Integrating a Palliative Approach to Care by Having Conversations Early (IPACE)

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Integrating Palliative Approach Conversations Early

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Presentation Overview

- Overview of the IPACE project
- Identify where would the palliative approach to care benefit in a client's illness trajectory
- Overview of the 3 workshops offered in Vancouver Community
- Sharing of metrics and impact on staff learning
- Present project's sustainability plan and future planning

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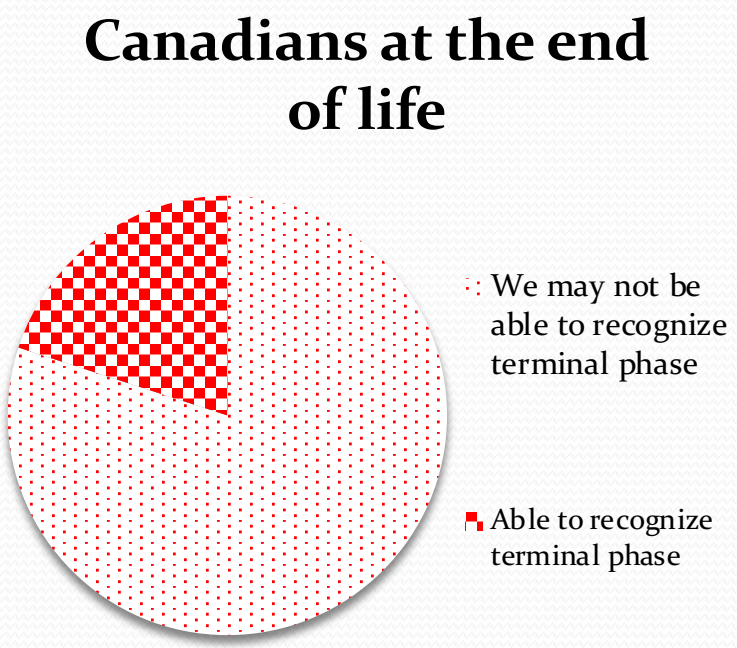
Literature shows:

- "By 2025, only 20% of Canadians will die with an illness that has a recognizable terminal phase. 2/3 of Canadians will die with 2 or more chronic diseases and will live in a more frail and vulnerable state
- People's trajectories will be less predictable, therefore, many will not be identified needing "palliative care" before they die
- Because of this many Canadians will not receive benefits associated with palliative care services

Canadian Hospice Palliative Care Association Fact Sheet 2012d



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Donor funded project – 3 years

- Vancouver Coastal Health received a generous donation from the Robert Ho family
- The goal is to improve client care but also to add to staff education so that staff feel more comfortable and confident about having early conversations
- The donation was used to hire agents of change in Vancouver Community, Vancouver General Hospital, Richmond, Coastal and small rural areas

