



Hospice Palliative Care Network

Hamilton Niagara Haldimand Brant

A year in review

November 2007 – November 2008

Vision for the Future

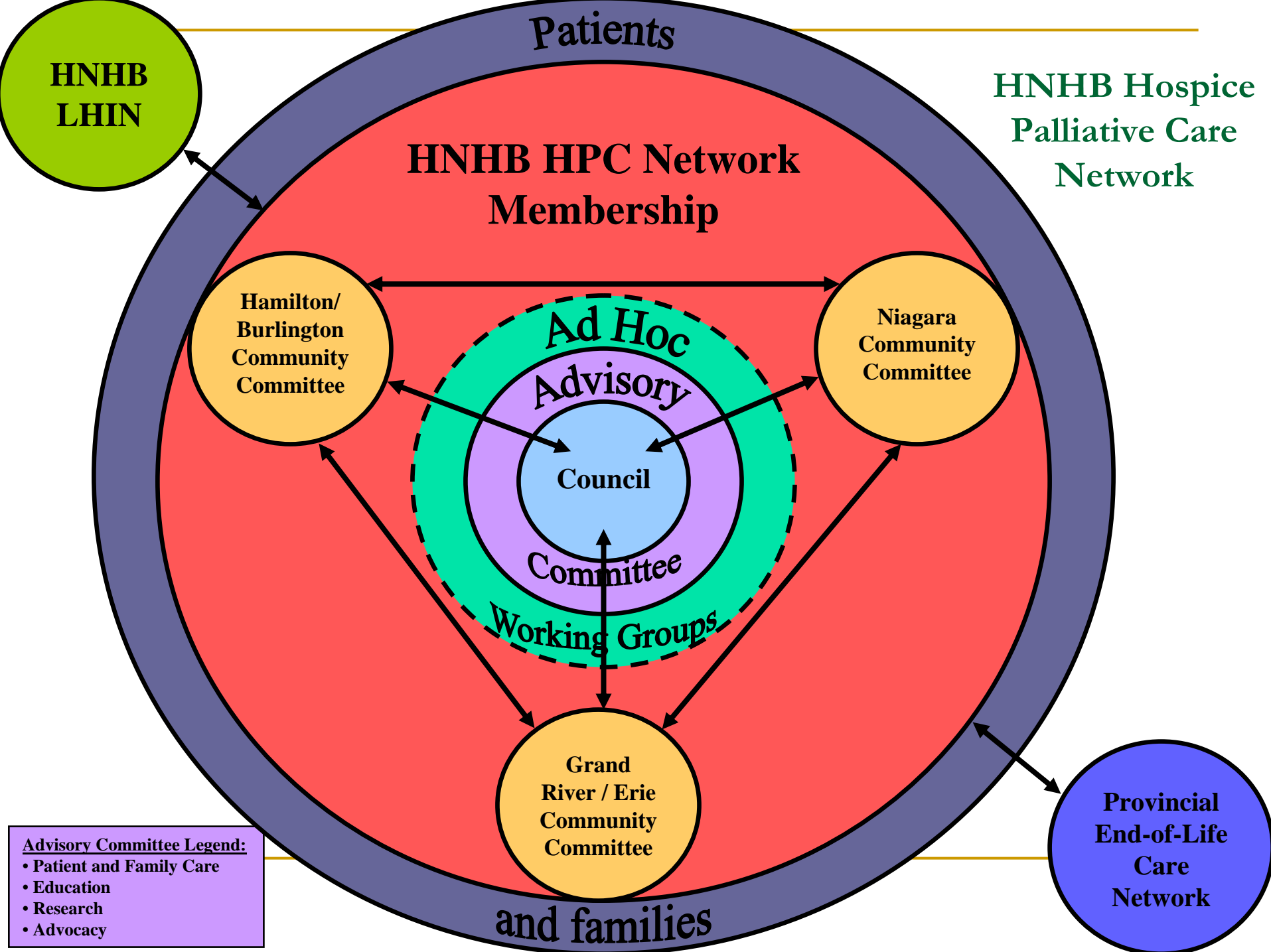
- Quality Hospice Palliative Care for all individuals in the HNHB LHIN area.

