

Network NEWS

Volume 1, Issue 1

Fall 2010

Welcome to the first issue of our regional newsletter!

Director's message

Here it is - the first issue for our regional newsletter, your source for information about developments in the Network, best practices, successes and learnings, upcoming events, new resources and more. I encourage you to read *Network News* as a way to stay informed, feel inspired, and share your news.

While this newsletter is a first for us, the Network itself has a history of communication and knowledge sharing in other ways. Our work today continues to be informed by the broad consultative processes and recommendations that were part of our origins. Current key initiatives are centred on helping to build a more effective regional system of hospice palliative care. You'll hear more about some of these initiatives in the following pages.

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Beth Lambie (left) reviews the agenda for palliative care education with Rose Whelen, Client Services Team Assistant, Erie St. Clair Community Care Access Centre.

Thanks to the selfless contributions of many people, we are making great progress in improving hospice palliative and end-of-life care in Erie St. Clair. There is still much to be done. It is my hope that this newsletter helps connect all of us in the work we are doing and, in some small way, strengthens us along the way.

Beth Lambie
Director
Erie St. Clair End-of-Life Care Network
www.esceolcn.ca

Working together under a new alignment

End-of-Life Care (EOLC) Networks were created in 2005 as part of Ontario’s End-of-Life Care Strategy and the Federal/Provincial Health Accord, both of which targeted funding for enhanced care in the home and enhanced end-of-life care. The Ontario Ministry of Health and Long-Term Care (MOHLTC) took a systems perspective, recognizing that changes in the home care sector could best be made if system partners were involved. The role of and the base funding for the End-of-Life Care Networks (EOLCN) evolved from this system-wide perspective.

Networks are expected to represent all sectors and be objective and impartial. Their focus is on integration, system design, service innovations, etc. Networks are not expected to engage in operational roles related to any one sector.

The original mandate for the EOLCNs across Ontario, as outlined in the MOHLTC Strategy (November 2004), was articulated as:

- broad system design
- coordination and integration of services at a system level
- monitoring and assessment of community needs
- promotion of service innovations

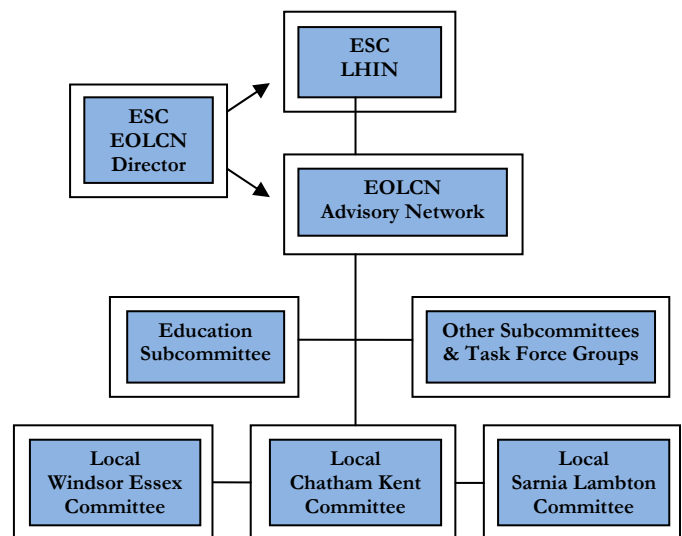
This mandate was to be advanced regionally and provincially, with additional advisory roles and expectations emerging as part of the EOLC Strategy, Cancer Care Ontario’s support for and

endorsement of the EOLCN function, and in response to expectations of other associations, e.g. Ontario Palliative Care Association, Seniors Health Research Network, etc.

The Erie St. Clair End-of-Life Care Network (ESC EOLCN) has been in place for over four years. Much has been accomplished through the collective work of the partner agencies and individuals of the ESC EOLCN.

In April 2010, the ESC EOLCN Advisory Committee became more closely aligned with the ESC Local Health Integration Network (LHIN) with endorsement of the structure below.

Erie St. Clair End-of-Life Care Network Structure



Vision for Erie St. Clair End-of-Life Care Network

A comprehensive, integrated, coordinated continuum of high quality end-of-life care services that is available in a timely manner, irrespective of diagnosis or care setting for individuals residing in the Erie St. Clair Local Health Integration Network catchment area.



