Edmonton Zone Palliative Care Program

Cross-site report for last three fiscal years



How are we doing and where are we going?

Introduction

Introduction/background: The Edmonton Zone Palliative Care Program (EZPCP) coordinates specialist palliative care services in all locations in the Edmonton Zone in support of primary care MDs and attending teams in acute care. The program sets the standards for the palliative care provided, ensures seamless transfer of patients and information, provides palliative care education to the public and health care staff, and supports research.

The Edmonton Zone Palliative Care Program offers palliative care in:

- Tertiary palliative care unit
- Six hospice palliative care units
- Palliative consultation services in acute care and the community
- Palliative home care support

Data sources used:

- Edmonton Zone Palliative Care Program database
- Edmonton Zone Continuing Care database Strata Health Pathways

Objectives

- Discuss accomplishments and progress over the last year
- Review clinical activity growth over the last three years and focus on the recent fiscal year (2017/2018)
- Consider anticipated program evolution for the next fiscal year (2018/2019)

Accomplishments and progress in 2017/2018

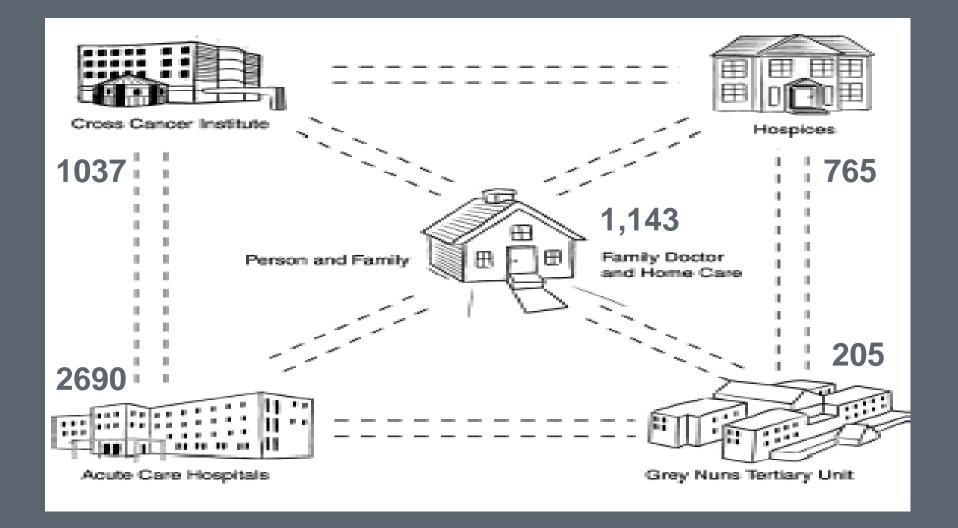
- Ongoing evolution in adapting MAiD legislation
- Covenant Health palliative care consult service pilot initiative completed
- Inner city palliative care ongoing
- Improving community connections e.g. neurology, Primary Care Networks (PCNs)
- Famcare surveys process centralized
- Database evolution within Connect Care

- Integrating palliative home care into our zone program
- Future of our website palliative.org and shift to AHS website
- New hospice PCU location Rivercrest hospice unit (opened in June 2018)
- Need for physician AARP ongoing
- Implementation of EOL care pathway
- Change in admin leadership welcome to Janice and Michelle

Residents make it four years in a row!



Edmonton Zone Palliative Care Program 2017/18



EZPCP Services : All consults/admissions by location

| | Fiscal year | | | | |
|---|-------------|-----------|-----------|--|--|
| Site/program | 2015/2016 | 2016/2017 | 2017/2018 | | |
| RAH (Royal Alexandra Hospital) | 758 | 696 | 775 | | |
| UAH (University of Alberta Hospital) | 726 | 720 | 745 | | |
| CCI (Cross Cancer Institute) | 910 | 953 | 1037 | | |
| CH (Covenant Health consult team) | (566) | (664) | 654 | | |
| PCCT (Palliative Community consult team) | 2095 | 2271 | 1681 | | |
| TPCU (Tertiary Palliative Care Unit) | 230 | 209 | 205 | | |
| Hospice PCUs | 782 | 820 | 765 | | |
| Total | 5501 | 5669 | 5862 | | |

Key findings – Zone workload continues to grow

EZPCP Services : CCT referrals by referral location

| | | | | | I | |
|---------------------------|-----------|------|-----------|------|-----------|------|
| Referral from location | 2015/2016 | | 2016/2017 | | 2017/2018 | |
| | # | % | # | % | # | % |
| Home/community | 984 | 47% | 1094 | 48% | 1143 | 68% |
| CH sites (Covenant sites) | 566 | 27% | 664 | 29% | | |
| AHS sites (AHS sites) | 524 | 25% | 493 | 22% | 516 | 31% |
| Out of zone | 21 | 1% | 20 | 1% | 22 | 1% |
| PCCT total | 2095 | 100% | 2271 | 100% | 1681 | 100% |

Key findings: The majority (68%) of CCT referrals were from home/community.

CCT hospitals by hospital name

| | | | Fiscal year | | | | | | |
|-------|------------------------------------|-----------|-------------|-----------|----------|-----------|----------|--|--|
| ССТ | Referring Hospital | 2015/2016 | | 2016/2017 | | 2017/2018 | | | |
| | | # | % | # | % | # | % | | |
| СН | Grey Nuns Hospital | 312 | 29% | 402 | 35% | | | | |
| Sites | Misericordia Community Hospital | 254 | 23% | 262 | 23% | | | | |
| | Fort Sask. Community Hospital | 101 | 9% | 69 | 6% | 80 | 16% | | |
| | Devon General Hospital | 47 | 4% | 36 | 3% | 36 | 7% | | |
| AHS | Leduc General Hospital | 39 | 4% | 52 | 4% | 52 | 10% | | |
| Sites | Sturgeon Community Hospital | 200 | 18% | 183 | 16% | 210 | 41% | | |
| | WestView Community Hospital | 86 | 8% | 100 | 9% | 98 | 19% | | |
| | *Other hospitals | 51 | 5% | 53 | 4% | 40 | 7% | | |
| | Total | 1090 | 100% | 1157 | 100 % | 516 | 100 % | | |

*Other includes Glenrose Rehabilitation Hospital, Strathcona Health Centre and Alberta Hospital Edmonton