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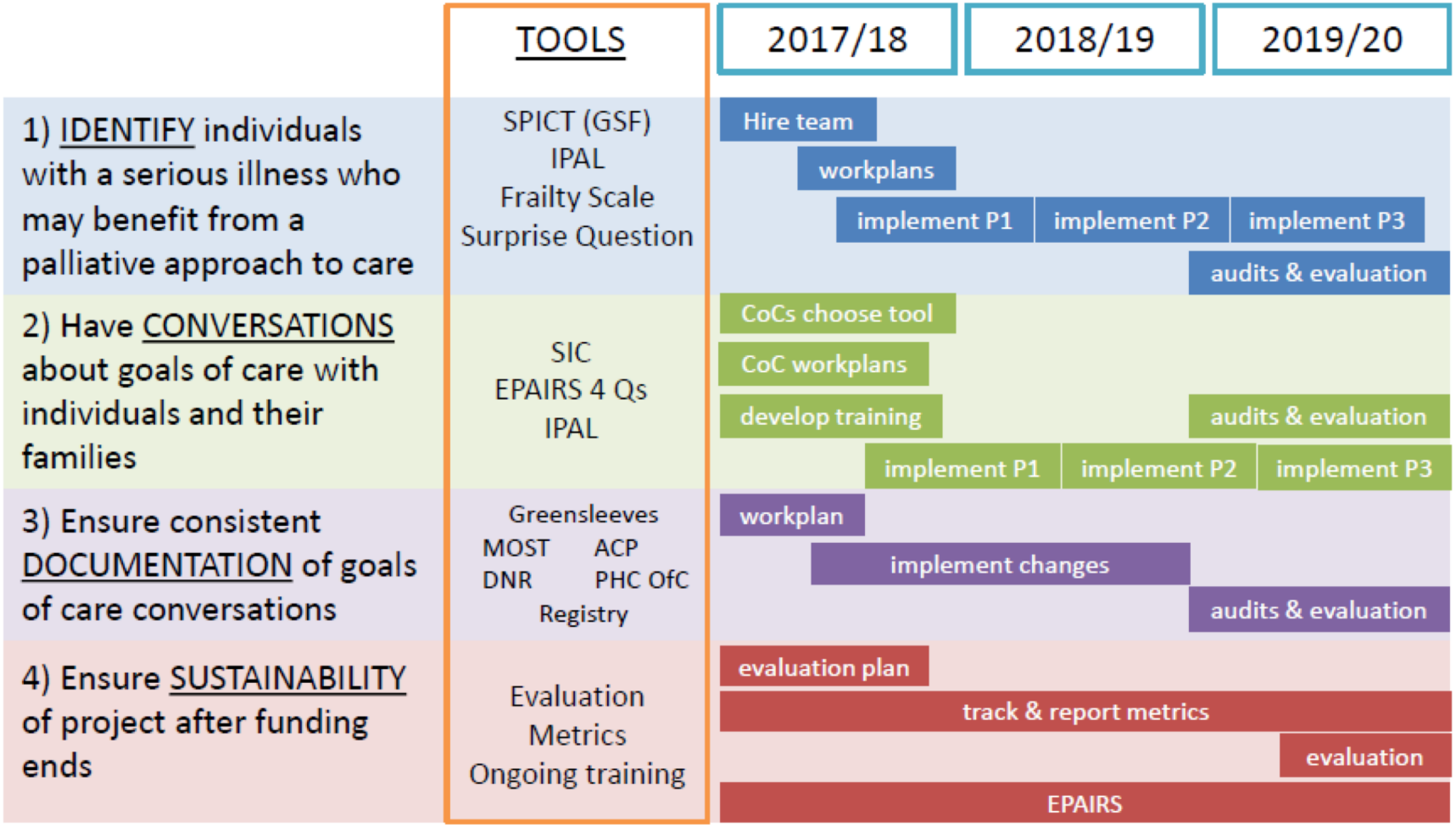