Collaboration increases access to palliative care

by Beth Lambie, Director, Erie St. Clair End-of-Life Care Network & Cindy Stokes, RN, BScN, Client Services Manager, Erie St. Clair Community Care Access Centre

What started out as a pilot approach to increasing access to specialized hospice palliative care expertise is now expanding to reach more communities. Palliative Care Consultation Teams (PCCT), multidisciplinary resource teams for palliative and end-of-life care, are growing beyond the trial areas of Lambton County (2008) and Chatham-Kent/Sarnia Lambton (2009) into Windsor-Essex (2010). With funding provided by the Erie St. Clair Local Health Integration Network (LHIN), the ongoing operational responsibility and funding of the PCCT is the role of the Erie St. Clair Community Care Access Centre (CCAC). The PCCT takes a regional approach in terms of principles of care, but the service delivery model in each county is unique to that local area. The local service delivery model takes into consideration local services already in place, local gaps in service and local needs.

Bringing specialized areas together

The core PCCT consist of a palliative care physician, expert nurse/nurse practitioner, social worker, spiritual care provider, administrative assistant, rehabilitation professional, and is supported by secondary level experts from nursing service provider agencies (referred to as Resource Nurses, who have additional training in palliative care). The local Palliative Pain and Symptom Management Consultant provides consultative support to the team.

The PCCT enable timely access to consultation support for primary care providers with the expectation that a shared care model will be developed. The PCCT also provide: comprehensive assessment and care planning; consultation reports to primary care providers; capacity building through mentoring; patient and family education; counselling, such as Advance Care Planning; and, support with processes involved in home deaths, follow-up and direct care provision as needed across sectors. Clients referred to the PCCT are those who require specialist level expertise. Priority is given to clients in crisis at risk of hospital admission, emergency department visits, or needing more services than are currently available.

From reports spring new ideas

After extensive community consultation, the Erie St. Clair (ESC) End-of-Life Care Network (EOLCN), with the assistance of the ESC Local Health Integration Network (LHIN), prepared a report about the state of hospice palliative care service delivery, entitled "Hospice Palliative Care in Erie St. Clair : Report on Current Services and Recommendations for Future Systems" (December 2008).

Two important areas of need were outlined:

1. increased access to specialized hospice palliative care expertise in the community; and
2. physicians specializing in hospice palliative care to address a projected shortage in Erie St. Clair.

Palliative Care Consultation Teams were deemed to be the preferred means of bringing expertise in hospice palliative care to patients in need.





PCCT cont'd...

The PCCT see clients in their home, a clinic setting or other health care settings as determined by their situation. Additional services not currently provided by the home care system, such as in-home laboratory services, may be provided by the PCCT. Coordinated care planning is facilitated by regular clinical rounds, which occur on a bi-monthly basis. On-call access to the team is available 24/7, as provided by the Resource Nurses.

The main objectives of the PCCT are to:

- increase access to specialized palliative care for clients in the community, including expertise in symptom management, disease progression/ prognosis, and all domains of care.
- assist clients to die with dignity at home, if that is their location of choice (if possible).
- decrease dependence on the hospital through emergency department and admission avoidance, reduced Alternative Level of Care (ALC) days and reduced hospital length of stay.
- improve patient flow/coordination/integration across the care continuum.

Promising results so far

From April 1 to August 31, 2010, the PCCT in Chatham-Kent and Sarnia-Lambton admitted 229 clients to their caseloads. At the present rate, this will represent well over a 100 per cent increase in clients compared to last fiscal year. The PCCT have helped to avoid 405 ER visits in this same time period. As well, the PCCT have supported 63 clients in their decision to die in their homes, which represents 80 per cent of the PCCT clients who have died.

Introducing Dr. Gordon Giddings

The Erie St. Clair Regional Cancer Program recently announced a new member of the Windsor Regional Cancer Program (WRCP) and Windsor Regional Hospital (WRH) team, Palliative Physician Dr. Gordon Giddings. This fall, Dr. Giddings will begin work in Windsor, having completed his residency in palliative care.

Dr. Giddings was an Associate Physician for the Blood and Marrow Transplant program at Ottawa General Hospital and a staff physician at the Centretown Community Health Centre. He was also the Program Director of the Family Practice Oncology Fellowship at the University of Ottawa.