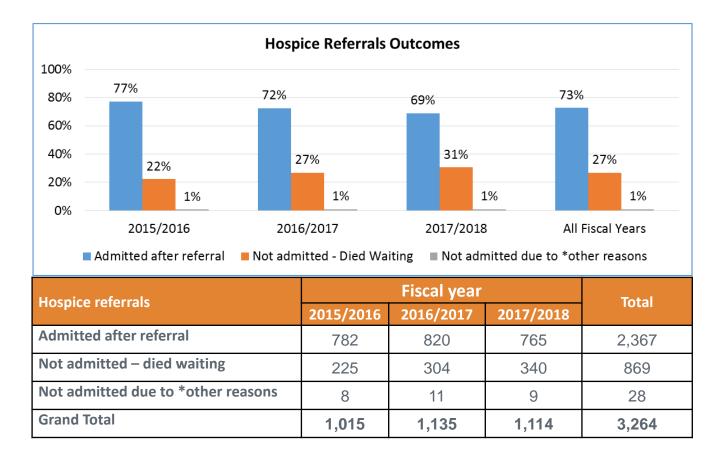
Hospice admissions by hospice site

| | Fiscal year | | | | |
|--|-------------|-----------|-----------|--|--|
| Hospice sites | 2015/2016 | 2016/2017 | 2017/2018 | | |
| Capital Care Norwood | 260 | 307 | 253 | | |
| Edmonton General Continuing Care Centre | 270 | 226 | 234 | | |
| Foyer Lacombe | 18 | 80 | 74 | | |
| St. Joseph's Auxiliary Hospital | 162 | 124 | 121 | | |
| Westview Continuing Care | 67 | 83 | 83 | | |
| Youville Home | 5 | | | | |
| Total | 782 | 820 | 765 | | |

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Note: Youville Home Hospice was closed at end of 2015 and Foyer Lacombe site was opened in 2016

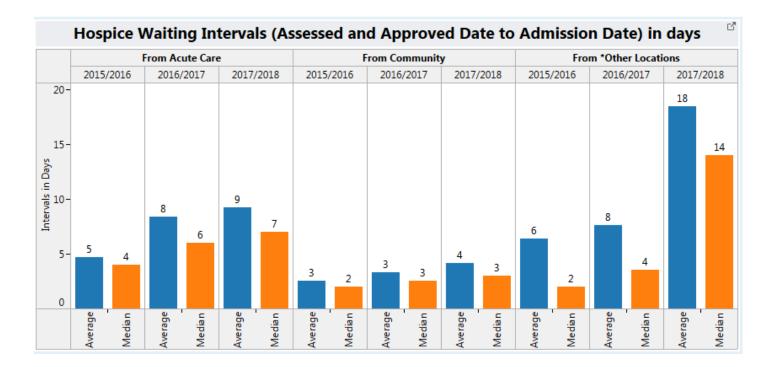
Hospice acceptance & outcomes



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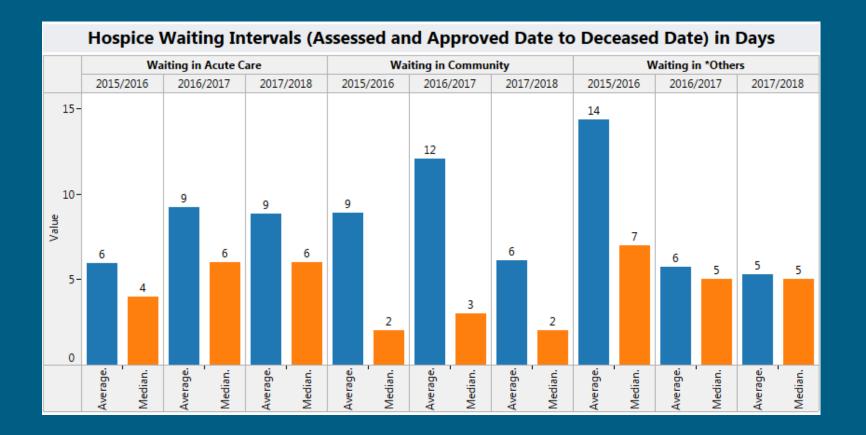
Key Findings: The percentage of hospice referrals with "Died Waiting" and "Not admitted due to *other reason" outcomes ranged from 23% to 32% over the last three fiscal years.

Hospice waiting intervals for admitted clients



<u>Key Findings</u>: For the recent fiscal year (2017/2018), the waiting from "Other Locations" had the longer assessed and approved date to admission date waiting intervals but there were only 30 referrals (4%) from these locations during this fiscal year. *Other locations includes Subacute, TU (Transition Units), Out of Zone, transfers between Hospice sites.

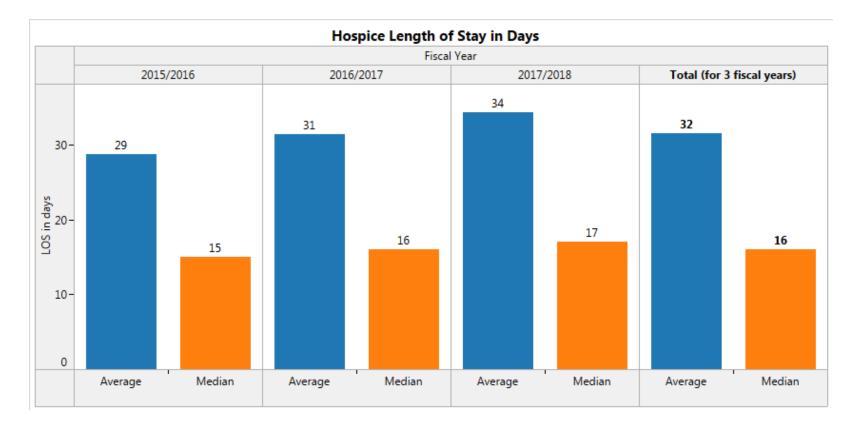
Hospice waiting intervals for "died waiting" clients



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*Other includes subacute, TU, out of zone, transfers between hospice sites, TPCU etc.

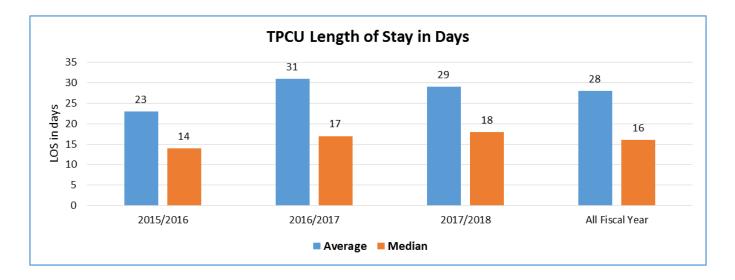
Hospice LOS (in days)



Key findings: The hospice units had the highest average and highest median length of stay for the recent fiscal year (2017/2018) as compared to the previous fiscal years.