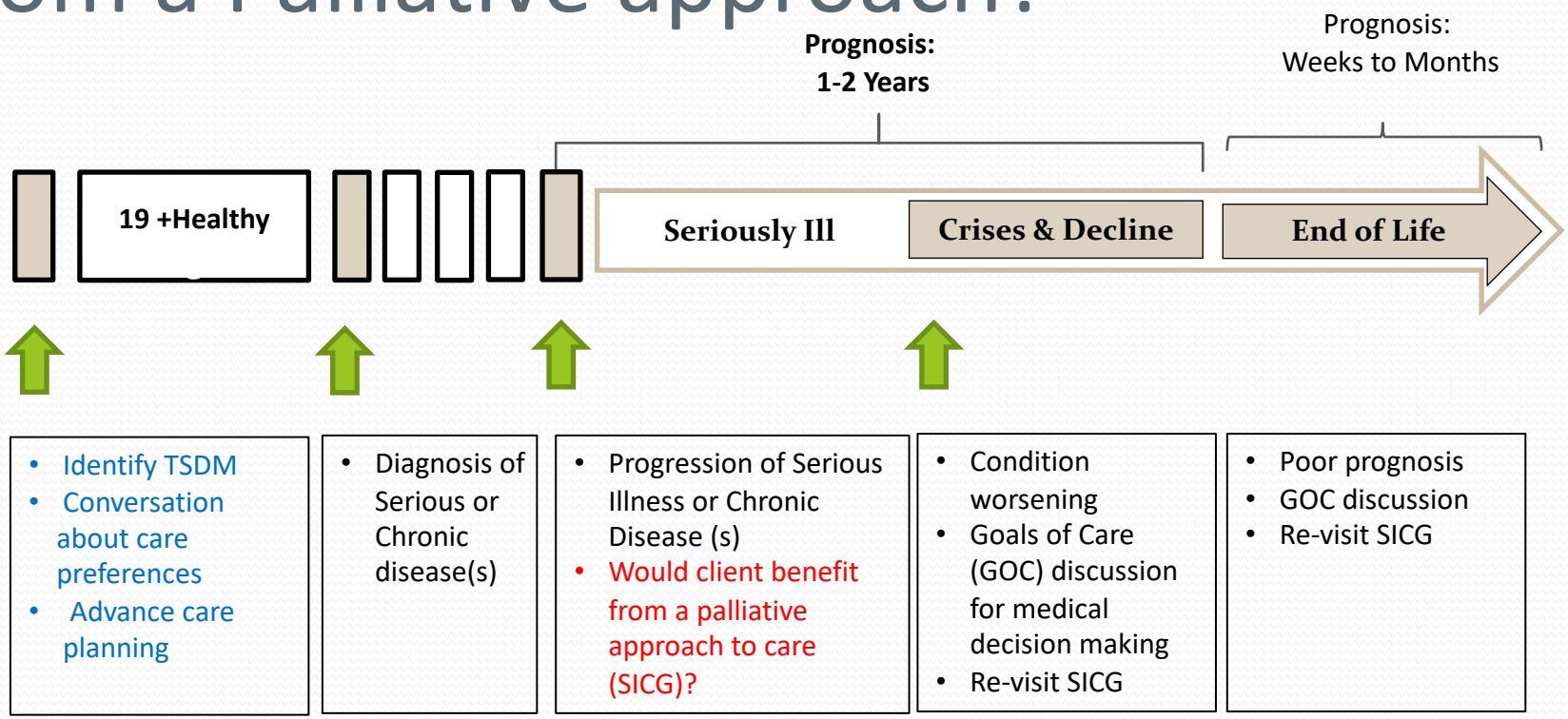
PROJECT | Embedding a Palliative Approach to Care in all Services

