

South East Regional Palliative Care Network

Regional Palliative Care Network Steering Committee Minutes

Date: November 1, 2018

Time: 2:00 pm - 4:30 pm

Location: South East LHIN – Kingston Office; 1471 John Counter Blvd (First Floor Boardroom)

Attendees: Michele Bellows (Phone), Hilary Blair, Laurie French, Natalie Kondor, Alfred O'Rourke, Linda Price, Denise Reynolds, Kerry Stewart

Invited Guests: Ruth Dimopoulos, Stephanie Giroux, Cindy Bolton, Juli Heney (Phone), Megan Conboy

Absent/Regrets: Joanne Billing, Brenda Carter, Helen Cluett

Agenda Item	Discussion	Action
1.0 Call to Order		
1.1 Welcome & Introductions	Laurie welcomed members. She chaired in the absence of Co-Chairs.	
1.2 Approval of Agenda	Approved with no additions.	
1.3 Conflict of Interest Declaration	None declared.	
2.0 Consent Agenda		
2.1 Approval of Sept. 18, 2018 minutes	Approval of September 18, 2018 meeting minutes. Linda moved; Alfred seconded; all in favor.	
2.2 Quality Improvement Coach 2018-19 Q2 Report	Quality Improvement Coach 2018-19 Q2 Report shared prior to the meeting. No additional discussion.	
3.0 Information Only Items		
3.1 Co-Chair Verbal Updates	<p>OPCN There are no updates to share.</p> <p>LHIN and MAID LHIN and Home and Community Care (HCC) are waiting for any new Ministerial announcements. More to come.</p>	

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	<p>There are new federal reporting requirements for MAID statistics. Contact Laurie to find out more.</p> <p>Laurie sits on the MAID Ministry of Health and Long Term Care team. The team receives regular MAID updates across the province. Data is shared and is broken down in various formats. Currently, the SE LHIN has the highest number of MAID deaths within the province per capita. She offered to share data with the Steering Committee providing opportunity for review. Members presented questions such as: Palliative Care accessibility within the LHINs, MAID accessibility within the LHINs, and a review of the palliative care services used in acute care settings to analyse the data. Members agreed the information is valuable to discuss at the committee level, but the results need to be shared for potential action. Suggestions to either approach a professor at Queens University to potentially have academic support for research. Laurie to discuss further with Brenda.</p> <p>There is expectation with the LHIN that Home and Community Care establish a regional referral service. Since 2016, there has been a provincial referral process to access a MAID provider. This process is being developed in partnership with system providers. Proposal will be presented to LHIN Executive. More to come.</p>	<p>Laurie to discuss MAID research support with Brenda.</p>
3.2 Multidisciplinary Clinical Co-Lead Update	<p>LEAP Core was delivered in Smiths Falls Sept 14 & 15. Did not have enough attendance for LEAP LTC in Perth in October; canceled as a result. There is enough funding for two additional sessions before fiscal year end. Feedback – unless the LEAP session is sponsored by a primary organization, it is often canceled due to lack of registration. Potential for LEAP LTC in Marmora and LEAP CORE in Sharbot Lake. Members discussed the benefit of doing further outreach. Agreed to have a representative discuss LEAP opportunities at the next Long Term Care Home Quarterly meeting for interest and discussion. Next meeting to occur on December 5th.</p> <p>Hilary and Natalie attended the OPCN Leadership meeting on October 30. All Clinical Co-Leads and Network Leads were invited to attend. OPCN recommends that all regions have a clear vision statement to enable clarity and to guide the work of the Networks. . Members support the motion to pursue the development of a vision for the South East Regional Palliative Care Network. Kerry moved; Alfred seconded; all in favor. Draft to be presented at January meeting.</p>	<p>Develop draft vision to be presented at the January SC meeting. (Hilary/Natalie)</p>

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3.3 Multidisciplinary Clinical Co-Lead Recruitment Update	Interviews were completed. Currently reviewing final selections. Susan Blacker, the Provincial Clinical Co-Lead for the OPCN and Jennifer Walsh, a recruitment specialist, was also part of the interview panel. The process has taken longer than originally anticipated. The position is 0.2 full time equivalent. An announcement will be shared once selected.	
3.4 Expression of Interest Network Steering Committee Membership Update	<p>The Review Panel reviewed each applicant and completed interviews. Candidates were selected based on geography and a competency-based matrix. There are four confirmed new Steering Committee members. New members have been invited to join the December 18th Quarterly Steering Committee meeting. Each member will have access to SharePoint and will receive an orientation guide within the coming weeks as part of the onboarding process. New members include:</p> <ol style="list-style-type: none"> 1. Tracy Kent-Hillis, Lennox and Addington County General Hospital 2. Kara Schneider, Quinte Health Care – 3. Janine Mels-Dyer, Providence Care Hospital 4. Karen Moore, Hospice Prince Edward <p>Interview set on November 2 for a Patient and Family Advisor. There were no applications for a communication representative. Will reach out for external assistance. The committee can be between 12-15 members. Ex officio members are not included in this count. Members would like clarification on the process selection of the Steering Committee representation as some criteria have changed. Brenda to provide details at next meeting.</p>	<p>Onboarding Package to be shared with new SC members (Hilary/Stephanie)</p> <p>Clarification on process of SC representation (Brenda)</p>
3.5 HCC: Palliative Care Sedation	Item to be deferred to the new year as key player is on maternity leave. . This item will be added to the January agenda.	HCC: Palliative Care Sedation to be added to January agenda.
3.6 Committee Evaluation	As indicated in the committee's Terms of Reference, committee members will participate in an annual evaluation to assess the performance and effectiveness of the collaboration. Members are asked to complete a self-evaluation survey. Results are to be presented at the December 18th meeting. Terms of reference will be also reviewed and adjusted as needed.	Survey results and TOR to be added to December agenda.

