

South East Regional Palliative Care Network

REGIONAL ROUND-UP February 2019

Improving Access to 24/7 Palliative Care in the Home

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Members: Heather Campbell, RN, Prince Edward Family Health Team (PEFHT)
Sherry Corbay, Family Caregiver Advisor
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Iris Noland, MD, CCFP, Brighton Quinte West FHT and QHC
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Krista Vandermeer, Manager, Quinte HealthLink, Belleville Quinte West Community Health Centre
Ashleigh Wolfe, RN, Queen's Family Health Team



An overview

Improving Access to 24/7 Palliative Care in the Home is a quality improvement project that has been underway in the Quinte sub-region since November, 2017. Our working group membership is a diverse group of healthcare professionals and community members, including two family caregiver representatives.

We began our work with a review of recent policy reports relating to palliative care and related caregiver burden (see [Health Quality Ontario](#) and [The Change Foundation](#)). Using Experience Based Design methodology, we interviewed family caregivers from within the Quinte sub-region to better understand their experiences in caring for a loved one and to listen to their frustrations in dealing with the health care system, specifically the palliative care sector. Building upon that foundation, we held several brainstorming sessions to map out the repetitive issues and gaps in care at home. We narrowed this down to five critical issues, identified the root causes and then developed a driver diagram, highlighting three areas in which we believed we could make change: **improving access to primary care providers, with interest and skills in hospice palliative care (HPC); improving access to effective and efficient interprofessional care providers in the home; and increasing tangible supports for caregivers and families.**

We heard that the transitions from hospital to home are often poorly planned and/or poorly executed, with sub-optimal communication or coordination of care. We also heard that when physicians, nurse practitioners, and home

Improving Access to 24/7 Palliative Care in the Home... Continued.

care staff are not readily available and reliable, and when an end of life patient develops pain and other symptoms, the default course of action for the family is often to call 911 or go directly to the nearest ER. As a result of this information, we interviewed paramedics and ER physicians. The paramedics taught us that in many cases they know the patient would prefer to stay at home, but the professional help that is needed for pain and symptom management is not always available, as the paramedics have a limited scope of practice and therefore must take the patient to the ER. The ER physicians explained that they are seeing a high volume of palliative care patients and that ER is not the appropriate place for this type of care, as ER staff are trained in trauma and not palliative care. Measuring the burden of care on the paramedics and the hospital ERs reflects how responsive and effective the system is performing in the home. These disruptive transitions from the home setting to overcrowded ERs are distressing for everyone involved. EMS data from Quinte Hastings County in 2017- 2018 demonstrates that 92% of end of life patients at home are calling 911 an average of three times in their last three months of life.

Our Aim

We aim to better support patients with their goal to die at home by optimizing 24/7 access to interprofessional teams and provide tangible supports to the caregiver(s). Our primary goal is to decrease home-to-hospital ER transports from 92% to 50% of all paramedic palliative care calls. We also aim to demonstrate improvement in patient and caregiver satisfaction, utilizing caregiver reported outcomes (specific measure and targets TBD).

Change Ideas

Currently, our main focus is to implement a “Paramedics in Palliative Care” program for the Quinte region. This program has already been fully implemented and proven as a model of care across the provinces of Nova Scotia and Prince Edward Island. One factor that may have led to the model being so successful is that the paramedics are all [LEAP](#) certified and able to provide pain and symptom management in the home. The patients were identified earlier and registered with a unique code, and their Advanced Care Planning and Goals of Care were well documented and available to the paramedics. In Nova Scotia, this program has resulted in a 50% decrease in transports to the ER. The Canadian Foundation for Healthcare Improvement (CFHI) has endorsed the Nova Scotia and PEI model and is currently aiming to spread it across Canada. We have already met with the CFHI staff and the Nova Scotia team to explore the model and to gain insight as to how we might do the same and scale up across the Quinte communities and then spread the model across the SELHIN from West to East.

The Quinte-Hastings paramedics have recently received funding from the SE LHIN for palliative care LEAP education. Their workforce of 144 full-time and part-time men and women will be attending one of nine scheduled “LEAP for Paramedics” courses in February and March of 2019. Our team has been working closely with Pallium Canada and LEAP facilitators in the SouthEast LHIN to make this happen. Prior to each of these courses we will have a Family Caregiver Advisor present their “lived experience” story to the participants. We see this as a critical first step to assist the paramedics in gaining a better understanding of the important role primary family caregivers play within the circle of care. We also will strive to change the terminology used upon patient admission diagnosis at the hospital, to be more respectful of the caregivers, avoiding terms such as “failure to cope.” Changing the culture of how caregivers are respected is much needed.