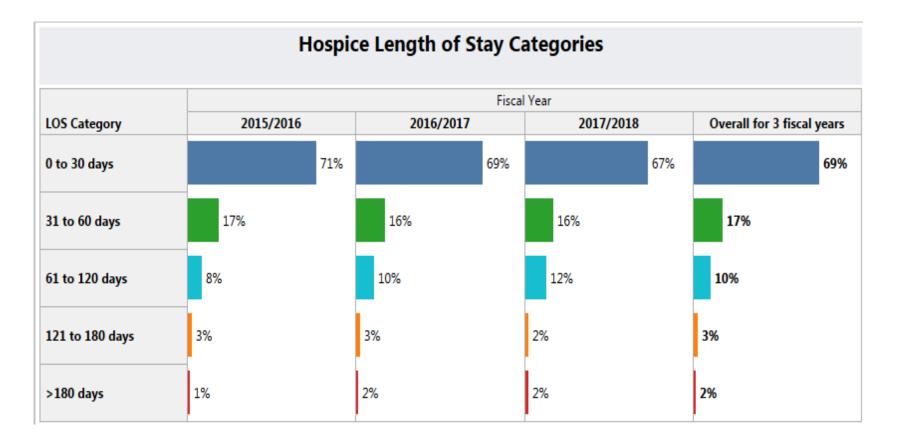
TPCU admissions/discharges/LOS

| | Fiscal year | | |
|------------|-------------|-----------|-----------|
| | 2015/2016 | 2016/2017 | 2017/2018 |
| Admissions | 230 | 209 | 205 |



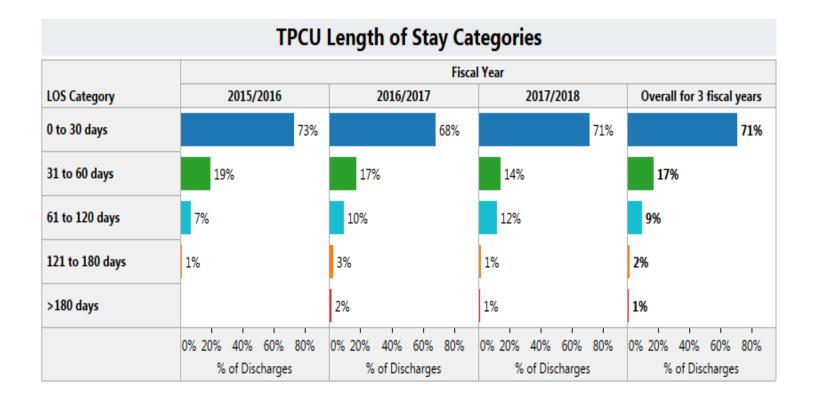
Key findings: The average length of stay for TPUC was lower for the recent fiscal year (2017/2018) as compared to the previous fiscal year (2016/2017) but the median length of stay was higher for the recent fiscal year as compared to the last fiscal year.

Hospice length of stay categories



Key findings: Overall for past three fiscal years, more than 85% clients were discharged within 60 days from Hospice sites and only 5% stayed more than 120 days

TCPU length of stay categories



Key Findings: At TPCU, only 3% of the clients were discharged after 120 days

Non cancer diagnosis (percentage)

| | Fiscal Year | | | | | |
|--------------|-------------|-----------|-----------|--|--|--|
| Site/Program | 2015/2016 | 2016/2017 | 2017/2018 | | | |
| RAH | 35.2% | 30.3% | 36.5% | | | |
| UAH | 33.9% | 30.7% | 26.6% | | | |
| СН | 20.7% | 24.1% | 28% | | | |
| CCI | 0.0% | 0.0% | 0.0% | | | |
| TPCU | 1.7% | 2.9% | 1.5% | | | |
| ССТ | 19.8% | 19.8% | 23.7% | | | |
| Hospice | 11.8% | 8.7% | 9.0% | | | |

| Deferred From | Fiscal Year | | | | |
|----------------------|-------------|-----------|-----------|--|--|
| Referral From | 2015/2016 | 2016/2017 | 2017/2018 | | |
| CCT – Home/community | 14.2% | 15.3% | 19.8% | | |
| CCT – AHS sites | 26.4% | 22.6% | 26.1% | | |

Key Findings: Growing success with attracting non cancer referrals

Edmonton classification system for cancer pain

2017/2018 fiscal year

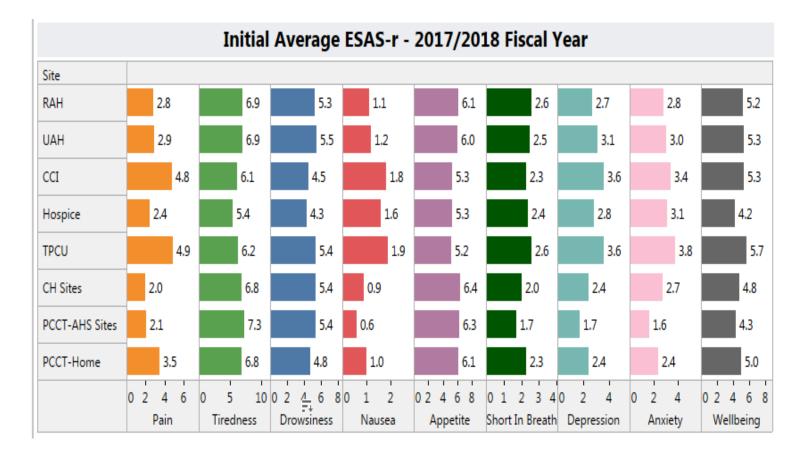
| Pain Category | Pain Classification | | | | | | | |
|---------------------------|---|----------------|----------------|----------------|-----------------|---------------------|------------------------|----------------------|
| | No (No Pain Syndrome) | 23% | 43% | 4% | 6% | 29% | 34% | 30% |
| Mechanism | Nc (Combination of Pain - Visceral/bone. | 52% | 41% | 62% | 58% | 53% | 41% | 51% |
| Pain | Ne (Neuropathic Pain Syndrome) | 9% | 8% | 27% | 32% | 10% | 6% | 9% |
| | Nx (Insufficient Information to Classify) | 16% | 8% | 6% | 5% | 9% | 18% | 10% |
| | Io (No Incident Pain) | 39% | 48% | 43% | 30% | 51% | 25% | 37% |
| Incident Pain | Ii (Incident Pain Present) | 26% | 30% | 45% | 40% | 29% | 41% | 46% |
| | Ix (Insufficient Information to classify) | 35% | 22% | 12% | 29% | 21% | 34% | 17% |
| | Po (No Psychological distress) | 56% | 68% | 67% | 49% | 75% | 74% | 67% |
| Psychological Distress | Pp (Psychological Distress Present) | 15% | 12% | 17% | 19% | 5% | 5% | 12% |
| | Px (Insufficient Information to Classify) | 29% | 20% | 15% | 31% | 20% | 22% | 21% |
| | Ao (No Addictive Behavior) | 73% | 81% | 88% | 85% | 91% | 89% | 94% |
| Addictive Behaviour | Aa (Addictive Behavior Present) | 4% | 8% | 6% | 7% | 3% | 1% | 2% |
| | Ax (Insufficient Information to classify) | 23% | 11% | 6% | 8% | 5% | 10% | 5% |
| | Co (No Impairment) | 49% | 52% | 80% | 61% | 47% | 45% | 62% |
| Cognitive | Ci (Partial Impairment) | 22% | 29% | 17% | 29% | 26% | 30% | 23% |
| Function | Cu (Total Impairment) | 23% | 16% | 2% | 8% | 19% | 13% | 7% |
| | Cx (Insufficient Information to Classify) | 6% | 2% | 0% | 2% | 9% | 12% | 8% |
| | | 0% 100% RAH | 0% 100% UAH | 0% 100% CCI | 0% 100% TPCU | 0% 100% CH Sites | 0% 100% PCCT AHS Si | 0% 100% PCCT Home |