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4.0 Matters Requiring Discussion		
4.1 RPCN Work Plan Update	<p>Hilary provided an update on the RPCN Work Plan submitted to OPCN in mid-October. The status of many items has remained similar to that presented in July due to vacancy in Network Lead and Clinical Co-Lead. Update also included OPCN provincial action plan items. . OPCN is also experiencing delays due to lack of resources and funding freeze.</p> <p>B6: Needs Assessment for Vulnerable Housing Individuals Requiring Palliative Approach to Care Laurie provided update on behalf of Joanne. The work on this project continues. The final component was a focus group which had a large turn-out and consequently a great amount of information to collate. Their goal is to complete phase 1 and share information with the Network as soon as possible.</p> <p>C4: The approach to this Action item has changed. Implementation of Early ID tools will be encouraged as part of HSDF recommendations and measured as a part of HSDF evaluation. This item aligns with work currently underway in the Coordination of Care priority project.</p> <p>D: HSDF: Focus Area 1 - Provides guidance on organization of interdisciplinary team-based palliative care for adults receiving care in community settings. Final version will be released Q4 FY 18/19. Aligns with work on-going in the Better Communication priority project.</p> <p>E2: Members questioned the ease of use of the SouthEastHealthLine site. Hilary noted that we are working closely with Health Line to create a mini-site to improve accessibility of this information. The Coordination of Care team is meeting with many stakeholders including caregivers and health care providers for feedback. A draft template was submitted to Health Line for cost and review. Update will be provided at the December meeting.</p> <p>F: The final version of Ontario Palliative Care Competency Framework will be submitted to Executive Oversight for endorsement in November, and once endorsed, will be shared with the</p>	

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	<p>regions.</p> <p>Leads and Co-Leads will receive the updated RPCN Work Plan template for fiscal year 2019/20 by January 31st, 2019. Opportunity to re-evaluate the working groups and to align with the Health Delivery Framework priorities.</p>	
4.2 OPCN Performance Summary Report	<p>Hilary provided an overview of the OPCN regular reporting products. As a part of the OPCN Action Plan 1: 2017 – 2020, a set of four regular reporting products have been developed to enable OPCN and its partners to measure progress, identify and track quality improvement initiatives and support planning. She asked the committee what they would like to see done with the data and how they would like to have the data presented and shared. Members discussed how the OPCN data format is very challenging to read. Hilary to share feedback and concerns with Susan Himel, the OPCN Regional Liaison.</p> <p>Format suggestions: The committee would like the information to align with the regional working groups and to have comparisons between the South East data and provincial data. Members noted that a dashboard format would be preferable and would like to have data presented as percentages. . Members questioned if data in the Performance Summary Report included all decedents (both palliative and non-palliative) Hilary to look further at the report's Technical Appendix for this information. Hilary has reached out to other LHINs to see how they have presented their data and will work in the coming months with the LHIN Decision Support Unit to develop a dashboard.</p>	
5.0 Other		
5.1 Discharge Pathway for Patients with Advanced Cancer and Non-Cancer	<p>Laurie welcomed Cindy Bolton, Juli Heney and Megan Conboy from the 'Discharge Pathway for Patients with Advanced Cancer and Non-Cancer Illnesses' team. The team recently graduated from the IDEAS program on October 26. The team thanked Laurie for the welcome. A poster was presented, providing an overview of their project which focused on improving and ensuring timely continued palliative care services during transitions from hospital to home. The team presented</p>	

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Illnesses Presentation	<p>their accomplished work, lessons learned and next steps.</p> <p>Members shared interest in next steps and questioned how the team plans to reach their final goal. KHSC and South East LHIN HCC are in the midst of transformational change, individually and together, focused mainly around the patient experience. The next steps would be to implement the change measures while receiving input from the care coordinator and the patient/family designate during the process. There is great sponsorship to keep moving forward and continuing the project past graduation. The poster will evolve with time and an update will be provided next October.</p> <p>Members:</p> <ul style="list-style-type: none"> • Questioned if 50% is a starting mark or the end goal. Megan explained how it is the final goal. The ideas program was on a condensed timeline and efforts will continue in order to reach the goal. • Suggested a “mystery shopper” experience. Acknowledged that these strategies do work. • Questioned if the clinical designate is going to be a new role. Team members noted that this is currently in discussion at KHSC. Could potentially be added as part of a current role. 	
6.o. Wrap-up		
6.1 Next Meeting	Next Steering Committee Quarterly Meeting will occur on Tuesday, December 18th 2018, 1 - 4:30pm.	