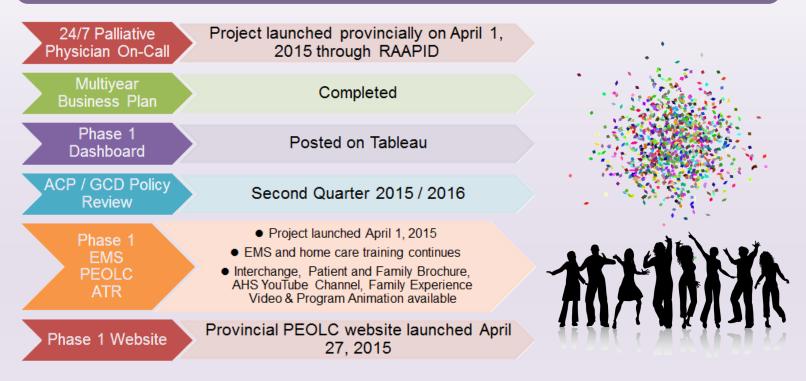


# Provincial Palliative and End of Life Care

July 2015

#### Provincial Palliative and End of Life Innovations Steering Committee Initiatives Update



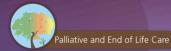
The Palliative and End of Life Innovations Steering Committee met recently on June 9, 2015 and endorsed two program charters. The first charter includes phase 2 of the Provincial Palliative and End of Life Care <u>Website</u> and Palliative Dashboard Indicators. It also includes three new initiatives: Community Support, Palliative and End Of Life Care Volunteer Network Support Plan and a Provincial Bereavement project. The second charter covers phase 2 of the PEOLC EMS—Assess, Treat and Refer project. These charters have been presented and approved at the Alberta Health Services Clinical Operations Executive Committee.



The provincial PEOLC team would like to express our thanks for the many hours of time, effort and commitment to those individuals who have participated on the steering committee, working groups and those who have contributed to the development and implementation of these framework initiatives.

The steering committee will not be meeting over the summer and plans to reconvene in September. We hope everyone has a healthy and restful summer.

#### HAVE A WONDERFUL SUMMER!



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#### Advance Care Planning / Goals of Care Designation

The ACP/GCD 1 year policy review is nearing completion. The ACP/GCD provincial team, along with the assistance and guidance of Clinical Policy, Legal and Ethics, have been busy making final edits to the ACP/ GCD policy and procedure to ensure all key points and issues are thoroughly captured. A companion FAQ guide will accompany the policy and procedure.

Over the next few weeks, the newly revised Policy and Procedure will be shared with the provincial ACP/GCD Implementation Committee prior to presentation at Clinical Operations Executive Committee. It is anticipated that the new ACP/GCD policy will go live in July or August of 2015.

For any questions related to ACP/GCD and the 1 year Policy review, you may wish to contact Claire Neeland (Claire.neeland@albertahealthservices.ca) or Max Jajszczok (max.jajszczok@albertahealthservices.ca)



www.converstationsmatter.ca

#### **Volunteer Network Support Plan Initiative**



Identify baseline volunteer support services for PEOLC in the community across the province. Deliverables for this initiative includes:

Create standardized best-practice recommendations to help guide healthcare providers and volunteer managers to enhance and improve the effectiveness of PEOLC volunteer

programs and services in Alberta

- recommendations for best practice Develop guidelines for PEOLC training and education for PEOLC healthcare providers and volunteer managers/volunteers.
- Complete a cost analysis to explore what funding would be required to implement PEOLC Volunteer services and education/training to all areas of Alberta based on the recommendation's that are created.

## **Community Support Initiative**

Identify common tools and resources needed to incorporate PEOLC into the community setting. Deliverables for this initiative includes:

- Develop a toolkit with guiding protocols and support documents to assist foundations. community groups, associations. contract providers, fundraiser organizers, and other non AHS community PEOLC groups to facilitate the goal of further enhancing and developing local PEOLC services and supports as appropriate.
- Review and identify evidence-based resources and tools required to develop successful PEOLC community supports.
- Outline comprehensive communication strategies to establish and enhance PEOLC services into communities, along with engaging communities and groups.





