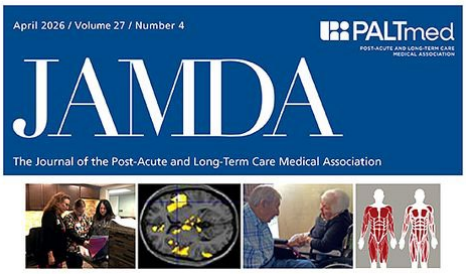
Service Outcomes Reports

Service-level outcomes reports have been **released**! Access your services reports via the **PCOC Online Portal (POP).**

What's New in PCOC Research?

'Utilization and Post-Admission Duration of Palliative Care Among General Practitioner—Referred Patients: A Retrospective Cohort Study' - Ayalew et al. (2026).



The study included **25,124 patients** with life-limiting illnesses **referred by GP's** between 2019 and 2024, who received palliative care from services registered with PCOC.
Findings? GP-referred patients were **predominantly admitted to community-based palliative care**, and most of them received specialist palliative care for a **shorter duration than recommended** - indicating an opportunity for further research into **needs-based referrals from general practice**.