June 24, 2019

2017/2018 fiscal year

Edmonton Symptom Assessment System Revised (ESAS-r) scores

ESAS score scale: Score of 0 is "no symptoms" and score of 10 is the "worst possible symptoms"

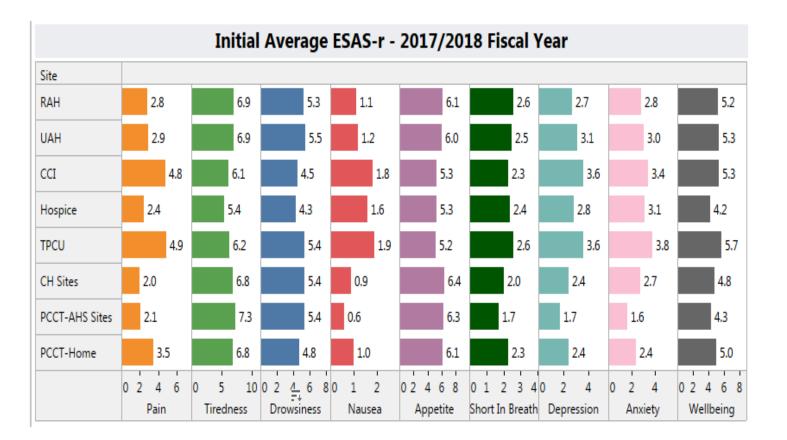


June 24, 2019

2017/2018 fiscal year

Edmonton Symptom Assessment System Revised (ESAS-r) scores

ESAS score scale: Score of 0 is "no symptoms" and score of 10 is the "worst possible symptoms"

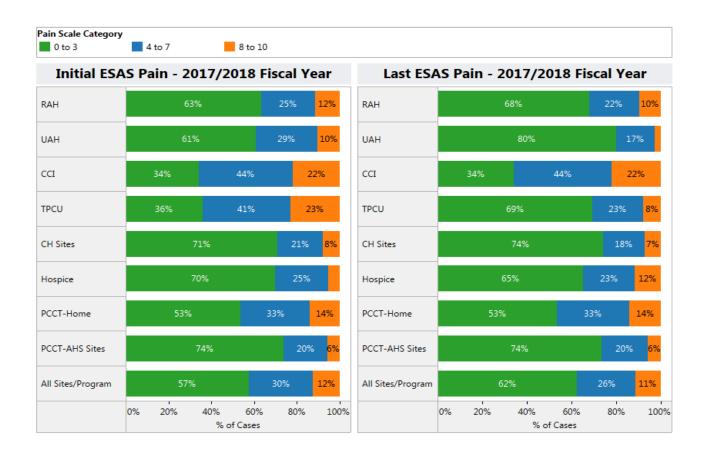


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ESAS Score Scale: Score of 0 is "no symptoms" and Score of 10 is "the worst possible symptoms"

ESAS-r pain groupings

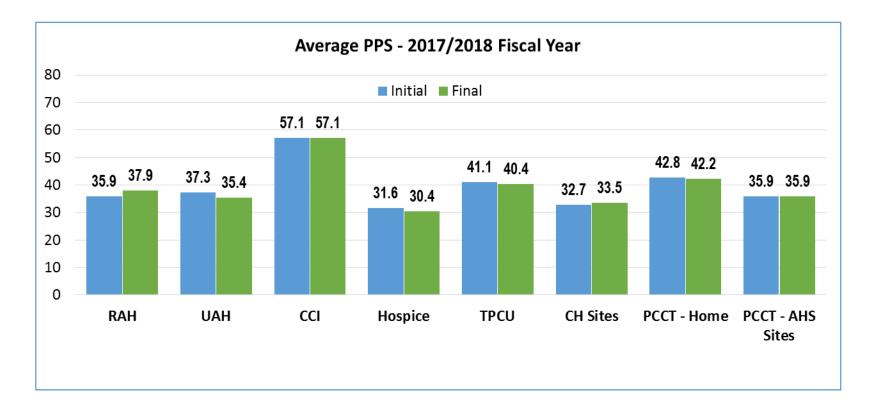
ESAS-r Pain Score Scale: Score of 0 is "no pain" and Score of 10 is "worst possible pain"



June 24, 2019

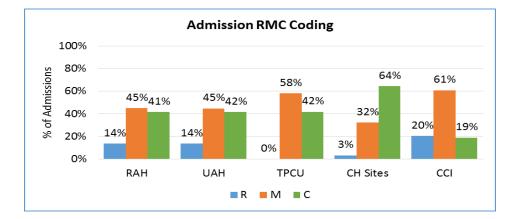
<u>Please note:</u> For some cases the symptoms documentation was only entered once in the database, therefore no change in initial and final symptoms numbers and percentages.

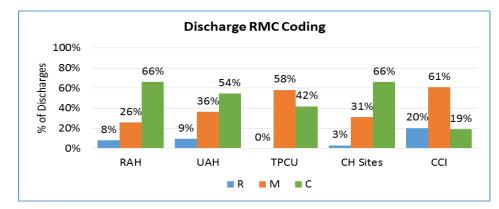
Palliative performance scale (PPS)



Please note: For some cases the PPS was only documented once in the database, therefore no change in initial and final PPS averages.

