

40 STORIES IN 40 YEARS

Judi Greaves



Over the years, Judi Greaves has played a prominent role in the palliative care sector. As a former Chairperson of Palliative Care Victoria (PCV), Judi is passionate about increasing access to palliative care services, regardless of diagnosis or geography.

Judi has an extensive history in the healthcare sector, the majority in palliative care. She started her journey as a hospital trained registered nurse in Melbourne.

"I received my nursing registration in 1980, and had developed a strong interest in oncology during my training. In 1983, however, I decided to have a six month working holiday in Perth. At this time, I was planning to steer away from nursing for a while prior to embarking on midwifery studies overseas.

"During my search for a job, an advertisement for a home hospice nurse with Silver Chain Hospice Palliative Care Service piqued my interest. I applied, still with the expectation of short-term employment because I didn't envisage staying that long in Perth. However, I loved Perth, and loved the job and wasn't ready to leave either. I felt I'd found my niche. The midwifery plans were aborted and I stayed working with Silver Chain Hospice for 14 years."

During her time at Silver Chain, Judi took a year's leave of absence to focus on developing her knowledge of oncology. She completed an oncology course in London, which gave her insight into the journey patients had been on prior to entering palliative care.

She also did a PhD in palliative care, and, on returning to Melbourne in 2006, a post doctoral fellowship at Monash University with Professor Margaret O'Connor.

"I continued with research in palliative care and was subsequently employed at Peter MacCallum Cancer Centre, coordinating research in the Pain and Palliative Care department there."

"What started as a fill-in job in Perth soon became a passion of mine. While working at Silver Chain Hospice Care Service, I became a committed palliative care person."

Throughout this time Judi was also heavily involved with PCV, which she describes as a "pivotal and meaningful time in her career." She joined PCV on her return to Melbourne, and went on to be a Board Member for ten years, two as Chairperson, stepping down in 2018.

"I feel very privileged to have worked with such an amazing organisation. I am still a member, despite retiring and moving to NSW in 2019. I am still passionate about palliative care and keenly interested in PCV's work. I endeavour to keep those connections, despite the physical distance and restrictions due to COVID."

"We need a few champions to really mentor people in the field and to lead by example. I believe that everyone deserves the highest level of care at the end stage of life."

When looking back over her many years in the sector, Judi agrees that while awareness of the term 'palliative care' has been achieved in mainstream healthcare and community circles, she believes people still don't fully understand what it is.

"Since I entered the sector, research has expanded, training is widely available, and the level of care has undoubtedly improved. No longer constrained to a majority of oncology patients, all people with a life limiting illness can benefit from palliative care. Significant efforts have been undertaken to include education to all communities, and extending access to marginalised groups including homeless people and people in jail. It is great to see that communities are becoming more aware about palliative care."

"However, in my opinion, while community and healthcare sectors have embraced palliative care, they have not translated it into practice very well."

"From my experience working in the field, palliative care is more than treating pain and having a nice environment with oil burners at the bed side as someone is actively dying. The work we do is about holistic care, it begins early in a disease trajectory, and it takes a team approach.

"As a community, I think there is still a lot of work we need to do to get that message across. In the next 40 years, not only do we need to model it, but we need to model it well and this requires more resources."

"While there has been lobbying of Government resulting in support for research and service development, much of this has been one-off. We need ongoing support for palliative care. We're still not doing enough."

"Palliative care continues to struggle with access and equity. We still need to try to reach minority groups including communities in rural and remote areas."

Judi also says that while the sector still faces challenges, when palliative care is done well there are positive experiences to come from what most people consider to be a tragic circumstance.

"When someone is at the end of their life, their last experiences of care matter. It is paramount that we make those experiences as rewarding as possible for everyone involved. The way to care for palliative patients is communicating and listening to the person and their families at every stage of the process.

"With this mindset and attitude there is an existential growth for both the patient and the family members, and ultimately the community. When death is managed well, dying can be a peaceful and rewarding experience.

"I believe the principle way to sustain palliative care is to harness the enthusiasm of people working in the sector. It's inevitable that people will continue to die, and I truly hope that people will continue to care about how they die.

"The work of raising awareness as is happening at PCV is essential. There is hope that with expansion of palliative care to all communities and with dedicated professionals we can continue to make end-of-life experiences matter."