VISION | Enable a culture shift to embed a palliative approach to care in services so that after three years healthcare providers across the continuum of care are confident and competent to:



When to assess if someone benefits from a Palliative approach?



Palliative approach to care is focused on relief of suffering, while integrating psychosocial and spiritual aspects important to the individual/family. Based on the client's wishes, palliative care philosophy still encompasses further investigation and treatment of the illness for life prolongation but with the intention of supporting a natural death when the time comes (MSJ End of Life Council)

Source of chart: Dana Farber Cancer Institute & Ariadne Labs, 2016

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Workshops

- Aimed at all disciplines (nursing, case managers, social work, rehab, dieticians, recreational workers, psychologists)

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Workshop #1 - Identification

- Staff are asked to bring their caseloads to the session
- Using the identification tools, review a few clients to start to learn the process of identification

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I-PACE
Integrating a Palliative Approach by having Conversations Early

My Client Identification Worksheet

		General Indicators						Clinical Indicators		
Client Initial/ PID	Surprise question? Yes/ No/ Uncertain	Has there been ↑hospitalization in past 6 mos?	Is the client in bed/ chair more than ½ day?	↑ Dependence on others for physical/ mental health needs?	↑ Weight loss over last 3-6 mos, low BMI?	Are there persistent symptoms ?	Is client/ family asking for treatment withdrawal?	List client's advanced conditions/ serious illness below	Does client have clinical indicators specific to the illness?	Is client at risk of dying with any other condition or complication not reversible?
	Yes/ No/ Uncertain	☐	☐	☐	☐	☐	☐	- - -	☐	☐
	Yes/ No/ Uncertain	☐	☐	☐	☐	☐	☐	- - -	☐	☐
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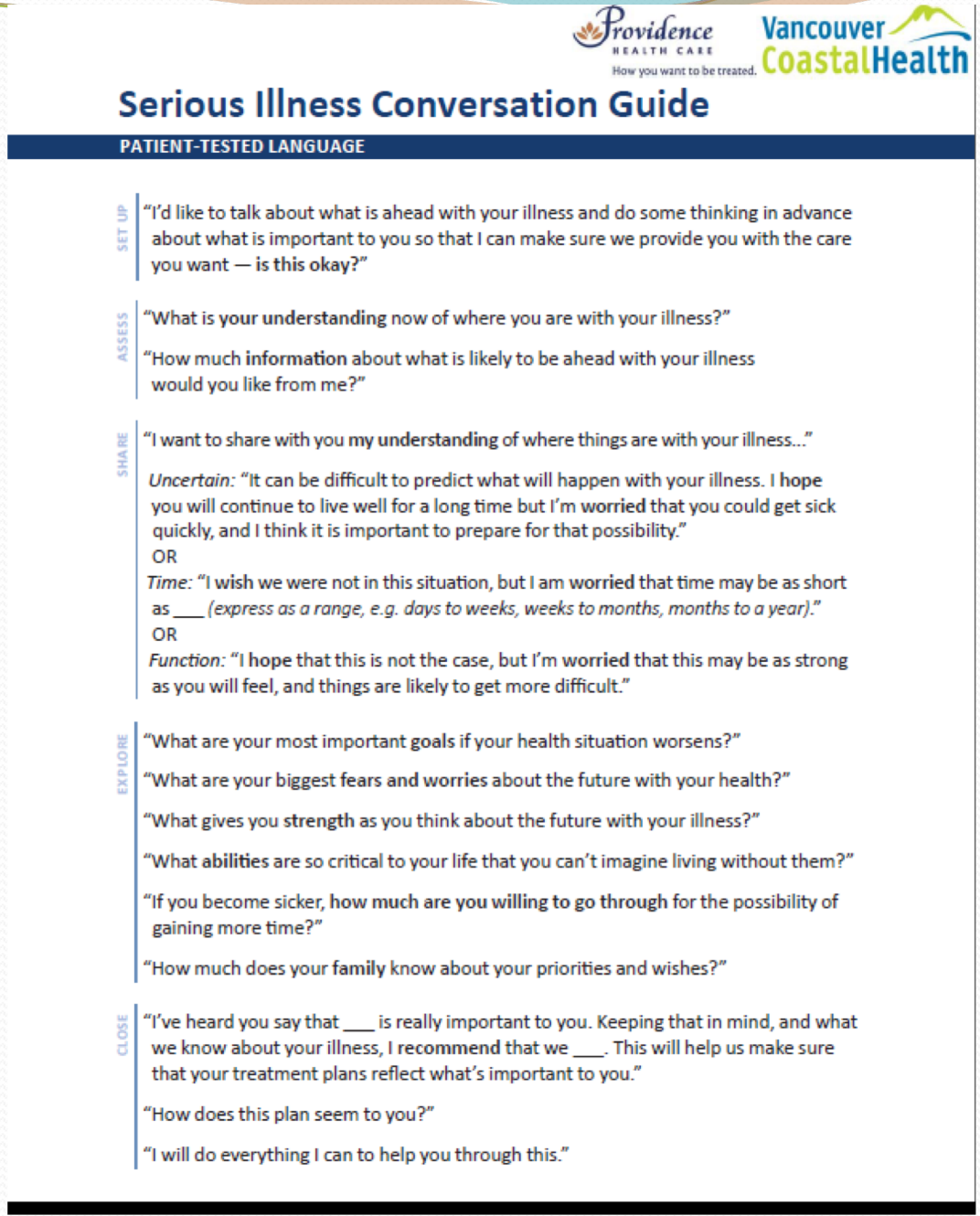
	Yes/ No/ Uncertain	☐	☐	☐	☐	☐	☐	- - -	☐	☐