Goals of Care RMC coding





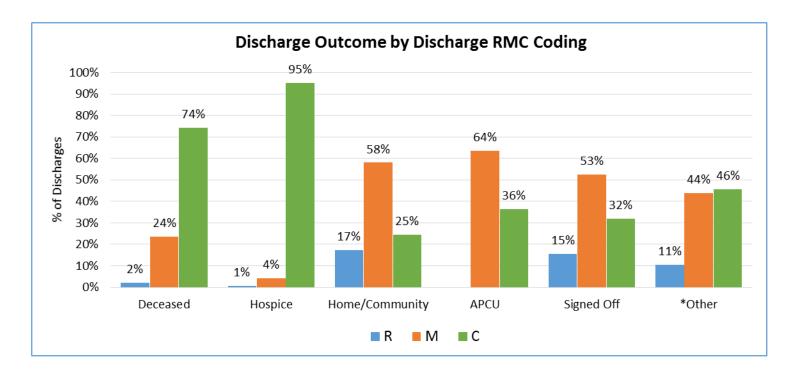
RMC Coding:

R: Medical care and interventions, including resuscitation M: Medical care and interventions excluding resuscitation C: Medical care and interventions, focused on comfort

Goals of Care detailed RMC coding at admission

| Goals of Care designation | | Admission site | | | | | | | | | |
|---|-----------|----------------|--------|-----|--------|-----|-------|-----|-------|-----|------|
| | | R | RAH U/ | | АН ТРС | | си сн | | Sites | ССІ | |
| | | # | % | # | % | # | % | # | % | # | % |
| R: Medical | R1 | 80 | 12% | 54 | 10% | 0 | | 7 | 2% | 133 | 18% |
| care and interventions, including | R2 | 3 | 0.3% | 5 | 1% | 0 | | 2 | 1% | 3 | 0.4% |
| resuscitation | R3 | 10 | 1% | 15 | 3% | 0 | | 3 | 1% | 10 | 1% |
| M: Medical care and | M1 | 287 | 42% | 230 | 42% | 111 | 55% | 107 | 29% | 413 | 57% |
| interventions excluding resuscitation | M2 | 18 | 3% | 15 | 3% | 6 | 3% | 12 | 3% | 24 | 3% |
| C: Medical care and | C1 | 197 | 29% | 205 | 37% | 81 | 40% | 218 | 59% | 131 | 18% |
| interventions, focused on comfort | C2 | 85 | 13% | 23 | 4% | 3 | 1% | 20 | 5% | 5 | 1% |

MC coding & discharge outcome (RAH+UAH+CH sites discharges)



RMC Coding:

R: Medical care and interventions, including resuscitation **M:** Medical care and interventions excluding resuscitation

C: Medical care and interventions, focused on comfort

Famcare survey at EZ CC hospice/palliative care units Time period: December 2015 to 31 March 2018

Famcare survey response rate

| Hospice Sites/TPCU | Total Survey Received | Total Survey Sent | Respons e Rate |
|-------------------------------|--------------------------|----------------------|-------------------|
| Capital Care Norwood Hospice | 151 | 389 | 39% |
| Edmonton General Hospice | 120 | 338 | 36% |
| Foyer Lacombe Hospice | 35 | 89 | 39% |
| St. Joseph Hospice | 83 | 223 | 37% |
| Westview Hospice | 35 | 117 | 30% |
| Tertiary Palliative Care Unit | 84 | 249 | 34% |
| Grand Total | 508 | 1,405 | 36% |

June 24, 2019

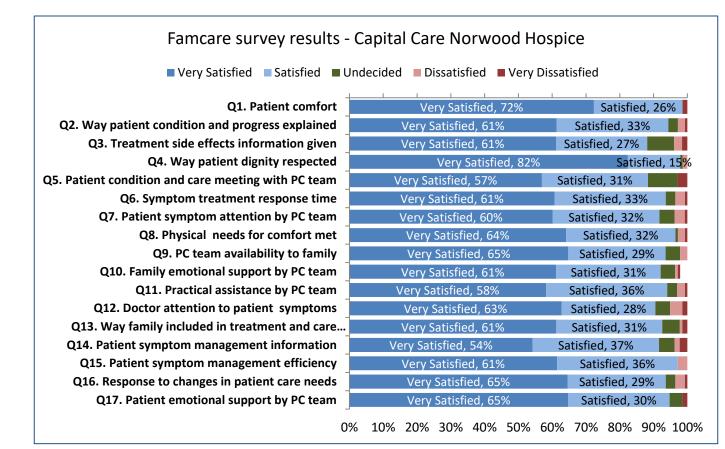
Famcare survey started in December 2015

Famcare survey results - All Edmonton Zone hospice/palliative care units

■ Very Satisfied ■ Satisfied ■ Undecided ■ Dissatisfied ■ Very Dissatisfied

| Q1. Patient comfort |
|--|
| Q2. Way patient condition and progress explained |
| Q3. Treatment side effects information given |
| Q4. Way patient dignity respected |
| Q5. Patient condition and care meeting with PC team |
| Q6. Symptom treatment response time |
| Q7. Patient symptom attention by PC team |
| Q8. Physical needs for comfort met |
| Q9. PC team availability to family |
| Q10. Family emotional support by PC team |
| Q11. Practical assistance by PC team |
| Q12. Doctor attention to patient symptoms |
| Q13. Way family included in treatment and care decisions |
| Q14. Patient symptom management information |
| Q15. Patient symptom management efficiency |
| Q16. Response to changes in patient care needs |
| Q17. Patient emotional support by PC team |
| |

| _ | | | | |
|----|------------------------|-------------------|--|--|
| | Very Satisfied, 71% | Satisfied, 26% | | |
| | Very Satisfied, 65% | Satisfied, 29% | | |
| | Very Satisfied, 60% | Satisfied, 31% | | |
| | Very Satisfied, 80% | Satisfied, 16% | | |
| | Very Satisfied, 58% | Satisfied, 32% | | |
| | Very Satisfied, 58% | Satisfied, 34% | | |
| | Very Satisfied, 63% | Satisfied, 29% | | |
| | Very Satisfied, 68% | Satisfied, 28% | | |
| | Very Satisfied, 65% | Satisfied, 29% | | |
| | Very Satisfied, 66% | Satisfied, 28% | | |
| | Very Satisfied, 62% | Satisfied, 30% | | |
| | Very Satisfied, 64% | Satisfied, 27% | | |
| | Very Satisfied, 61% | Satisfied, 31% | | |
| | Very Satisfied, 56% | Satisfied, 36% | | |
| | Very Satisfied, 61% | Satisfied, 33% | | |
| | Very Satisfied, 64% | Satisfied, 29% | | |
| | Very Satisfied, 67% | Satisfied, 26% | | |
| 0% | 10% 20% 30% 40% 50% 60 | 0% 70% 80% 90% 10 | | |