Mission/Mandate

- The HNHB Hospice Palliative Care Network is a network of stakeholders who work together collaboratively to plan, coordinate, implement and evaluate a system of quality hospice palliative care across the HNHB LHIN area.
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Organizational Structure

- The Network Council
 - The Network Advisory Committee
 - The Network Ad Hoc Working Groups
 - The Network Community Committees
 - The Network Membership
 - HNHB CCAC as Network Host Agency
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Overview

- HNHB Hospice Palliative Care System Design Phase I
 - Review of related activities, challenges and opportunities
 - HNHB Hospice Palliative Care System Design Phase II
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HNHB HPC System Design

- Consensus framework
 - Will guide the development of integrated and coordinated hospice palliative care services.
 - Supports organizations to develop their own internal hospice palliative care strategic plans.
 - Helps inform the LHIN about priority requirements.
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Steps Along the Ways

- Literature review
 - Identification of HPC system best practices
 - Creation of an integrated service model
 - Confirmation of an integrated approach
 - Endorsement of the creation of a Shared Care Model
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Shared Care Model

- Comprised of:
 - advanced practice nurse (APN);
 - palliative care physician;
 - psychosocial and bereavement counselling;
 - volunteer support;
 - a designated CCAC manager;
 - pharmacy services;
 - and enhanced services (such as 24 hour nursing, and equipment as required).
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Primary Providers

Manage disease, its manifestations and the predicaments it creates

Identify issues

Provide the core competencies of hospice palliative care

Secondary Experts

Are expert in hospice palliative care

Support primary providers in every setting where patients/families receive care

Tertiary Experts

Consult to secondary experts and primary providers on difficult-to-manage cases

Educate/train secondary and tertiary experts

Conduct research

Develop advocacy strategies

System Design Components

- Defined population and patient identification
 - Standardized assessment and process of care (mutually agreed upon)
 - Education by specialist to primary care, building community capacity
 - 24/7 access to specialist clinician support
 - Crosses continuum of patient care settings
 - Coordinated system navigation and avoids duplication
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Essential Building Blocks

- coordinated access;
- common standards of practice;
- collaborative information systems; and
- comprehensive education and mentorship.

All partners need to be involved in this development, including the hospital sector, the CCAC, the hospices, long-term care homes, primary care providers, shared care teams, and community and volunteer programs.

Benefits

- Crosses continuum of patient care settings
 - Coordinated system navigation to avoid duplication
 - Adequate supports are available to minimize suffering and burden on patient and family
 - Primary care physicians and other professionals are supported and mentored
 - Fosters inter-professional collaborative practice
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Sub-committees

- Service Delivery
 - Education
 - Communication Advocacy
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Service Delivery

- Mission/Mandate
 - Using best practices and innovation, provide recommendations to the Network Advisory Committee to guide a collaborative and integrative approach to service delivery to achieve quality, seamless care and equitable access to HPC services across the HNHB, working in partnership and consultation with key stakeholders across the LHIN area.
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Service Delivery Current Activities

- Developing and implementing the Shared Care Team Model
 - Collaborative Proposal for HPC Shared Care Teams and other integration initiatives submitted to the HNHB LHIN Aging at Home Strategy, with Lead Agency HNHB CCAC Fall 2007 – declined
 - Collaborative Proposal for Shared Care Teams, with Lead Agency HNHB CCAC, re-submitted Fall 2008 – awaiting decision
 - Seen as essential catalyst that could leverage the other HPC integration initiatives within HNHB
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Education

- Mission/Mandate

- Using best practices and innovation, provide recommendations to guide the core formal educational initiatives of the HNHB HPC Network in partnership and consultation with key stakeholders across the LHIN area.
 - Education of:
 - Health Care providers,
 - Palliative Care Volunteers and
 - General Public
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Education Activities