Workshop #2

- Based on prioritizing clients who would benefit from a palliative approach to care, staff are taught how to use the Serious Illness Conversation Guide (SICG)



Providence HEALTH CARE
How you want to be treated.
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Serious Illness Conversation Guide

PATIENT-TESTED LANGUAGE

SET UP

"I'd like to talk about what is ahead with your illness and do some thinking in advance about what is important to you so that I can make sure we provide you with the care you want — **is this okay?**"

ASSESS

"What is **your understanding** now of where you are with your illness?"

"How much **information** about what is likely to be ahead with your illness would you like from me?"

SHARE

"I want to share with you **my understanding** of where things are with your illness..."

Uncertain: "It can be difficult to predict what will happen with your illness. I **hope** you will continue to live well for a long time but I'm **worried** that you could get sick quickly, and I think it is important to prepare for that possibility."
OR
Time: "I **wish** we were not in this situation, but I am **worried** that time may be as short as ___ *(express as a range, e.g. days to weeks, weeks to months, months to a year).*"
OR
Function: "I **hope** that this is not the case, but I'm **worried** that this may be as strong as you will feel, and things are likely to get more difficult."

EXPLORE

"What are your most important **goals** if your health situation worsens?"

"What are your biggest **fears and worries** about the future with your health?"

"What gives you **strength** as you think about the future with your illness?"

"What **abilities** are so critical to your life that you can't imagine living without them?"

"If you become sicker, **how much are you willing to go through** for the possibility of gaining more time?"

"How much does your **family** know about your priorities and wishes?"

CLOSE

"I've heard you say that ___ is really important to you. Keeping that in mind, and what we know about your illness, I **recommend** that we ___. This will help us make sure that your treatment plans reflect what's important to you."

"How does this plan seem to you?"

"I will do everything I can to help you through this."

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Workshop #3 – Champion Training

Champions are part of the sustainability plan

- Taught how to problem solve difficulties faced when using the SICG in practice; advocate use of SICG
- How to strategize when there is staff resistance
- Update staff on new developments/change in practice
- Create a community of practice (COP) to support each other once project ends