Following paramedic training, the intent is to have them apply their new knowledge and skills as quickly as possible. We expect the program will be launched in Prince Edward County in spring of 2019, followed by Belleville, Quinte West, and then Hastings County. The intent is not that they will replace other providers who are needed to provide care in the home. With their extended scope of practice using medical directives to manage pain and other symptoms, paramedics will be there to complement the roles of home care nurses and community physicians and nurse practitioners. Home and community care providers, as well as primary care providers, will be our key partners in this project, as we will be seeking the support of all palliative care team members across our communities.

If you are doing similar work and have learning to share, or want more information about our project, please contact Mary Woodman at woodmanm@bqwhc.com or at 613-539-6061.

Welcome Megan Conboy as the new SE RPCN Network Clinical Co-Lead!

We are pleased to announce that Megan Conboy has joined the South East Regional Palliative Care Network as the Network Multidisciplinary Clinical Co-Lead, effective January 22nd, 2019.

As a Care Coordinator (RN) on the Palliative Care Team at the South East LHIN, Home & Community Care, Megan sees the challenges faced by patients, caregivers and health care professionals in trying to provide patient-centred palliative care. She also sees how rewarding it can be when things go right. She has lived most of her life in a rural area, providing in-home nursing care prior to moving into the Care Coordination role. Megan is hopeful to be able to offer a unique perspective in working toward improvements to palliative care in our region.

Please join us in welcoming Megan to her new role!



Brenda Carter

Vice President, Quality and
Regional Vice President, Cancer Care
Kingston Health Sciences Centre

Joanne Billing

Vice President Home and Community Care
South East
Local Health Integration Network

Hilary Blair

Network Lead
South East
Regional Palliative Care Network

Hospice Palliative Care Ontario: INTRODUCING THE NEWLY REVISED SPEAK UP ONTARIO WEBSITE

HPCO has recently refreshed the website to provide users with easier access to the many tools and educational resources currently available on HCC, ACP and GoC in Ontario. The updated site also includes many new tools and resources for Health Care Providers, Non-Health Care Professionals, as well as Individuals and Families.



Click [here](#) for a one-page summary of the updates made! HPCO would love to hear your feedback on the changes made.

Visit the new website [here](#).

A Free Course for Physicians— Spring 2019!

When

Thursday, April 4th to Sunday, April 7th

Where

Donald Gordon Centre
421 Union St., Kingston, ON

Eligibility

Family physicians living within South East LHIN and Central East LHIN are eligible to participate in the program.

To learn more and/or to register click [here](#).



[Click here for Regional Round-Up available online.](#)

Education Opportunities

FUNDAMENTALS OF HOSPICE PALLIATIVE CARE

CORE FUNDAMENTALS an eight-week program for those working in the health system interested in developing their capacity in hospice palliative care.

PERTH – March 22, April 12, 26— Registration deadline: **March 8, 2019**
Enhanced Fundamentals: May 10, 2019

TWEED – April 4, 18, May 2 – Registration deadline: **March 22, 2019**
Enhanced Fundamentals: May 16, 2019

NORTHBROOK—May 2, 16, 30—Registration deadline: **April 12, 2019**
Enhanced Fundamentals: June 13, 2019

[Program information](#) and [registration](#)

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In the News

[This new year, resolve to learn about palliative care](#)

mississauga.com

The simple fact is we're all going to die. Most of us will not die suddenly, and we might die sooner than we hope. The vast majority of us will need help ...

[A new approach to palliative care](#)

Haliburton County Echo

The program helps staff of long-term care facilities have conversations with residents who could benefit from a palliative approach to care, a release ...

[The Okanagan Death Café returns for another season](#)

Vernon Morning Star

Seventy per cent of North Americans prefer to die at home, and only seven per cent said they wanted to die in a hospice or palliative care home, in a ...

[New paramedicine program being rolled out slowly at Cape Breton Regional Hospital](#)

Truro Daily News

... in programs like our extended care program or our palliative care program," ... Extended-care paramedic program launched in Halifax-area nursing ...



Annual Conference
April 28-30, 2019
Richmond Hill, ON



SAVE THE DATE!

4TH ANNUAL HOSPICE
VOLUNTEER EDUCATION DAY

Featuring Dr. Robert A. Neimeyer

Tuesday, March 26th, 2019

Maranatha Church
100 College St W, Belleville, ON



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