| Very Satisfied Satisfied Und | decided 🔳 Dissatisfied 🔳 Very D | vissatisfied |
|---|---------------------------------|------------------------------|
| . 4 | | |
| Q1. Patient comfort | Very Satisfied, 70% | Satisfied, 25% |
| Q2. Way patient condition and progress explained | Very Satisfied, 64% | Satisfied, 31% |
| Q3. Treatment side effects information given | Very Satisfied, 54% | Satisfied, 37% |
| Q4. Way patient dignity respected | Very Satisfied, 76% | Satisfied, 17 <mark>%</mark> |
| Q5. Patient condition and care meeting with PC team | Very Satisfied, 52% | Satisfied, 40% |
| Q6. Symptom treatment response time | Very Satisfied, 43% | Satisfied, 46% |
| Q7. Patient symptom attention by PC team | Very Satisfied, 58% | Satisfied, 32% |
| Q8. Physical needs for comfort met | Very Satisfied, 67% | Satisfied, 26% |
| Q9. PC team availability to family | Very Satisfied, 54% | Satisfied, 39% |
| Q10. Family emotional support by PC team | Very Satisfied, 64% | Satisfied, 31% |
| Q11. Practical assistance by PC team | Very Satisfied, 59% | Satisfied, 31% |
| Q12. Doctor attention to patient symptoms | Very Satisfied, 63% | Satisfied, 27% |
| Q13. Way family included in treatment and care | Very Satisfied, 53% | Satisfied, 40% |
| Q14. Patient symptom management information | Very Satisfied, 49% | Satisfied, 40% |
| Q15. Patient symptom management efficiency | Very Satisfied, 79% | Satisfied, 5% |
| Q16. Response to changes in patient care needs | Very Satisfied, 58% | Satisfied, 33% |
| Q17. Patient emotional support by PC team | Very Satisfied, 55% | Satisfied, 36% |

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

| Famcare survey result | s - Foyer Lacombe Ho | ospice |
|---|------------------------|------------------|
| Very Satisfied Satisfied Und | ecided Dissatisfied Ve | ery Dissatisfied |
| | | |
| Q1. Patient comfort | Very Satisfied, 64% | Satisfied, 27% |
| Q2. Way patient condition and progress explained | Very Satisfied, 55% | Satisfied, 35% |
| Q3. Treatment side effects information given | Very Satisfied, 61% | Satisfied, 29% |
| Q4. Way patient dignity respected | Very Satisfied, 68% | Satisfied, 24% |
| Q5. Patient condition and care meeting with PC team $oxed{1}$ | Very Satisfied, 52% | Satisfied, 41% |
| Q6. Symptom treatment response time | Very Satisfied, 44% | Satisfied, 34% |
| Q7. Patient symptom attention by PC team ㅣ | Very Satisfied, 55% | Satisfied, 29% |
| Q8. Physical needs for comfort met | Very Satisfied, 56% | Satisfied, 32% |
| Q9. PC team availability to family | Very Satisfied, 61% | Satisfied, 30% |
| Q10. Family emotional support by PC team | Very Satisfied, 52% | Satisfied, 36% |
| Q11. Practical assistance by PC team | Very Satisfied, 52% | Satisfied, 35% |
| Q12. Doctor attention to patient symptoms | Very Satisfied, 59% | Satisfied, 24% |
| Q13. Way family included in treatment and care | Very Satisfied, 61% | Satisfied, 21% |
| Q14. Patient symptom management information | Very Satisfied, 55% | Satisfied, 29% |
| Q15. Patient symptom management efficiency | Very Satisfied, 48% | Satisfied, 42% |
| Q16. Response to changes in patient care needs | Very Satisfied, 61% | Satisfied, 23% |
| Q17. Patient emotional support by PC team | Very Satisfied, 59% | Satisfied, 25% |

 $0\% \quad 10\% \quad 20\% \quad 30\% \quad 40\% \quad 50\% \quad 60\% \quad 70\% \quad 80\% \quad 90\% \quad 100\%$

June 24, 2019

*Other includes Glenrose Rehabilitation Hospital, Strathcona Health Centre and Alberta Hospital Edmonton

| Famcare survey res | ults - St. Joseph Hospice | |
|--|---------------------------------|---------------------|
| Very Satisfied Satisfied Und | decided 🔲 Dissatisfied 🔳 Very D | Dissatisfied |
| Q1. Patient comfort | Very Satisfied, 63% | Satisfied, 35% |
| Q2. Way patient condition and progress explained | Very Satisfied, 58% | Satisfied, 31% |
| Q3. Treatment side effects information given | Very Satisfied, 52% | Satisfied, 38% |
| Q4. Way patient dignity respected | Very Satisfied, 77% | Satisfied, 17% |
| Q5. Patient condition and care meeting with PC team | Very Satisfied, 47% | Satisfied, 39% |
| Q6. Symptom treatment response time | Very Satisfied, 63% | Satisfied, 29% |
| Q7. Patient symptom attention by PC team | Very Satisfied, 57% | Satisfied, 34% |
| Q8. Physical needs for comfort met | Very Satisfied, 64% | Satisfied, 31% |
| Q9. PC team availability to family | Very Satisfied, 65% | Satisfied, 24% |
| Q10. Family emotional support by PC team | Very Satisfied, 71% | Satisfied, 23% |
| Q11. Practical assistance by PC team | Very Satisfied, 62% | Satisfied, 27% |
| Q12. Doctor attention to patient symptoms | Very Satisfied, 57% | Satisfied, 33% |
| Q13. Way family included in treatment and care decisions | Very Satisfied, 59% | Satisfied, 33% |
| Q14. Patient symptom management information | Very Satisfied, 52% | Satisfied, 37% |
| Q15. Patient symptom management efficiency | Very Satisfied, 60% | Satisfied, 33% |
| Q16. Response to changes in patient care needs | Very Satisfied, 60% | Satisfied, 31% |
| Q17. Patient emotional support by PC team | Very Satisfied, 71% | Satisfied, 21% |
| 0' | % 10% 20% 30% 40% 50% | 60% 70% 80% 90% 100 |

| w Hospice | |
|---------------------|----------------|
| | |
| sfied Very Dissatis | sfied |
| | sneu |
| Satisfied, 77% | Satisfied, 23% |
| ntisfied, 72% | Satisfied, 28% |
| fied, 64% | Satisfied, 36% |
| / Satisfied, 81% | Satisfied, 19% |
| isfied, 68% Sa | atisfied, 23% |
| atisfied, 74% | Satisfied, 26% |
| Satisfied, 77% | Satisfied, 23% |
| atisfied, 75% | Satisfied, 25% |
| atisfied, 75% | Satisfied, 22% |
| Satisfied, 78% | Satisfied, 19% |
| atisfied, 74% | Satisfied, 23% |
| isfied, 69% | Satisfied, 25% |
| isfied, 69% | Satisfied, 28% |
| sfied, 65% | Satisfied, 35% |
| isfied, 68% | Satisfied, 32% |
| atisfied, 72% | Satisfied, 25% |
| atisfied, 75% | Satisfied, 19% |
| | |