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## **Provincial PEOLC Website 2.0**



The Palliative and End of Life Care (PEOLC) website:

#### https://myhealth.alberta.ca/palliative-care

was successfully launched April 27, 2015 in both desktop and mobile version.

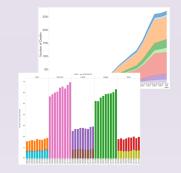
Health care providers and the public now have access to "just in time" health information and resources on PEOLC topics and new provincial initiatives such as PEOLC EMS ATR program

In Phase 2 we are developing and enhancing the website further, adding more rooms to achieve our mansion. The working group is also working to promote awareness of the PEOLC website and develop an evaluation strategy so that the user-experience is fantastic. We welcome any comments or suggestions you have.

Contact Sharon.iversen@albertahealthservices.ca

## Dashboard 2.0

- Further identification of palliative and end of life care indicators.
- Development of additional data which will be published on Tableau.
- Benchmarking with national indicators and data.



#### Bereavement

What does it mean to provide bereavement care? Why is it important? Where do frontline providers and volunteers fit in the delivery of bereavement care? What role does the workplace play in supporting the delivery of compassionate and sensitive care at the time of death and post death? These are the type of questions the new bereavement working group will wrestle with.

 To begin we had our first working group meeting June 4<sup>th</sup>. Membership is still growing so if you are interested in this project please contact <u>Sharon.iversen@albertahealthservices.ca</u>



alliative and End of Life Care

#### Our goal is to:

- Create recommendations for bereavement care based on best practice in Alberta, a literature search and current state analysis will inform best practice.
  - Create recommendations for workplace education and training so that volunteers and frontline health care providers feel confident providing the right bereavement support at the right time.
  - Create a bereavement service and program directory and publish on Provincial PEOLC Website



## **PEOLC EMS—Assess, Treat and Refer**

"Working together to bring emergency care to palliative and end of life patients."



The Emergency Medical Services Palliative and End of Life Care Assess, Treat and Refer (EMS PEOLC ATR) program is designed to support patients and their families who have chosen to remain at home for palliative and end of life care. It links clinicians with EMS resources to support patients in the community who are experiencing palliative emergencies in the hope that patients may be managed in place, rather than transported to an acute care setting. The program allows EMS to provide onsite emergency care in consultation with the patient, family, onsite health clinician, and an on call physician. This interdisciplinary program helps community clinicians (registered nurses, nurse practitioners, licensed practical nurses, physiotherapists, occupational therapists, respiratory

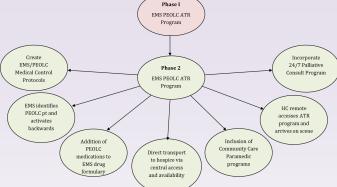
therapists or physicians providing care in the home) access EMS to collaboratively manage PEOLC emergencies to keep patients at home, when appropriate, improving patient and family experiences and reducing the impact on emergency departments.

#### How does this program work?

Watch our brief program animation <u>https://www.youtube.com/watch?v=UGDNCUjC1Cw&feature=youtu.be</u> to get a quick overview!

Phase I of the program launched on April 1, 2015. Community clinicians and EMS practitioners from around Alberta are currently completing training and starting to activate the program. EMS and community clinicians have collaboratively provided care for a number of patients in their homes since the program launch with great success. From administering additional medications in the home, to providing support with additional equipment such as suction or oxygen, the program is already making a positive impact on patient and family experiences at end of life. Click here to watch a brief video highlighting one family member's experience with the program: <a href="https://www.youtube.com/watch?v=zNMpJuKCyZs&feature=youtu.be">https://www.youtube.com/watch?v=zNMpJuKCyZs&feature=youtu.be</a>.

Phase 2 of the EMS PEOLC ATR program charter has been approved by Clinical Operations Executive Committee. There will be a face to face planning meeting with the working group in the fall to brainstorm and refine the components of phase 2. These components would include the evaluation of phase 1, the incorporation of phase 2 protocols, additional medications, exploration of direct transport to hospice via central access and increased access to the EMS PEOLC ATR program.

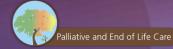


#### Where Can I Find out More?

A comprehensive education package has been created for

community clinicians and EMS practitioners (staff training is available on both My Learning Link and Continuing Care Desktop). For general inquiries related to the EMS Palliative and End of Life Assess, Treat and Refer Program, email us at <u>EMS.Palliative@albertahealthservices.ca</u>.