“We are very pleased to welcome Dr. Giddings to the WRCP,” said Dr. Glen Maddison, Palliative Care Lead for Cancer Care Ontario in the Erie St. Clair region. “With the addition of Dr. Giddings to the Windsor region, I see this as a vital link between the cancer centre oncologists and the excellent work the Hospice of Windsor performs in the community. Patients will be able to have seamless palliative care from home to hospital to hospice, freeing up the precious time of the oncology team to deal with the cancer-related problems and leaving Dr. Giddings to develop his palliative team to manage pain, symptoms and end-of-life care.”

More knowledge, increased confidence, better quality of care: Hospice Palliative Care Education in a First Nation community

by Ann Brignell, RN, CHPCN(C), Palliative Pain & Symptom Management Program Consultant, Lambton and Kent Counties

Sometimes all it takes is a little bit of enthusiasm and a lot of commitment to take a chance and try something different.

It began at an off-site training session where two Personal Support Workers (PSW) and their supervisor from the Walpole Island First Nation (WIFN) community attended the Fundamentals of Hospice Palliative Care (or Fundamentals) program. They saw the possibilities and were committed to finding a way to improve care and support for chronically and terminally ill patients at home. It was their inspiration that drove the collaboration between WIFN health administration, the Erie St. Clair End-of-Life Care Network Education Blueprint and

the Palliative Care Pain & Symptom Management Consultation Program. Soon, a partnership was developed, a plan implemented and courses provided with active learning by all participants.

Two years later, their on-site program has evolved beyond just the palliative care training. Participants are sharing knowledge and supporting one another in order to provide culture-specific care that honours the unique needs of the First Nation on Walpole Island. The physiology of death is common for all humanity. What differs is how each person approaches end of life. At its heart, the program focuses on being open and observant, and providing the necessary skills to respond to each person's own needs on this healing journey, one rooted in their personal, family, social, spiritual and cultural backgrounds.

Participants recorded an increase in skills and knowledge regarding their ability to provide EOLC. In particular, a high percentage of participants reported that they now

notice physical and psychological changes and report these changes more often than they did prior to the program.

Others reported changes related to how care is delivered with the program enabling people to remain in their own homes and community until end of life. According to Amie Sands, Home Support Coordinator, WIFN: "We recently had a palliative client whose family lived out of town. Our workers provided 24 hour care for the last two weeks of life with the support, encouragement and guidance of our nurse case manager. This would not have been possible without, in part, the knowledge and confidence that was gained through this education".

Now, a second First Nation community (in Lambton County) has requested an on-site Fundamentals program. With a little excitement and inspiration from this WIFN experience, plans are underway to collaborate in making this next program a reality.



Reflecting on her time with WIFN, Ann Brignell (pictured left) shares: "My experience has been a blessing that has enriched both my personal and professional life; being accepted in their community is a gift. *Miigwech* ('thank you' in Ojibwe)".

Building capability and capacity: Hospice Palliative Care Education Blueprint

In 2008, the Erie St. Clair End-of-Life Care Network (ESC EOLCN), with funding from the Local Health Integration Network (LHIN) under the Aging at Home initiative, launched an ambitious undertaking; to improve hospice palliative end-of-life care. People from within and across health care sectors and geographies were brought together to develop and participate in various hospice palliative care educational initiatives. This Erie St. Clair LHIN-wide education program became known as, “The Hospice Palliative Care Education Blueprint” or “The Blueprint” for short. It has proven to be an excellent way to build capability and capacity through a commitment to excellence, partnership and results. Over the past two years, almost 1000 people have participated in diverse education, information and planning events across Erie St. Clair. Information about these and other Blueprint activities from the past two years is available on the Erie St. Clair End-of-Life Care Network website: www.esceolcn.ca

The Blueprint is now in Year Three, and is comprised of 14 palliative care education projects (listed on page 7). Most initiatives have started with small working groups meeting to plan and begin work. All projects will be completed by March 31, 2011. Between now and then, status information about specific Blueprint projects will be communicated via the Erie St. Clair EOLCN website as well as the next issue of *Network News*. This article highlights four of the Year Three projects.