| Eamcaro survov rosults | Tertiary Care Palliative Unit | |
|--|--------------------------------------|------------------------------|
| Failleare survey results - | Tertiary Care Pallative Offic | |
| Very Satisfied Satisfied Under | cided 🔲 Dissatisfied 📕 Very Dissatis | fied |
| | | |
| Q1. Patient comfort | Very Satisfied, 83% | Satisfied, 16 <mark>%</mark> |
| Q2. Way patient condition and progress explained | Very Satisfied, 79% | Satisfied, 15 <mark>%</mark> |
| Q3. Treatment side effects information given | Very Satisfied, 71% | Satisfied, 24% |
| Q4. Way patient dignity respected | Very Satisfied, 89% | Satisfied, 7% |
| Q5. Patient condition and care meeting with PC team | Very Satisfied, 77% | Satisfied, 18% |
| Q6. Symptom treatment response time | Very Satisfied, 68% | Satisfied, 27% |
| Q7. Patient symptom attention by PC team | Very Satisfied, 76% | Satisfied, 19% |
| Q8. Physical needs for comfort met | Very Satisfied, 80% | Satisfied, 17 <mark>%</mark> |
| Q9. PC team availability to family | Very Satisfied, 77% | Satisfied, 21% |
| Q10. Family emotional support by PC team | Very Satisfied, 79% | Satisfied, 20% |
| Q11. Practical assistance by PC team | Very Satisfied, 75% | Satisfied, 19% |
| Q12. Doctor attention to patient symptoms | Very Satisfied, 76% | Satisfied, 20% |
| Q13. Way family included in treatment and care decisions | Very Satisfied, 76% | Satisfied, 21% |
| Q14. Patient symptom management information | Very Satisfied, 72% | Satisfied, 26% |
| Q15. Patient symptom management efficiency | Very Satisfied, 74% | Satisfied, 22% |
| Q16. Response to changes in patient care needs | Very Satisfied, 74% | Satisfied, 24% |
| Q17. Patient emotional support by PC team | Very Satisfied, 81% | Satisfied, 13% |
| 0 | % 10% 20% 30% 40% 50% 60% 7 | 70% 80% 90% 100% |

June 24, 2019

*Other includes Glenrose Rehabilitation Hospital, Strathcona Health Centre and Alberta Hospital Edmonton

Urban palliative home care program

- Team moved from Westlawn to Seventh Street Plaza; now colocated with the community consult team
- Enhancing Care in the Community (ECC) phase II has resulted in additional team positions:
 - A system case manager (1.00 FTE)
 - A therapy assistant (0.50 FTE)
 - An addition respiratory therapist (0.50 FTE)
 - A nurse practitioner (1.00)

- Collaborating with Home Living program (regular) to explore role of nurse practitioners, role of community partners (i.e. PCN) etc.
- Canadian Home Care Association (CHCA) held a palliative care experience mapping workshop in Edmonton in July 2018

- 2018 CHCA Home Care summits in Charlottetown PEI (Oct 1 & 2) and Vancouver BC (Oct 22 & 23) will feature innovations in home-based palliative care

 Community groups expressing interest in meeting PEOL care needs for its members (i.e. Persons with Developmental Disabilities (PDD), Seniors Association of Greater Edmonton (SAGE))

Changes over the last 20 years

Regional Palliative Care Program Annual Report April 1, 1999 - March 31, 2000 Page 5 . . .

The office liaises closely with the Division of Palliative Care Medicine, Tertiary Palliative Care Unit (Grey Nuns Community Hospital), Referral Centres, Community Hospitals, Palliative Hospices and Continuing Care, Home Care, Family Physicians, and the Cross Cancer Institute (Appendix 6) to meet the goals and objectives of the program.

| Title | FTE | Name |
|---|--------|------------------------------------|
| Program Director | 1.0 | Carleen Brenneis |
| Clinical Director Acting Clinical Director | 0.2 | Eduardo Bruera Robin Fainsinger |
| Secretary | 1.0 | Barb Jones |
| Secretary | 0.5 | Myrtle Gauld |
| Data Manager | 0.5 | Hue Quan |
| Volunteer & Bereavement Manager | 1.0 | Paula Brindley |
| Consult Physician | 1.0 | Anna Taube |
| Consult Physician | 1.0 | Peter Lawlor |
| Consult Physician | 1.0 | Jose Pereira |
| Consult Physician | 1.0 | Doreen Oneschuk |
| Consult Physician | 0.6 | Lemore Alima |
| Consult Physician | 0.4 | Tami Shandro |
| Consult Nurse | 1.0 | Gary Frank |
| Consult Nurse | 1.0 | Sally Tureo |
| Consult Nurse | 1.0 | Patsy Cantwell |
| Consult Nurse | 1.0 | Larissa Podilsky |
| Consult Nurse | Casual | Bev Frost |
| Consultant | Casual | Beth Perry |
| Consultant | Casual | Linda Read-Paul |
| Consultant | Casual | Jacquie Peden |

REGIONAL PALLIATIVE CARE PROGRAM STAFFING - (March 31, 1999)

Staff Changes:

| July 1, 1999 | Eduardo Bruera resigned. Robin Fainsinger appointed acting director |
|-----------------|---|
| September 1999 | -Jose Pereira on leave of absence to become acting director of tertiary |
| | palliative care unit. |
| August 12, 1999 | Lemore Alima and Tami Shandro hired as physician consultants. |

1999 - 2000

VISITORS & FELLOWS

Mazuryk, Mare* Cheng, Christine 31 Tarumi, Yoko Martinez, Marina Amigo, Pablo Reddy, Suresh Cairns, W Driver, Larry Socci, Maria, RN Wright, John Kaasa, Stein

Calgary, AB Caracas, Venezuela Sapporo, Japan Vitoria, Spain Buenos Aires, Argentina Houston, TX Townsville, Australia Houston, TX Houston, TX Houston, TX Trondheim, Norway

Oct 5/98-Sep 30/99 Apr 01/99-Mar 31/00 Apr 01/99-May 30/01 Feb. 01-Apr 30/99 Mar. 02-Apr 16/99 Mar. 8-12/99 Mar 22-26/99 Apr. 5-10/99 Apr. 5-10/99 Apr. 5-10/99 Apr. 26-28/99