You can also visit our website at <u>www.myhealth.aberta.ca/palliative-care/about-us/ems-program</u> to access resources for both the public and healthcare providers. To learn more about how this program is being implemented in your zone, contact your local leadership team.



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#### **Central Zone**

We have successfully completed our first presentation of the new Pallium LEAP curriculum in Vegreville, with good feedback from the participants and facilitators. We have a second course running in Red Deer June 25 & 26, and will follow up more in the fall. We are also looking at how we might best use the new LEAP mini sessions.

Over the past year, our Palliative Care Consulting team has collaborated with the Central Zone educators to present a basic 1 day palliative care course with great success. The expert content is provided by the Palliative Care (PC) Nurses and the facilitation expertise is provided by the educators. At the end of the day, one or more Palliative Nurses joins the group (often by phone) to assist with the Q & A that rounds out the days experience. This has been so well received, that even more sessions are planned for the 15/16 education calendar.

The PC Nurses were also busy providing several virtual sessions focused on caring for a palliative client and family in the home from admission to death and beyond. Again, this has been really well received and many more sessions will continue to be provided in the coming year. With the success of this course, the nurses are now working on a course focused on the palliative client and family in Long Term Care.

Finally, one of our frontline nurses has created a visual aid for Advance Care Planning conversations, which is now being adapted through collaboration between her and the provincial ACP/GCD team – watch for this great tool to be available in the near future! The full story will be shared when the tool is ready for distribution.

## "Rural Hospice Solution" Pilot project



From left to right: Jon Angevine, Charlene Schramm, Marion Kasawal, Kathy Kemmere, Shelley Bennett, and Harold Johnsrude



The Olds & District Hospice Society is excited to offer an innovative option to offering hospice palliative care in a rural setting as they unveiled two new hospice suites at their grand opening on January 28<sup>th</sup>. Located in the new Sunrise Encore Supportive Living building, they offer just under 700 square feet of homelike living with a small kitchen, living room and separate bedroom, as well as a wheelchair accessible bathroom in each suite. They are fully furnished, with comfortable furniture and all the niceties of home such as books, art and writing materials. The intent to invite people into a space that is able to meet their loved ones needs, while being comfortable enough to encourage and support them to be there as much as they can. There is also a sofa bed in each to allow family and friends to stay overnight.

There is *no cost to clients* for the suites – all accommodation and hospitality costs are covered by the Olds & District Hospice Society through their fundraising efforts and health care needs are met by Alberta Health Services Home Care Program.

Admission to the suites is by standardized Home Care assessment – client's must understand that they are dying and accept the palliative care offered in the suites plus meet criteria such as having a terminal diagnosis with a prognosis of 4

months or less. All assessed needs are care planned and case managed by a Home Care Registered Nurse, with care provided by onsite Licensed Practical Nurses and Health Care Aides in collaboration with the Case Manager. Medications and additional equipment needs will be covered by Alberta Blue Cross Palliative Care Drug Program and the Alberta Aids to Daily Living Program for eligible clients. All of this is supported by the trained Society volunteers, without whom, this journey would be much more difficult. The volunteers provide bedside sitting, respite for family and other services that have been identified as gaps in service for palliative clients and their families.

It's an exciting innovative approach to hospice care in smaller communities that would struggle to operate and maintain a stand-alone hospice. It speaks to the collaboration with the private sector and volunteer organizations. We hope this is just the beginning of a model that can be adapted to other communities throughout Alberta. We can't wait to see the 6 and 12 month outcome measures of this pilot's success!





## North Zone

Although the LYNC palliative care education sessions are on hold for the summer months, the North Zone Palliative Care Resource Team is still available to assist staff with their palliative care questions and requests for consultation. We have been pleased to provide a LEAP mini course in Peace River with Dr Kim Adzich from Central Zone and Michael Wilson, PCRN on May 23/15. The full LEAP course was provided in Bonnyville June 19 and 20, 2015 with Dr Irma Kirtzinger, Terri Woytkiw, Loretta Manning and Amy Regnier.

