

Provincial Palliative and End-of-Life Care

October 2022

Provincial Palliative and End-of-Life Innovations Steering Committee



The Provincial Palliative and End-of-Life Care (PEOLC) team hopes that everyone had a happy, healthy, and restful summer and are ready to come back to an action-packed fall.

The team wanted to share a few high level activities that occurred over the summer:

- The Minister of Health has announced the funding allocated to the 25 new Palliative and End-of-Life Care Grants. A listing of all the grant recipients can be found here.
- The Provincial Rural Palliative Care in-Home Funding (RPIHF) Program
 Tableau dashboard has been completed! This dashboard will be used to
 evaluate the program provincially and track program utilization by the zones.

The Provincial Palliative and End-of-Life Innovations Steering Committee was paused over the summer, and resumed meeting on September 15th. The Committee continues to receive regular updates from Alberta Health's Continuing Care Division and the Covenant Health Palliative Institute, as well as presentations from other stakeholders on all the exciting PEOLC work occurring across the province.

Changes to the PEOLC Team

It is with mixed feelings that the Provincial PEOLC Team announces that Alyssa MacKay has accepted a full time position as a Lead with the Policy, Practice, Access, and Case Management team with the Provincial Seniors Health & Continuing Care Portfolio. The team is looking forward to collaborating with Alyssa in her new role and wishes her all the best in her exciting new position. The team is in the process of conducting interviews for a new Senior Practice Consultant for Advance Care Planning and Goals of Care Designations, and is hopeful that they will be able to announce the successful Candidate in the January Newsletter!

The team would also like to welcome Sharon Leontowicz, who is a Senior Project Manager with the Provincial Seniors Health and Continuing Care Portfolio. Sharon will be working with the team for the next two years to lead the Pallium LEAP (Learning Essential Approaches to Palliative Care) Education project.

For PEOLC education opportunities, review the Provincial PEOLC Education Bulletin link. www.albertahealthservices.ca/info/page14438.aspx





Provincial Palliative and End-of-Life Innovations Steering Committee Continued

Advance Care Planning / Goal of Care Designations

The PEOLC team is excited to announce that their first dashboard in Connect Care was published August 2022. This dashboard provides data on ACP/GCD from AHS Connect Care live Inpatient Facilities. It gives clinicians and managers information about 14 GCD indicators across the selected Summary Level (Service Area, Revenue Location or Department) and the selected Time Interval (Day, Week, Month, Quarter or Year).



Another main area of work has been the scheduled review of the AHS Provincial Advance Care Planning Goal of Care Designation Policy and Procedure. The ACP/GCD Community of Practice and the Connect Care Sub-Working Group members are actively working on this policy and procedure. Finally a new FAQ relating to Goal of Care Designation specific clarification section has been posted on the Provincial ACP/GCD website for health care professionals. Frequently Asked Questions | Alberta Health Services.

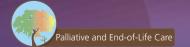
For more information, please email conversationsmatter@ahs.ca

North Zone



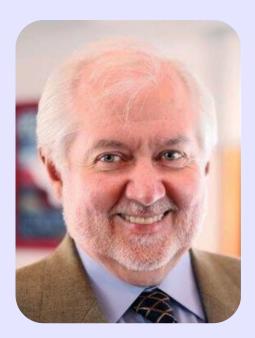
North Zone would like to announce that Shannen Sinclair has accepted the role of Manager for the Palliative Team. *Congratulations Shannen*!

The North Zone Palliative Care team would like to welcome Maryann Shopa as their new Palliative Care Resource Nurse (PCRN) to the Hinton area. Maryann has been with AHS since 2007 in a variety of roles. Her many contributions to AHS include Transition Coordinator, Home Care Case Manager, Palliative/End of Life Resource Case Manager and Community Cancer Clinic RN/Cancer Patient Navigator. In her spare time, Maryann enjoys outdoor activities such as kayaking, camping, hiking, skiing, as well as cooking/baking and connecting with family and friends. North Zone is glad to have Maryann on their team!





Calgary Zone



Calgary Zone's Dedication to Bob Glasgow

In the early 90's Bob Glasgow inspired the shared vision of a growing and flourishing Grief Support Program to support individuals and families coping with loss. His dedication to building, and sustaining, grief services gave the bereaved access to compassionate care helping them to find healing paths in their journeys. Bob led many fundraising initiatives through the years. The first was to establish the current chapel at Rockyview General Hospital and secondly to establish and expand the Grief Support Program. Through his efforts the Program was able to move from Rockyview General Hospital to a dedicated space at Richmond Road Diagnostic Treatment Center in 2011. Following Bob's retirement in 2012 the center was named and dedicated to him and is now known as the Bob Glasgow Grief Support Center.