- HNHB Implementation of :
 - Fundamentals of Hospice Palliative Care
 - Advanced Hospice Palliative Care Education (AHPCE)
 - Pallium LEAP, and Innovations Conference in partnership with the Division of Palliative Care, Department of Family Medicine, McMaster
 - Community and Physician PPCIP education in partnership with Juravinski Cancer Centre and Division of Palliative Care, Department of Family Medicine, McMaster
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Advocacy/Communication

■ Mission/Mandate

- Using best practices and innovation develop and recommend the advocacy and communications strategies for the HNHB HPC Network in partnership and consultation with key stakeholders across the LHIN area to raise awareness about the Network, and to inform the broad community about current hospice palliative care issues and initiatives.
 - Facilitate a collective voice delivering key and compelling messages to all stakeholders, policy makers and funders
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Advocacy/Communication Activities

- A Communication Strategy has been drafted and is currently under review with work plans being developed



Key Successes

- The hiring of 2 new Palliative Care Consultants for Niagara and Hamilton
 - Residential Hospices Committee
 - Aboriginal HPC Services Committee
 - New joint partnership with the Division of Palliative Care
 - Board Representation at the Ontario Palliative Care Association (OPCA)
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Key Successes

- Shared Care Team collaborative
 - Alternative Physician Payment Plan (APP)
 - Developing relationships with Volunteer Education Programs within HNHB
 - The continued implementation of the 2 HNHB HPC IHSP Projects:
 - Standardized HPC Education
 - Standardized Common Tools using the PPCIP
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Key Successes

- Supporting the Hamilton Health Sciences HHS Quality EOL Care Task Force
 - HNHB HPC Network Website launched at www.hnhbhpc.net with high traffic volumes
 - Leadership at the Provincial End-of-Life Care Network (Communication & Co-Chair roles)
 - Support for EOL Community of Practice under the Senior Health Research Transfer Network (SHRTN)
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Our Current Environment

- MOHLTC Strategy (2004 - 2008)
 - \$70,000 to each LHIN for EOL Care Networks
 - 14 HPC/EOL Networks established across the Province
 - Ministry project office closed in September 2006, Provincial Advisory Committee sunset at that time.
 - Provincial EOL Care (PEOLC) Network established
 - No current formal link to the MOHLTC any longer
 - No current formal link to the LHINs, but recognized as an adviser on HPC issues within HNHB
 - Only six of fourteen Networks currently have a Director due to current environmental instability
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Our Current Environment

- Considerable in-kind support from the HNHB CCAC as Host Agency for the HNHB HPC Network
 - Strong working relationship with PC Consultants
 - Cancer Care Ontario changes Provincial Palliative Care Integration Project (PPCIP) to Ontario Cancer Symptom Management Collaborative
 - Overall misconceptions of HPC and public lack of interest in discussing death
 - Rapidly growing aging population with multiple progressive diseases and a corresponding rise in the need for HPC
 - A common voice for HPC needs sustaining
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Looking Ahead

- Supporting the implementation of 9 Shared Care Teams across the HNHB LHIN area over the next 3 years
 - Launching the Comprehensive Advanced Hospice Palliative Care Education (CAPCE) Fall 2009
 - Co-Chairing the HNHB PPCIP Steering Committee with the Juravinski Cancer Centre and supporting the community rollout plan of the PPCIP
 - Expanding the Network's Membership to include Organizational Membership
 - Establishing the Network Council
 - Proceeding with the System Design Phase II
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Next Steps in the System Design Phase II

- Given the progress made to date and the environment we currently live in, the HNHB HPC Network is currently asking the Network membership to rank their top ten (10) key priorities that they recommend the Network must focus on in the development of their:
 - Short Term Priorities
 - Mid Term Priorities
 - Long Term Priorities
 - This survey can be found on the Network “Current Activities” page of the Network website.
<http://hnhbhpc.net/AbouttheNetwork/CurrentActivities/tabid/64/Default.aspx>
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Next Steps in the System Design Phase II

- This data collection exercise will assist the HNHB Hospice Palliative Care Network Advisory Committee to identify short, mid and long range planning priorities and project initiatives based on your input
 - Please complete the survey by Friday, December 12, 2008
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