



Integrated Palliative Care Approach

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Integrated palliative care approach

- ▶ Is a shared model integrating the Extra-Mural Program (EM/ANB) and the Residential Hospice (RH), primary care and other community resources.
- ▶ Supports the philosophy of the right patient receiving the right care at the right time by the right provider
- ▶ Supports efficient use of resources
- ▶ Is an equitable service delivery and standard of care for palliative patients in NB
- ▶ Is in line with the Provincial Palliative care framework “Palliative Care in New Brunswick, A person-centered care and integrated services framework” (Government of NB, 2018)

Integrated palliative care approach

▶ GOAL

- ▶ The integrated EMP and Hospice model is designed to ensure palliative care patients receive integrated, timely and evidence based care in their homes, special care homes and residential hospice facilities through optimizing the skills and resources of the EMP and the hospice organization.

▶ OBJECTIVES

- ▶ To achieve an integrated community support approach for patients with life-limiting illness
- ▶ To achieve an integrated community support approach for end-of-life palliative care through the In-Home Program, Personal Support services and Residential Hospice
- ▶ Respite care for EMP palliative patients

Partners- Roles and responsibilities

- ▶ Extra-Mural Program (EMP)
- ▶ Hospice Miramichi Inc. (HMI)
- ▶ Department of Health
- ▶ Primary Care Physician/or Nurse Practitioner (NP)

EMP

- ▶ 24/7 access to RN
- ▶ Interdisciplinary team composition (OT, PT, SLP, RT, RD, SW)
- ▶ RN Liaison
- ▶ EMP relationship with physicians (including 24/7 access) and access to specialists when required
- ▶ EMP Provincial Palliative Care Guidelines
- ▶ RN role in case management and care coordination
- ▶ Resources available through EMP for Palliative Care patients and their families

The Integrated EMP and Hospice Palliative care services model includes EMP Palliative Care Services in the patients home but also in

HMI

- ▶ Hospice Day Program
- ▶ Hospice Outreach programs/services (volunteers); In-Home Program
- ▶ Residential Hospice facility services (including end-of-life and palliative respite care services)
- ▶ HMI Personal Support Workers (PSW) - delivery of patient care both at home and within the residential hospice

Department of Health

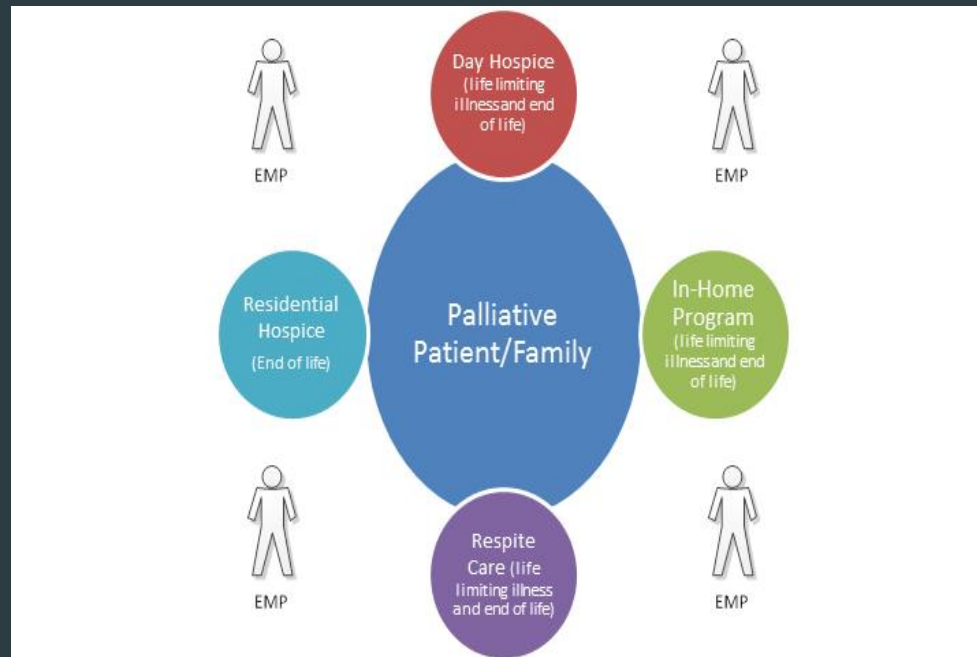
- ▶ Provide support for this new integrated palliative care approach
- ▶ Finalizing an accountability framework in partnership with the Regional Health Authority (RHA), EM/ANB and HMI to monitor and evaluate clinical outcomes

Primary Care Physician or Nurse practitioner

- ▶ Will provide medical care as required.
- ▶ The frequency and timing of visits will be determined based on the assessed needs of the patient/family and the clinical judgement of the integrated palliative care team.
- ▶ Physician must have admitting privileges in the RHA
- ▶ NP must be employed by the RHA

The Integrated RH Care Process

- ▶ All EMP patients will receive care coordination; the care will be coordinated within each setting and among services involved; transitioning from one setting or service to another “seamlessly” as required to meet the patients or family’s assessed needs in the right place and the right time.



Residential Hospice Services

- ▶ All patients must be admitted to the EMP and will have access to EMP RN (24hours/days, 7 days/week)
- ▶ EMP RN will be the care coordinator of services
- ▶ Eligibility criteria for admission to Residential Hospice
 - ✓ have a life-limiting illness
 - ✓ reside in the zone or have family members who do
 - ✓ aware of diagnosis and agrees to participate
 - ✓ does not require hospital level care
 - ✓ meet all EMP eligibility criteria
 - ✓ have a resuscitation status determined
 - ✓ received combined maximum EMP care, and home support that is no longer sufficient to support the individual to remain at home
 - ✓ have a life expectancy of three months or less or a palliative performance score of 50% or less
- ▶ Respite services will also be available with the above criteria however, length of stay is limited

Next Steps

- ▶ Residential Hospice is in the building phase
- ▶ Implementing the seamless Palliative Care Approach once it is completed