- **Learning Essential Approaches to Palliative and End-of-Life Care (LEAP)**

The Blueprint is working in partnership with the Palliative Pain and Symptom Management Consultation Program of Southwestern Ontario to support the provision of two LEAP courses for Erie St. Clair nurses, physicians and pharmacists. The LEAP program supports hospice palliative care education based on common language and best practices. The program also facilitates the networking of people who work in different sectors/disciplines and deepens hospice palliative care capacity across Erie St. Clair.

- **Expand utilization of Share the Care™ model and palliative care education in Erie St. Clair First Nation Communities**

This initiative builds on work with First Nation community members in Blueprint Years One and Two. The Blueprint, in partnership with representatives from various First Nation communities, is looking at how best to support the use of ‘Care Groups’ in First Nation communities, based on the Share the Care™ model. Additional palliative care education will also be offered to four First Nation communities in Year Three.

- **Leverage and improve the technological infrastructure**

During Years One and Two, two new videoconferencing sites were established in Erie St. Clair. In Year Three, the Blueprint will look at how to leverage the use of this technology for education as well as other possible applications. Part of the project will involve networking with other videoconference users as well as updating and linking users to global palliative care resources and education offerings.



Blueprint cont'd...

▪ **Deepen system understanding: Hospice palliative care/end-of-life care education survey**

This project builds on Year Two work and involves the distribution and analysis of a hospice palliative /end-of-life care education survey. The survey’s goal is to better understand both the need for palliative care education and the supply across Erie St. Clair. Included in this project will be an examination of the strengths, gaps and challenges associated with palliative care education across Erie St. Clair and recommendations for improvements. It’s critical that the project team get a clear picture of the state of palliative care education from across sectors, roles and organizations in Erie St. Clair. Please stay tuned for further information and requests for input about this survey.

Year Three Blueprint Projects (in random order)			
1	Deliver Hospice Palliative Care (HPC) Education for Personal Support Workers (PSWs)	8	Implement communication plan for ESC EOLCN Blueprint Project
2	Support Advanced Hospice Palliative Care Education (AHPCE) Network for PSWs	9	Deliver ‘Setting the Stage for Change’ workshop in ESC
3	Deliver Learning Essential Approaches to Palliative & End-of-Life Care (LEAP) education & support LEAP network building across tri-counties	10	Implement support to enable sustained use of Share the Care™ model in ESC First Nation communities
4	Pilot Hospice Palliative Care (HPC) Education for Acute Care Sector	11	Deliver HPC training in ESC First Nation communities
5	Deliver HPC training in some Rest, Retirement Homes & Community Living Programs	12	Investigate methods to leverage technology in HPC Education & access to HPC resources
6	Strengthen volunteer education across ESC based on project results from Blueprint Year Two	13	Support implementation of Nursing Guidelines for EOLC in Long-Term Care Settings
7	Develop & deliver standardized HPC volunteer training across ESC	14	Conduct ESC-wide HPC Education Environmental Scan Survey, analyze data & make recommendations

For more information on The Blueprint

Visit www.esceolcn.ca/Education/EducationBlueprint or contact:

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Erie St. Clair End-of-Life Care Network Education Committee
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Be heard: Public consultation process on palliative and compassionate care

by Monica Robson, Executive Director, St. Joseph's Hospice of Sarnia Lambton & Beth Lambie, Director, Erie St. Clair End-of-Life Care Network

On April 20, 2010, the establishment of a new, non-partisan, Federal Parliamentary Committee on Palliative and Compassionate Care (PCPCC) was announced. The committee is concerned with the quality and accessibility of care available to an aging population, the dying and persons with disabilities.

Through a public consultation process and requests for submissions from organizations and individuals across Canada, the Committee has invited participation in a national dialogue focused on four areas of concern:

1. Palliative care
2. Elder abuse
3. Suicide prevention
4. Disability issues

With reference to palliative care, the Committee is looking for input on palliative care and long-term chronic care, respite and family centered care giving along with the fundamental human right to adequate pain control at every stage of life.