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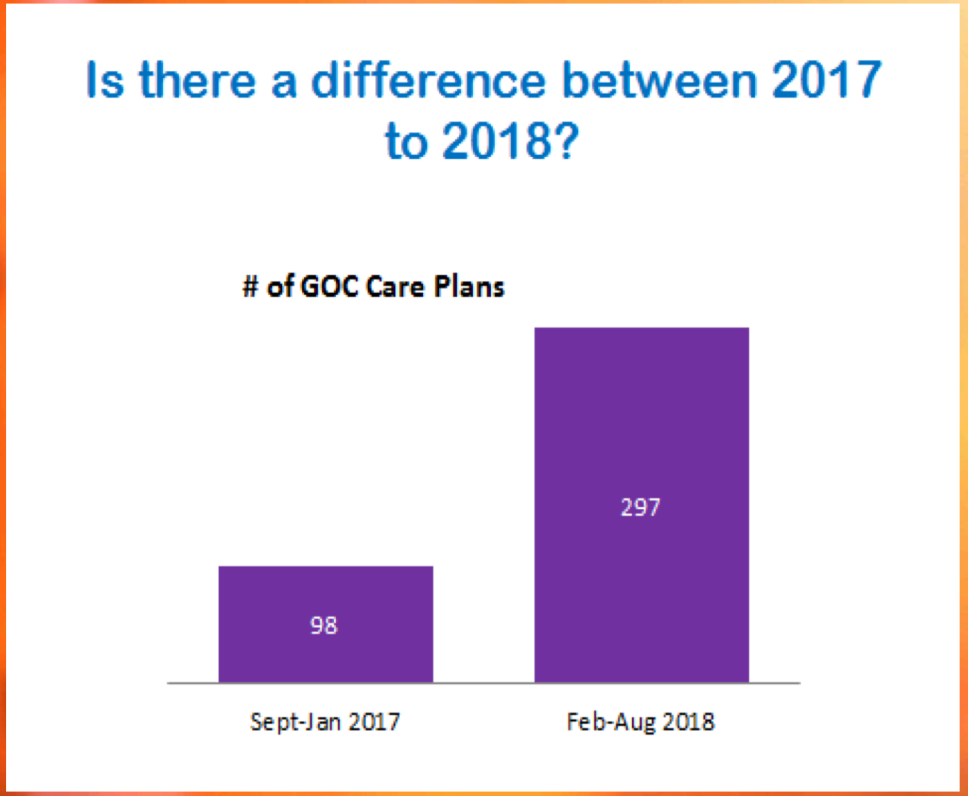
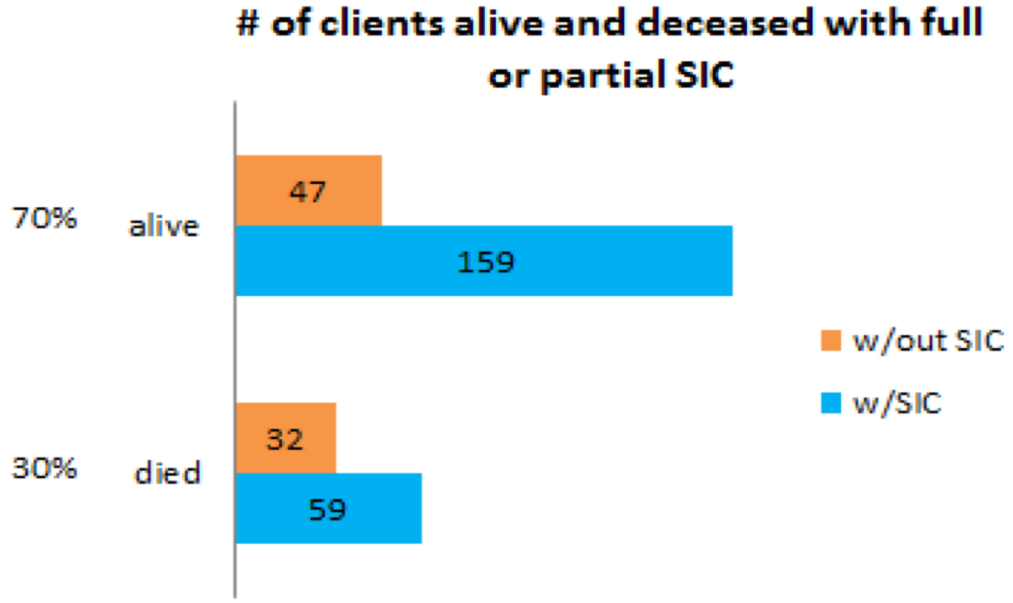
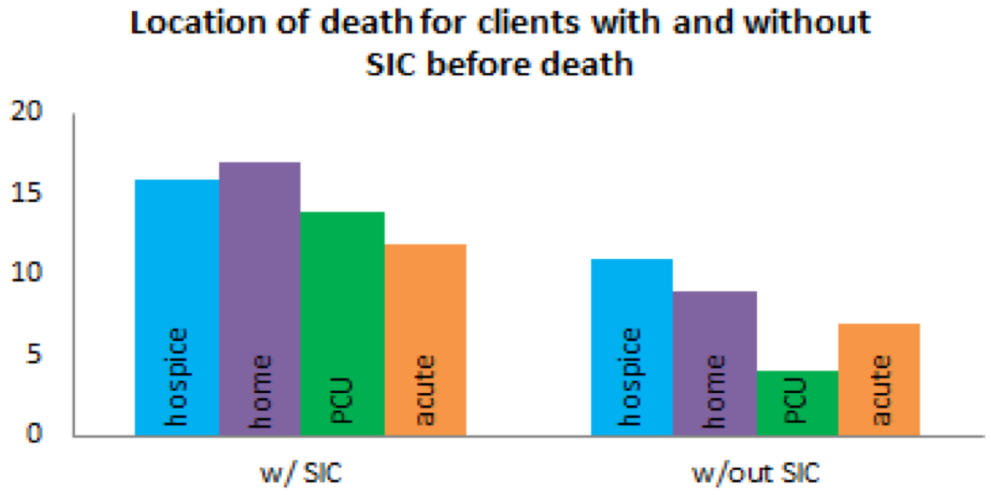
Outcomes