Bob had a beautiful gift of facilitating healing for those devastated by loss. As program leader he was an empathic counsellor, skilled educator, valued mentor, and relentless advocate for grief services. Bob led the program by example with his calm, gentle and caring presence. Through the years Bob inspired many individuals he cared for to become facilitator volunteers for the group program along with the annual Dealing with Grief Conference that had been offered for many years.

Bob was highly regarded for his deep compassion and passion for the bereaved and was a friend to many. Anyone who came to know him was deeply touched by his kindness, compassion, and humor! Sadly, Bob passed away on June 3, 2022.

The Grief Support program's bereavement counselling services provided today are a true legacy to Bob's inspiring and dedicated work to serve the bereaved. Calgary Zone would not have this program without his passion and tenacity to establish the services. In the early years, the program was 100% funded by donations and over time has received increasing operational funding.

The AHS Grief Support Program continues to support over 1,000 new clients per year offering individual, group grief counseling and educational services. This year the program was awarded a grant through the Government of Alberta "Palliative and End-of-Life Care Grant Fund" to redevelop and offer the 'How to Care What to Say workshop' to health care providers across Alberta. Additionally, the grant will support the development of new grief videos to augment the suite of videos developed in 2004. Both earlier initiatives were established under Bob's stewardship through his years with the program.

Anyone who was fortunate to come to know Bob was deeply impacted by his beautiful presence and sadly now by his passing.

Obituary of Bob Glasgow | McInnis & Holloway Funeral Homes | Servin... (mhfh.com)





Pain and Mood Toolkit Feature—How to Start Conversations about Medications with More Harms than Benefits

Clinical Innovation and Practice Supports, Provincial Seniors Health and Continuing Care



Medications can cause or worsen distress including: nerve and joint pain, headaches, gout, anxiety, confusion, constipation, acid reflux, urinary retention, muscle spasms, insomnia, and depression.

De-prescribing medications that are no longer therapeutic can improve comfort and quality of life.

Shared decision making is crucial. Discuss medications with residents and families: You (your mother/father) may be at a point where medications are doing more harm than good. We are going to double-check them and talk to you about it on (date/time/event).

We offer this to all residents/clients on admission, with changes in medical condition, and when there are possible signs of pain or mood distress.

Share by printed resources or email: With dementia and <u>frailty</u>, medications often become more harmful than beneficial. Examples include medications for <u>heart disease</u>, <u>diabetes</u>, <u>blood pressure</u>, <u>depression</u>, <u>sleep</u> and <u>more</u>. You may be interested in this short video: <u>Dusty's Story: How Much is Too Much?</u>

We want to hear what you think is going well, your concerns, and what is most important to you – for example, less pain, uninterrupted sleep, meal enjoyment and being more alert for social connection. Please don't hesitate to contact (person/number) if you have questions.

During the care conference: Discuss and agree on supportive interventions and medication changes. dentify benefits to watch for, such as improved meal intake, alertness, and participation in their care. Set a time to check back on the effectiveness of changes and interventions.

Looking for more resources? Check out:

- Essential Conversations: A Guide to Advance Care Planning in Long-Term Care
- Alberta Medical Association: <u>Tackling Polypharmacy by De-prescribing</u>
- AHS Drug Stewardship: <u>De-prescribing Resource Guide</u>
- Choosing Wisely in Long-Term Care

For more information, visit: ahs.ca/painmoodtoolkit





Covenant Health's Palliative Institute

Thank you to all those who continue to participate and collaborate in the work of the Palliative Institute. The Palliative Institute's team has grown to 26 members! They are pleased to announce their newest team member, Danica Hans, who joins them as Lead Educator. Danica brings a decade of clinical experience in palliative care from the Tertiary Palliative Care Unit at the Grey Nuns Hospital, most recently in the role of Clinical Educator. Her focus will be on updating institute educational materials, creating an education strategic plan, and providing key feedback to support quality work at Covenant Health.