REGIONAL PALLIATIVE PROGRAM COUNCIL MEMBERSHIP LIST January, 2002

| Name | Position |
|------------------------------|---|
| Carleen Brenneis Co-Chair | Program Director Regional Palliative Care Program. |
| | Grey Nuns Community Hospital |
| Robin Fainsinger | Director, Division of Palliative Care Medicine |
| Co-Chair | Royal Alexandra Hospital |
| Marion Boyd | Executive Director |
| 101 | Pilgrim's Hospice Society |
| Paula Brindley | Volunteer and Bereavement Manager |
| | Regional Palliative Care Program |
| | Grey Nuns Community Hospital |
| Donna deMoissac | Advanced Nursing Practice, Palliative Care |
| | Royal Alexandra Hospital |
| Miriam Dobson | Manager, Palliative Hospice |
| | St. Joseph's Auxiliary Hospital |
| Janet Fung | Director of Care |
| | Capital Care Norwood |
| Ed Holmes | Family Physician |
| | Medical Services |
| Bill Johnston | Site Medical Director |
| | University of Alberta Hospital |
| Kim Kisko | Patient Care Manager of Medicine, Pediatrics and IV Therapy |
| | Sturgeon and Leduc Community Hospitals |
| Priscilla Koop | Faculty of Nursing |
| | University of Alberta |
| Peter Lawlor | Acting Director, Tertiary Palliative Care Unit |
| | Grey Nuns Community Hospital |
| Karen MacMillan | Manager, Tertiary Palliative Care Unit |
| | Grey Nuns Community Hospital |
| Tom Martin | Dept. of Family Medicine |
| | University of Alberta |
| Marlene Nordstrom | Manager, CAPS |
| | Continuing Care Services |
| Penny Parker | Palliative Care Manager, Home Care |
| | Community Care Services |
| Shirley Pratt | Patient Care Manager, Emergency Services |
| | Grey Nuns Community Hospital |
| Janice Chobanuk | Resident Care Manager, Nursing Unit 9Y, Mel Miller Hospice, |
| | Edmonton General Hospital |
| Sharon Watanabe | Director, Palliative Care Program |
| | Cross Cancer Institute |

Hospice PCUs & TPCU

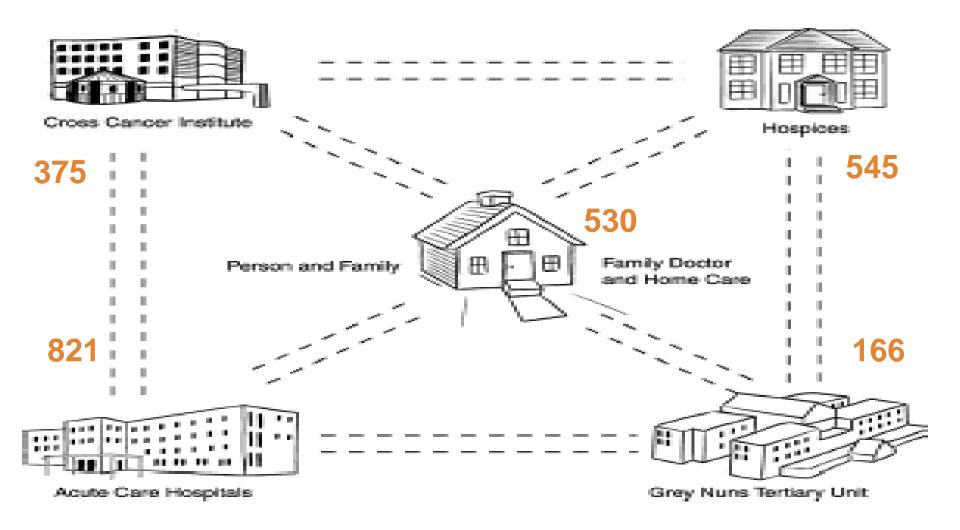
2000

- EGH (Mel Miller) 22
- Norwood 20
- St Josephs 14
- Youville 1
- 57 beds
- TPCU 14 beds

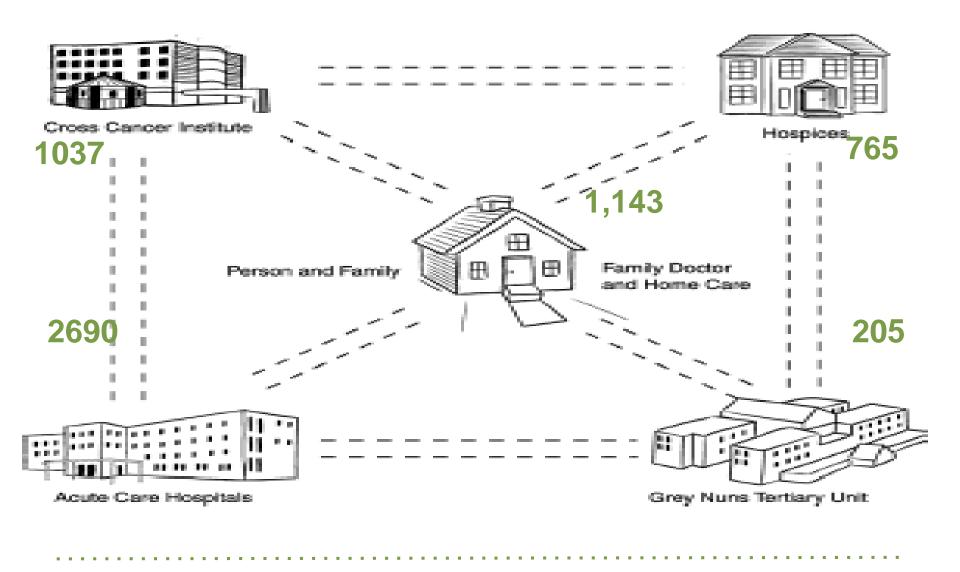
2018

- EGH (Mel Miller) 26
- Norwood 23
- St Josephs 14
- Foyer Lacombe 10
- Westview 6
- Rivercrest 6
- 85 beds
- TPCU 20 beds
- Comfort care beds at GNH & RAH

Edmonton Zone Palliative Care Program 1999/2000



Edmonton Zone Palliative Care Program 2017/2018



June 24, 2019

*Other includes Glenrose Rehabilitation Hospital, Strathcona Health Centre and Alberta Hospital Edmonton

Challenges/Opportunities for 2018/2019

- Ongoing evolution in adapting to MAiD legislation
- Inner city palliative care (PCOAT)
- Improving community connections e.g. neurology, PCNs
- New hospice PCU locations
- Need for physician AARP
- Future of our website and palliative.org

Challenges/Opportunities for 2018/2019

- Database maintenance in the pre-Connect Care era
- Connect Care this will transform practice across the Zone and province
- Impact of move of CCT to Plaza 7
- Maintaining a Zone program
- MMSE or MOCA or other cognitive assessment
- Leadership transition

Edmonton Zone Palliative Care Program & cross-site report