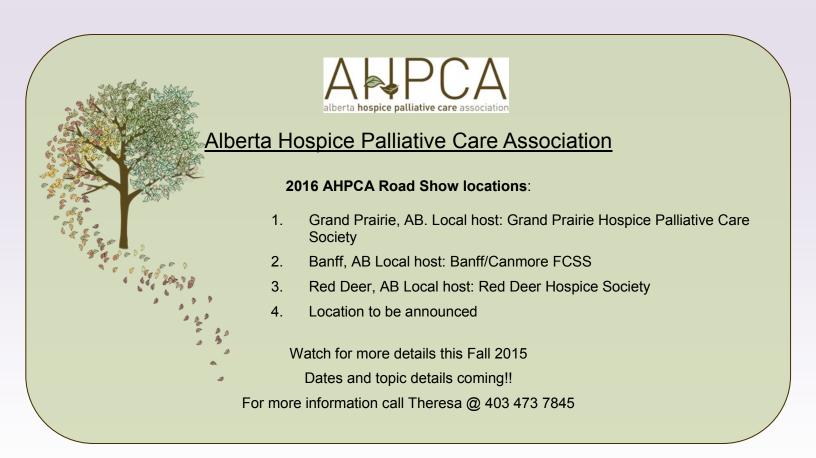
On June 18, 2015 Chere Petkus, Recreational Therapist and Michael Wilson, PCRN offered a 2 hour summarized presentation of the 2015 Volunteer Palliative Care Workshop Training to 12 volunteers in the Manning Community. Societies that are interested in hosting this session are encouraged to contact their PCRN or volunteer coordinators.

For staff that would like to have the one hour "Golden Hour" from Pallium Canada on Taking Ownership in Palliative Care offered in your area or would like other palliative care education for staff please contact your North Zone Palliative Care Resource Team.

The North Zone Palliative Care Resource Team is available weekdays to help staff with questions about palliative care, provide clinical consults and access to the Virtual Pain and Symptom Clinic. Call your PCRNs Loretta Manning, RN, BScN: 780 645 3396 or Michael Wilson, RN, MN: 780 836 7362

Consults can be directed through Continuing Care Access at 855 371 4122 or fax 855 776 3805

After hours rural physicians may speak directly with a palliative specialist through RAAPID: 1800 282 9911



## **Calgary Zone**

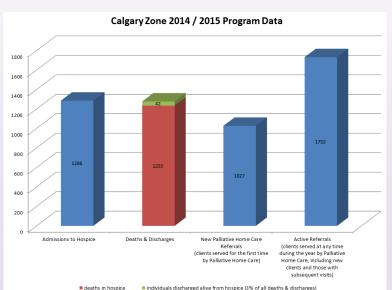
Dulcina Hospice opened May 19. The hospice is operated by Covenant Care in northwest Calgary. The 26 resident spaces replace Santuari Hospice which closed May 29, 2015.

The Palliative Home Care Response Team Workload & Outcomes project (Phase 1) is complete. The project aims to examine after-hours patient and family needs and explore alternative service delivery models to better meet those needs & support clinical practice within available resources. Phase 1 abstract and summary are available to anyone interested.

Both the Mary O'Connor Hospice & Palliative Care and Canadian Society of Palliative Care Physicians conferences were recently hosted by Calgary and were each a great success.

The Hospice Information Transfer project is also currently underway. This project is an effort to enhance the quality of information shared with our contracted hospice partners before, during and after patient transfer.

The Calgary Zone Palliative and End of Life Care program is working with Data Integration Measurement and Reporting; Quality, Accountability and Program Support; and Information Technology to be able to merge data across PEOLC programs and better answer questions within and across the continuum of care.



From left: Claudette Whiting, volunteer, and Marj McNeil, program coordinator

## Living Well with Cancer

Marj McNeil plays a leading role in helping adults living with advanced cancers experience dignity and wellbeing as they complete the arc of their lives. As the coordinator for Hospice Calgary's Living with Cancer program, she and her volunteers work hard to ensure that those who attend the year-round, weekly group at Sage Centre are supported in ways that are meaningful for them.