Is there a difference between 2017 to 2018?
# of GOC Care Plans
98
297
Sept-Jan 2017
Feb-Aug 2018

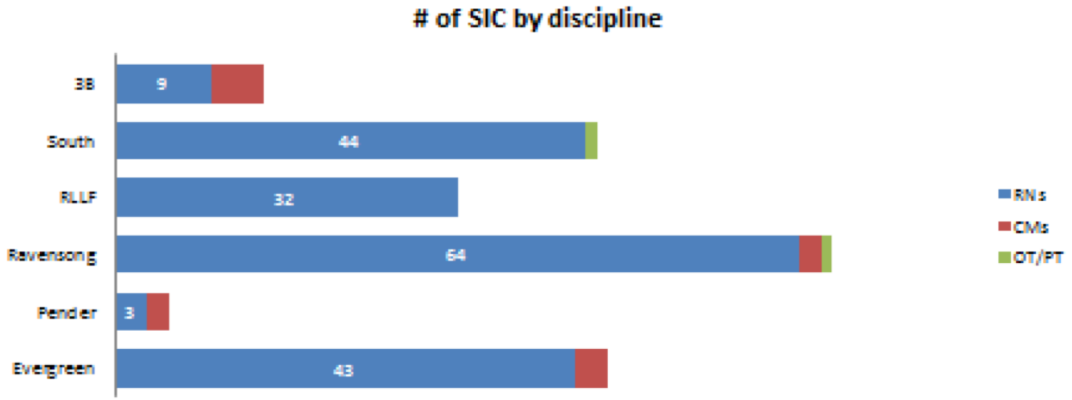
Are conversations early enough?



Does the conversation framework help support client's choices around location of death?



Which disciplines are having these conversations?



Engaging the Public

What Matters Most to Me

Preparing for Conversations
About My Health

Wishes of:_____

Written by:_____

Date :_____

Vancouver Coastal Health (VCH) and Providence Health Care (PHC) encourage people, particularly those living with a serious illness, to voice their wishes in conversations with their health care providers about their care. We provide these questions below for you to think about and share with your primary care provider or discuss with the health care team if you visit a hospital for care. You are also encouraged to consider completing your advance care plan.*

This is my understanding of my current health condition(s):

_____
_____
_____

I want more information about what is likely ahead with my health condition: □ Yes □No
Some questions I have about my health condition include:

_____
_____

These are my most important goals as I live with my health condition:

_____
_____
_____

These are my biggest fears and worries about the future with my health:

_____
_____
_____

Sustainability

- Fortunate in Vancouver community as we were supported to run the workshops for all staff
- Recognize that given workload and time constraints, difficult to sustain with so much staff turnover
- Working on getting courses online with on-site practice sessions for the role play
- Looking for ways to embed into daily practice and work
- Continue to support champions through a community of practice

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Where are we now?

- Bringing back metrics to managers, leadership teams, and staff
- Allow them time to brainstorm as a group to how to embed early conversations into daily practice
- Have them write down strategies to carry out at their own units

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Sharing our knowledge

- 7 home health units in Vancouver trained
- 30+ NPs in Vancouver Coastal Health
- Assisted Living (AL) and some private AL staff trained
- Seniors fairs, private AL resident engagement
- Mental health, primary care, integrated health teams – all up next

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Thank you for coming!