On March 19, 2022, the Palliative Institute hosted a Compassionate Communities Forum. It was conceived as the first of three planned, annual meetings reflecting the themes of *building*, *growing*, and *sustaining* Compassionate Communities in Alberta.



https://pixabay.com/photos/and-sole-sunflower-autumn-2699293

The 2022 forum set out to accomplish three objectives:

- 1. To better understand the Compassionate Communities concept. They listened to a series of speakers who shared learnings on how to build Compassionate Communities within Canada and globally. The speakers and presentations were not meant to be exhaustive. Rather, these presentations helped achieve a common understanding and vision for working together and for future implementation of the Compassionate Communities approach.
- 2. To highlight the five resources the Palliative Institute is implementing. Five corresponding workshops highlighted the strengths of each tool and generated rich conversation around what it could look like to use them in compassion-centred ways.
- 3. Hold a series of World Cafés in order to listen, understand and generate an action plan. The recommendations gleaned from these sessions will guide future work at the Covenant Health Palliative Institute. For more information about the forum please see Building Compassionate Communities: Raising Awareness of Palliative Care and Advance Care Planning in Alberta: An Action Planning Report.

The institute is pleased to announce the launch of the Compassionate Alberta website on **October 1, 2022** (International Day of Older Persons). The site will host all tools and materials in development across both the palliative public awareness and advance care planning grant projects. Several rounds of user experience testing have been implemented to strengthen this public engagement strategy.

The 33rd annual Palliative Education and Research Day will be held on **Monday**, **October 24**, **2022**. The theme of this year's conference is "Connection & Collaboration: Bridges to Care." The Palliative Institute supports the advancement of palliative care knowledge through hosting the annual Palliative Education and Research Day. This conference brings together health care providers, researchers, community leaders and other palliative care experts. For more information on this year's conference, visit <u>palliativeconference.com</u>.

The Institute will be presenting information about the work in the palliative public awareness, competencies and education and advance care planning grant projects at the McGill International Congress on Palliative Care (Montreal), the Public Health Palliative Care International Conference (Belgium) and at the 33rd Annual Palliative Care Education and Research Days (Edmonton).

If you would like more information or would like to be involved in the work of the Palliative Institute, please reach out to us at palliative.institute@covenanthealth.ca





Appropriate Use of Antipsychotics (AUA)

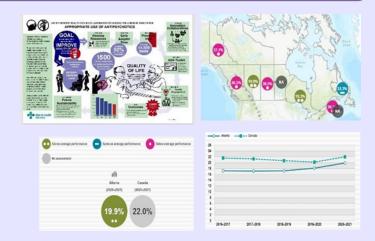
Did you know?

- In Canadian LTC homes, 1 in 5 residents is taking antipsychotic drugs without the diagnosis of psychosis (CIHI, 2019).
- Trends have been increasing in Alberta and nationally.
- At the height of the AUA project in 2016, we saw our lowest rate of antipsychotic use at 17.4%. At that time, we had the lowest average in the country.
- Nationally, Alberta remains as one of the lowest rates of antipsychotic use in LTC.



What can you do?

- Trial supportive or non-pharmacological interventions FIRST!
- Talk to your prescriber/s and your interdisciplinary team about the appropriateness of antipsychotic use for your resident/s.
- Do AUA as a Quality Improvement initiative in your unit/site. Track your unit/site's antipsychotic use and monitor your progress. Download the AUA Data Collection Template from the <u>AUA Toolkit | Alberta Health Services</u> and submit your data to us at <u>aua@ahs.ca</u> if you want some support or want to share your AUA data!
- Educate yourself and your staff and learn more about antipsychotics and the AUA initiative.
- Visit AUA Toolkit | Alberta Health Services



Why does it matter?

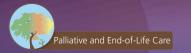
Monitoring Potential Inappropriate Use of Antipsychotics in LTC

- Lower number means that a lower percentage of LTC residents received antipsychotic medication without the diagnosis of psychosis.
- There is evidence that antipsychotics can have serious side effects, which causes some safety concerns.
- Given the risk of side effects, antipsychotics should be used with caution, especially among the elderly.



For any AUA related inquiries, support and consults, contact: aua@ahs.ca

Reference: Canadian Institute for Health Information | CIHI





Canadian Atlas of Palliative Care—Alberta Edition

Do you like exploring?

The Canadian Atlas of Palliative Care – Alberta Edition is one of the 25 palliative and end-of-life care projects recently funded by the Government of Alberta. This collaborative effort with Pallium Canada will map the current state of provincial and zonal palliative and end-of-life care services. The atlas is an opportunity to show case the remarkable innovation and integration of the services we provide across our province and it will also enable best practices and evidence-based developments to improve care to spread both here in Alberta and across Canada. If you would like be part of the Atlas development or share some resources or work you've been doing, please be in touch with Dr. Jessica Simon, University of Calgary at: Jessica.simon@ahs.ca







Contacts

General questions or comments email: palliative.care@ahs.ca





















