

Interdisciplinary Palliative Care Education Funds

August 2015

Background:

The Ministry of Health and Long-Term Care provides annual funds for Palliative Care Interdisciplinary Education. Within the Waterloo Wellington LHIN, these funds are administered by Hospice of Waterloo Region under the direction of the Education Committee of the Waterloo Wellington Palliative Council. This document identifies how this money is used and accessed.

Purpose of Funds:

To provide financial support for quality palliative care education of front line health care providers and volunteers within the WW LHIN that will improve and change practice at the bedside.

Funds are allocated to initiatives that will provide the broadest reach and most equitable access.

A portion of the funds is reserved each year for individual subsidy requests to attend events, conferences, workshops beyond the sponsored initiatives. Approval of subsidy funding is dependent on meeting general requirements and the availability of funds.

Guidelines for Individual Subsidy Requests:

- Staff/volunteers of organizations associated with the palliative care goals in the Waterloo Wellington LHIN are eligible for funding
- Education must reflect evidenced based best practice guidelines and the Model to Guide Hospice Palliative Care, as appropriate (see pg. 2)
- Pre-approval is required (note: approval could take up to 10 business days)
- Education Funds subsidize registration fees and do not pay participants for travel, accommodation or food for a conference/workshop
- Individuals may apply for a conference/course subsidy once a year up to a maximum equal to the cost of the annual HPCO conference registration fee member rate
- A second individual application may be submitted but approval would be delayed until the end of the fiscal year (March) and proportionally granted based on availability of funds.
- A "Funding Request" form must be completed and submitted with an outline of the education (e.g. flyer) before the course begins
- Upon completion of the education event, a "Final Claim Form" is submitted, along with copies of:
 1. proof of payment
 2. course completion or participation certificate
- Final claims must include a description of how education learnings will be applied to practice
- Reimbursement of final claims will be made within 30 days of receipt of form.

Organizations:

A portion of the education funds will be reserved for local workshops that would be of benefit to a broad range of staff and workers within the WWLHIN. The Education Committee will solicit input on relevant topics, plan, and deliver a minimum of two workshop/conference events each year.

Organizations associated with the palliative care goals in the Waterloo Wellington LHIN may wish to request funds to offer a course, program or workshop that they will organize and deliver. Funds will be available, to a maximum of \$1,500. A proposal must be submitted to the Education Funds Working Group prior to delivery of the event. Approval may take up to 30 days from receipt of submission.

Note: These funds are available for approximately 2 to 3 organizations per year and are intended to cover the costs of facilitators, venues, and materials but **not** intended to provide subsidy for expenses related to participant travel subsidies, refreshments, or food.

Proposals must include:

- Target audience, objectives of the day, agenda, evaluation process
- CV of the speakers for the day, as soon as they are available
- Outline of budget
- Identification of other financial support received
- Evidence of a collaborative process and open registration to be available to participants from all areas of WWLHIN
- Demonstrated use of Best Practice Guidelines and the Model to Guide Hospice Palliative Care
- Commitment to supply a final attendance listing including name, position and place of work of registrants

Evidenced Based Practice Guidelines

The Registered Nurses Association of Ontario (RNAO) defines best practice guidelines (BPG) as “systematically developed statements based on best available evidence to assist nurses, other health care providers and patients make decisions about patient care.” Each BPG includes:

- A literature review
- Recommendations based on research evidence
- Developed recommendations or guidelines based on research evidence
- Information that assists the nurse in decision making based on evidence and not personal experience.
- A decision making framework to work within the context of patient preferences, wishes, ethics and feasibility

Validated Tools in Palliative Care

A fundamental barrier to quality care at end of life is the lack of measurement tools. These measurement tools should identify opportunities for improving medical care and examine the impact of interventions. They should be:

- Reliable
- Easy to use
- Professionally trialed and tested
- Easy to complete
- Portable between care settings
- Require minimal instruction
- Less burden for the client

A validated tool is: an instrument that has been developed through research and evidence based knowledge. It is important to use validated tools instead of designing agency specific tools. The relationships between assessment questions as well as the order, mechanism of asking the questions, and correlating criteria are all part of a validated tool.

Examples: Edmonton Symptom Assessment Scale (ESAS), Pain Assessment Palliative Performance Scale (PPS)

The Model to Guide Hospice Palliative Care (2002)

In a consensus–building process led by the Standards Committee of the Canadian Hospice Palliative Care Association, providers, organizations and consumers joined to share their experiences and develop a clear vision for hospice palliative care that everyone could use. The resulting model represents more than 10 years of collaboration by individuals, committees, associations and governments across Canada and is based on the nationally accepted principles and norms of practice.

Everyone is encouraged to use the Model to guide all activities related to hospice palliative care, and develop local standards of practice. It is the hope that hospice palliative care will be known as “care that aims to relieve suffering and improve quality of life throughout the illness and bereavement experience, so that patients and families can realize their full potential to live even when they are dying”.

Provincially, this Model has been adopted for Hospice Palliative Care program planning and development.

Locally in Waterloo and Wellington, the CHPCA Model represents the foundation for all Waterloo Wellington HPC activities.

To download a copy of the Model, go to www.chpca.ca and click on Marketplace.

Scroll down until you come to a picture and name of the book.

If you require further information about the Model, validated tools or best practice guidelines, please contact

HPC Consultation Services www.hpcconnection.ca