Specifically, in local public hearings held across the country over the summer/fall, the Committee is gathering feedback on the following palliative care related areas of study:

1. Areas of excellence in the domain of palliative and chronic care, respite and family-centered care-giving, home care, and delivery of pain control

2. Problems and shortfalls in the preceding areas
3. Barriers to remedying problems
4. Recommendations as to how to achieve an ultimate goal of effective palliative and compassionate care for all Canadians

In late August and early September 2010, local Members of Parliament (MP) in Erie St. Clair held three consultation forums. The emerging themes were consistent with the recommendations included in the most recent [federal level report released by Senator Sharon Carstairs](#):

- Support for the integration of comprehensive palliative care services into the system.
- Revamp the Compassionate Care Benefit Program.
- Ensure palliative care services are covered under all provincial and territorial health insurance plans.
- Ensure professional organizations work together to adopt nationally standardized core competencies in palliative care for all disciplines.



For more information about the public consultation process, visit the PCPCC Committee's website www.pcpcc-cpspsc.ca or contact your local MP.

The public sessions will inform the development of reports that will go forward to the PCPCC Committee as part of the broader national process. The final release date for the Committee's report is anticipated in the spring of 2011.

Who's who in Erie St. Clair



Julie Johnston
Chair
Erie St. Clair End-of-Life
Care Network Education
Committee

Born and raised in Erie St. Clair, Julie attained a Bachelor of Arts in Psychology and a Diploma in Business Administration from Wilfrid Laurier University. During her professional career she has managed volunteer programs, a residential hospice and a not-for-profit organization.

Julie is currently the manager of the Palliative Pain and Symptom Management Consultation Program of Southwestern Ontario. Under her leadership, six nurse consultants with expertise in palliative care, provide palliative pain and symptom management education and consultation services to front line health care providers across the Erie St. Clair and South West LHINs.

Julie also serves on the Erie St. Clair End-of-Life Care Network's (EOLCN) Advisory Committee and is Chair of the EOLCN's Education Committee. In this capacity, Julie leads the development and implementation of the Education Blueprint, a multi-year, cross-sector hospice palliative care education strategy for ESC (see page 6).

In her personal life, Julie enjoys reading, golfing and is an avid hockey mom.

A helpful online resource

Did you know that the Ontario Telemedicine Network's (OTN) website includes a calendar of online events and webcasting topics? All you need is a computer with Internet access, web streaming capability and speakers/head phones. No travel is required.

Here's an example:

To Err is Human: Patient Safety as an Issue in Palliative and End-of-Life Care

with Dr. Larry Librach

8:45 – 10:30 a.m.

October 18, 2010

To join the live webcast:

<http://mediasite.otn.ca/mediasite41/Viewer/?peid=e2429585d6db4d44bcd1a41d65f37dc61d>

To view the recorded version (archived five days later): <http://webcast.otn.ca/archives.html>

Events calendar: links to live video conferencing for sessions offered at specific times

http://calendar.otn.ca/otn/events_calendar.php

Webcasting centre: access to pre-recorded sessions at a scheduled times or on demand

<http://webcast.otn.ca/archives.html>

A tip from Lori Feltz, Regional Manager
Ontario Telemedicine Network, Erie St. Clair LHIN



Events of interest

Canadian Hospice Palliative Care Conference http://conference.chpca.net/program	October 28-31, 2010	Westin Hotel Ottawa, ON
Compassion & Communication: Enhancing Techniques “Cost of Caring-Compassion Fatigue” http://www.alzheimer.sarnia.com/Default.asp?q=events&autoid=130	November 4, 2010	Sarnia Golf and Curling Club Sarnia, ON
Embracing Challenges During Life Threatening Illness: A Caregivers Conference http://www.alzheimerwindsor.com/documents/EmbracingChallenges2010b.pdf	November 23, 2010	Ciociaro Club Windsor, ON
Dr. José Luis Pereira, MBChB, DA, CCFP, MSc(MEd) Head, Division of Palliative Care, University of Ottawa Medical Chief of the Palliative Care, Bruyère Continuing Care and The Ottawa Hospital	February 2011	Sarnia, ON Chatham, ON Windsor, ON
Annual One Vision/One Voice Conference presented by Ontario Palliative Care Association & Hospice Association of Ontario http://hpcconference.on.ca	April 17-19, 2011	Sheraton Parkway North Hotel Richmond Hill, ON

Network News

The Network News newsletter is produced three times per year by the Erie St. Clair End-of-Life Care Network. Volunteer contributors submit articles with the intention of sharing information and best practices across the Network. If you would like to submit an article or subscribe to the newsletter, please contact:
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