October 31, 2019

**Kingston Palliative Care Partnership Seeking**

**Patient and Family Experience Advisors**

***Do you have a recent experience using palliative care services or supporting a loved one who has? Do you have a story to share? We need your voice to inform our work!***

The Kingston Palliative Care Partnership is seeking Patient and Family Experience Advisors to help shape the future of palliative care services in Kingston and surrounding areas. Our goal is to create an integrated and seamless model of care that would support patients and families throughout their journey. Palliative care is the active holistic care of individuals across all ages with serious health-related suffering due to illness, and especially for those nearing death. It aims to improve the quality of life of patients, their families and their caregivers.

Patient and Family Experience Advisors are persons with recent experience as a patient or as a family member of a patient (generally within the last three years) and who work with health service providers to provide direct input into policies, programs and practices which affect patient care and services. The role of advisors will be to keep the patient and family as the focal point of our healthcare system.

**Are you interested in…?**

* Sharing your story and bringing the patient and family lens to focus?
* Participating in quality improvement projects and system design?
* Helping to improve palliative care service delivery?
* Working collaboratively with health care professionals in a partnership that is based on mutual respect and open communication?

We are looking for Advisors to support a number of initiatives across the continuum of palliative care. To learn more about the different opportunities to become engaged, please submit your Expression of Interest to: Marika.Rowe@KingstonHSC.ca . Although we will be continuously accepting applications, please note that we will be starting to identify advisors for some projects starting **November 15, 2019**.

**Expression of Interest**

**Section A: Applicant Information**

|  |  |
| --- | --- |
| **Name:** |  |
| **City:** |  |
| **Telephone:** |  |
| **Email:**  |  |
| **Date:** |  |

**Section B: Your Interest and Contribution**

**In the past 3 years have you or your family used palliative care services in Kingston and/or the surrounding area?**

Yes No

**Why would you like to serve as an Advisor?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you currently, or have you in the past, participated in other Patient Family Advisory Groups(s)?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Briefly describe the skills that you would bring to the role.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What are some issues of special interest to you?**

* Hospital Care
* Long-Term Care
* Community Care (for example- home, hospice)
* System Level Change
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your time. We will be in touch soon.