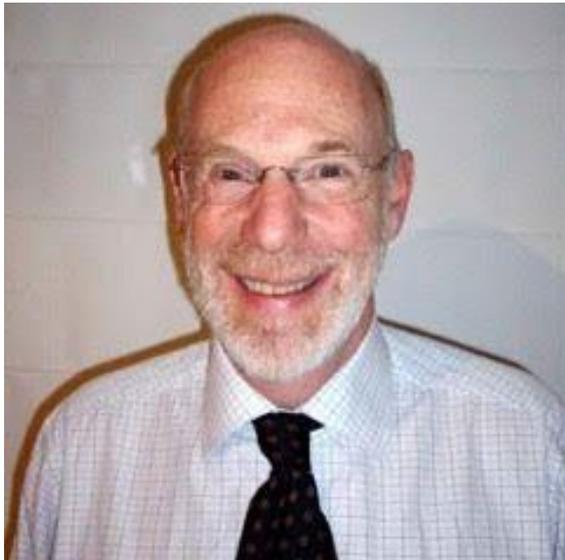


Dr David Brumley OAM



Dr David Brumley OAM has had an incredible and rewarding career in the healthcare sector. With a strong passion for clinical practice, David is committed to providing palliative care services to patients, families, and communities.

Growing up in Cavendish, a small town in Victoria's south west, David studied at a local high school before moving to Melbourne University's Trinity College to complete his medical studies.

"I had my heart set on being a GP quite early on and didn't want to stay in the city, so I

moved down to Ballarat to do my first two years of residency at the Ballarat Base Hospital. After the initial two years, I decided to learn more about paediatrics and commenced a job at the Royal Children's Hospital."

David then took an extended break from work to travel. Upon his return, David moved back to Ballarat, and worked as a GP for about 10 years.

"I am often asked why I started working in palliative care, and really, there is no single reason. However, I can put it down to two key moments."

"The first was when I was tasked with caring for a very senior member of the practice in which I worked. At the time, palliative care was not something I had trained in, so he basically told me what to do himself! In the end, he died a comfortable death so I decided good end of life care was something I wanted to learn more about."

"The second was a lecture by Dr. Rosalie Shaw. I was struck by her understanding about life and medicine. She was a nurse and a teacher before she became a doctor. She was equipped to understand how nurses work and knowledgeable about managing teams – a leader from whom I wanted to learn."

"At the time Dr. Shaw was the Medical Director of a hospice in Perth. So, I went to Perth for 6 months and did an internship with her. Apart from my master's degree, this was the only formal training in palliative care that was then available."

After David returned from Perth, he recognised that there was interest from the community in developing a community based palliative care service, so he worked alongside a dedicated team to create Ballarat Hospice Care Inc, a community based palliative care service. He eventually became the Medical Director.

“Over the next few years, we realised we needed to create an in-patient palliative care unit as well. We worked with the Ballarat Health Services to create a 12 bed in-patient palliative care unit called Gandarra.”

It was a busy time for David. Not only was he the Medical Director for Ballarat Hospice Inc. and Gandarra, he was also responsible to travel and support palliative care teams in the wider region.

“The service covered a huge area, stretching in a ‘V’ shape from Bacchus Marsh to the South Australian Border and included country towns like Ballarat and Nhill.”

David continued as the Medical Director for both Ballarat Hospice Care Inc. and Grampians Regional Palliative Care for a number of years, before moving to the Geelong area in 2015. Since moving to Geelong, David’s involvement in palliative care has not wavered. He currently works part time at both Epworth Geelong and St John of God Hospital, as well as in working for Bellarine Health in-home care on the Bellarine Peninsula.

“I quite enjoy working in the community and enjoy supporting families whose loved ones want to die at home.”

"Not only does Palliative Care Victoria teach the wider community about palliative care, but it has also helped me to understand it in a deeper level."

As well as his involvement in a clinical setting, David has close ties with Palliative Care Victoria (PCV) as a life member and former Board Member.

“I had a strong interest in Palliative Care Victoria’s mission, so I ended up joining the team and learning a lot about Board responsibilities and management. I spent about five years on the board – it was such a great experience.”

“I was on the board at a very interesting time, when voluntary assisted dying was introduced. There were many different opinions about it, and it was fascinating to engage in so many debates and meetings with PCV and other people around Melbourne. After going through a whole career in the industry, this was the first time my opinions were tested. The conversations I had helped form my ideas about palliative care too.”

“Since then, I have softened my opposing views of Voluntary Assisted Dying. While I am not completely on board, VAD is now legal and I understand that it is possible to respect that decision and continue to provide palliative care support to people who have chosen that path.

"I think part of your job when working in palliative care is to challenge and change people's mindset about death."

Across his career, David has seen many changes within the sector.

"Access to palliative care has certainly improved. As well, doctors are more compassionate and willing to make referrals without prejudice."

"There has also been a social change around death. Peak bodies like PCV have been able to educate and inform communities about palliative care, which has helped in some part to change the negative views about death and dying."

"The industry as a whole is also more accepting of palliative care as a speciality. Drawing upon my own experiences, when I was working in Ballarat, there were inevitably misunderstandings about palliative care. Now better understandings make it easier to work with other specialists. We are open to collaborative discussions, and we respect each other's skills."

However, David still believes there are gaps in service provision. He would like to see improved communication between sites of care, and more continuity of care from GP's.

"One of the things I have learn working closely in palliative care is that when people are provided with the right support and education, they are able to support a dying relative at home."

"Research has shown that about 7 out of 10 people would prefer to die at home rather than in a hospital. This is likely to be generally higher now with the advent of COVID as our own statistics have shown a large increase since the last survey."

"We need to continue this education and support to show that death is not something that should be feared or something to run away from. Instead, it should be acknowledged and accepted as a standard part and just stage of life."