Claudette Whiting has been part of the Living with Cancer volunteer team for the past 15 years. During her nursing and teaching career she was drawn to the needs of oncology patients and their families. "I was heartbroken to see how little support was available then," says Claudette. Marj and her dedicated volunteers welcome

the participants with hugs and smiles. Everyone is given the opportunity to share what has been happening during their week, stay for lunch and take part in the planned activities.

The program allows those who attend to normalize their experience. One group member told Claudette, "When I come here, I no longer feel like a patient, I feel like a worth-while human being again." "The cancer journey can be a lonely road. This program takes people out of that isolation and invites them to be part of this caring community," says Marj.

"Volunteering here brings me full circle from what I experienced in my nursing days. My role now is to be a caring presence for people nearing the end of life," says Claudette.

The Living with Cancer Program received a national Program in Action Impact Award for Innovative Programming. This award recognizes an individual, group or program that has made a lasting impact on the Canadian Cancer Society's mission.

Contact Hospice Calgary for more information or to refer clients to the program.

E-mail info@hospicecalgary.com or call 403-263-4525.



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ADVANCE CARE PLANNING CONVERSATIONS MATTER GOALS OF CARE DESIGN AT AUE



## Canadian Hospice Palliative Care Conference

Join us for what promises to be a wonderful learning and networking experience!

**The Canadian Hospice Palliative Care Conference** is the foremost national conference in Canada focusing on hospice palliative care. This event provides hospice palliative care professionals, volunteers, family and informal caregivers, and other allied health care providers with an opportunity to share their experience and expertise on a national platform.

#### **PROGRAM FEATURES:**

- Opening Ceremonies
- Welcome Reception
- CHPCA Interest Group Meetings
  Concurrent Abstract Driven
- Workshops and Oral Presentations • Poster Presentations
- Exhibit Hall
- Celebration of Life
- Celebration of Life
- Access to the Evening Soirée

#### **THREE PLENARIES:**

Leadership: The Patients Will See You Now – Are You Ready? Presenter: HUGH MACLEOD

Clinical Practice: Not a Fingerprint Left – Staff Grief Presenter: MARY SCHULZ

Advocacy and the Palliative Approach: New Challenges and New Horizons – How Do We Move Forward? Presenter: SHARON BAXTER

## SIX SATELLITE SESSIONS:

Pediatrics: Transitions in Pediatric Palliative Care

Pallium Canada: *Mobilizing Your Compassionate Community* 

Nurses Standards: Nursing Roles, Responsibilities and Licensure – Specific Competencies in Hospice Palliative Care

Social Workers: Scoping Out Social Work Curriculum in Hospice Palliative Care

Long Term Care: Palliative Care and End of Life Care at Home... When Home is a Long Term Care Facility

TVN Research: Identification of Frailty – A Gateway to Open End of Life Discussion

#### **NINE CHALLENGE PANELS:**

Advance Care Planning: Can We Talk?

Integration and the Palliative Approach: East Meets West – Two Provinces Making Palliative Care a Reality

First Nations: Closing the Gap in Palliative Care Services in First Nations Communities

Pediatrics: Symptom Management or Euthanasia? Palliative Sedation in the Pediatric World

Self-Care: Exploring the cost of Our Caring – Reacting, Acting, and Transforming

International: Not a One-Way Street! Building Global Capacity in the Palliative Care Movement

Knowledge Translation: *Making Knowledge* Translation Live in Policy and Practice – Closing the Circle

**Bill 52:** Bill 52 and the March 2015 Supreme Court Decision – What is the Impact on the Palliative Care Community?

Public Health: Palliative Care is "Everybody's Business"



If you would like to sign up for conference alerts, please contact info@chpca.net

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Canadian Hospice Palliative Care Association

Association canadienne de soins palliatifs

Ottawa Westin Hotel • Oct. 29 to Nov. 1, 2015 For more information visit www.conference.chpca.net



#### **Other work**



#### The provincial PEOLC team is also involved in the following work:

- PEOLC SCN Pathways and Guidelines Project
- Leading an Expert Panel on the Impact on Palliative End of Life Care Services arising from Physician Hastened Death - Physician Assisted Suicide and Euthanasia; and
  - Peritoneal Drainage Level 1 Policy Working Group

#### Contacts



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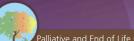
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