LEAP
Learning Essential Approaches to Palliative and End-of-Life Care

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Prepared For

Saskatchewan Hospice Palliative Care Association

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Pallium Doodle – Advance Care Planning
Education is the fuel

“That drives good practice, good patient care, and good service delivery.”

David Oliviere, Director of Education and Training, Education Centre
St Christopher’s Hospice, London (est. 1967)
Pallium Canada Mandate

1. Advance education by improving the quality of knowledge in hospice palliative care by increasing capacity of individuals, institutions and other organizations with a bona fide interest in hospice palliative care; to provide hospice palliative care services, community supports and resources; and

2. Benefit the community by improving the quality of hospice palliative care in Canada and by improving access to hospice palliative care services, community supports and resources for people in Canada.
Over 200 Stakeholders

Representing:

Universities and Health Regions

Founding Directors:

Dr. Srini Chary
Dr. Jose Pereira
3 Phases to date (2001-2014)

Phase 1
2001-2003
- Focus: Primary Care Delivery in Rural Settings (AB, SK, MB)
- Interprofessional education of physicians, nurses & pharmacists
- $250K through Rural & Remote Health Innovations Initiative of Health Canada

Phase 2
2003-2008
- Palliative care at primary care level became Pan-Canadian
- Knowledge translation as a catalyst for emerging programs
- $4.2 M through the Primary Health Care Transition Fund, Health Canada
- Project continued 2008-2010

Phase 3
2011-2014+
- Community Engagement (Pan-Canadian & Int.)
- Pallium Foundation of Canada
- Multidisciplinary, competency-based education, resources and tools
- E-Learning
- $400K + $200K grant by the estate of the late Patrick Gillin
- $3M over three years – Federal Economic Action Plan 2013
Pallium Phase 2: Images from the field

- iTunes ‘Conversations’ podcasts
- Interviewing aboriginal leaders
- Aboriginal palliative care education program
- Chaplaincy leadership program
- LEAP course development team
- LEAP course peer reviewers process
- DACUM mapping of competencies
2014 + Functional Chart

Pallium Foundation of Canada Board of Directors

National Professional Community of Practice

Professional Development

LEAP Renewal

LEAP Core

LEAP Thematics

Facilitator Training

Clinical Decision Support Tools

Pallium Pocketbook

Pallium Resource App

Developing Spiritual Care Capacity

E-Learning

Doodles

Snippets

Courselets

Compassionate Communities

Compassionate Schools

Compassionate Corporations
Guiding Principles of LEAP

• Interprofessional
  – Enhance interprofessional collaboration while also meeting learning needs of individual professions (primarily MD, RN, Pharmacy & Social Work)

• Competency based
• Peer-reviewed
• Active, constructivist learning approach
• Showcase local resources
LEAP Renewal
Environmental Scan: Identify existing Canadian competencies

- EFPPEC – Undergraduate *medicine* competencies and family medicine competencies

- CFPC – Specific Standards for *Family Medicine* Programs Accredited by the College of Family Physicians of Canada – The Red Book
Environmental Scan: Identify existing Canadian competencies

- Canadian Association of Schools of Nursing – Palliative and End-of-Life Care: Entry to Practice Competencies and Indicators for Registered Nurses

- Canadian Nurses Association – Hospice Palliative Care Nursing Certification – Competencies
Environmental Scan: Identify existing Canadian competencies

• National Association of Pharmacy Regulatory Authorities – Professional Competencies for Canadian Pharmacists at Entry to Practice

• Canadian Social Work Competencies for Hospice Palliative Care: A Framework to Guide Education and Practice at the Generalist and Specialist Levels
Environmental Scan: Identify existing Canadian competencies

- Core Competencies for Spiritual Health Care Practitioners – Manitoba Health (2008)

- Personal Support Worker Competencies – Quality Palliative Care in Long Term Care Alliance
LEAP CORE

- Taking Ownership
- Being Aware
- Useful Resources and Tools
- Decision-Making Framework
- Pain Management
- Essential Conversations
- Dyspnea and Respiratory Problems
- Gastro-Intestinal Symptoms
- Psychosocial and Spiritual Distress
- Delirium
- Last Days and Hours
- Palliative Sedation
# LEAP Delivery Options

## The Golden Hour

- Pre-course Evaluation
- Introductions
- Orientation to course
- Taking Ownership
- Practical Frameworks for End of Life Decision-making
- Top Ten Tips on Pain Management
- Top Ten Tips on Managing Delirium & Dyspnea
- Top Ten Tips for Essential Conversations
- Top Ten Tips on Managing Gastro-Intestinal Symptoms, Hydration & Nutrition
- Top Ten Tips on Managing Psychological Distress
- Top Ten Tips on Managing Last Days & Hours
- Top Ten Useful Resources & Tools
- Post-Course Evaluations

## One Day Mini-LEAP

- Pre-course Evaluation
- Introductions
- Orientation to course
- Taking Ownership
- Practical Frameworks for End of Life Decision-making
- Top Ten Tips on Pain Management
- Top Ten Tips on Managing Delirium & Dyspnea
- Top Ten Tips for Essential Conversations
- Top Ten Tips on Managing Gastro-Intestinal Symptoms, Hydration & Nutrition
- Top Ten Tips on Managing Psychological Distress
- Top Ten Tips on Managing Last Days & Hours
- Top Ten Useful Resources & Tools
- Post-Course Evaluations

## Two Day LEAP

- Pre-course Evaluation
- Introductions
- Orientation to course
- Taking Ownership
- Practical Frameworks for End of Life Decision-making
- Pain: Case presentation & Overview
- Pain Management
- Essential Conversations
- Q & A (questions from previous day)
- Dyspnea & Respiratory Symptoms
- Gastro-Intestinal Symptoms
- Psychosocial and Spiritual Distress
- Delirium
- Last Hours
- Palliative Sedation
- Palliative Sedation
- Post-Course Evaluations
LEAP CORE

- Taking Ownership
- Being Aware
- Useful Resources and Tools
- Decision-Making Framework
- Pain Management
- Essential Conversations
- Dyspnea and Respiratory Problems
- Gastro-Intestinal Symptoms
- Psychosocial and Spiritual Distress
- Delirium
- Last Days and Hours
- Palliative Sedation
PAIN MANAGEMENT

Assessment
- Self-reporting is gold standards
- Pts with cognitive failure
- Total pain (nociception versus expression)

Classification

WHO Guidelines

Selecting and analgesic regimen

CHRONIC PAIN VERSUS PALLIATIVE CARE

Using opioids

Breakthrough pain & management
- Diagnosing
- Traditional management
- Role of new transmucosal formulations

Adjuvant therapies
- Neuropathic Pain Adjuvant meds
- Bone pain adjuvant meds
- Visceral pain adjuvant meds
- Palliative radiotherapy

Chronic pain versus Palliative Pain management: similarities & differences

Blocks (awareness)
- Neuraxial blocks
- Regional Blocks
- Celiac plexus blocks
- Vertebroplasty & kyphoplasty
Certified Facilitator Training

LEAP Facilitator candidates to have all of the following qualifications:

• Professional credentials: RN with Canadian Hospice Palliative Care Nurse certification CHPCN(c) or equivalent; CCFP/FRCPC; BSW; BPharm

• Two years’ experience in providing frontline hospice palliative care

• Completed the Learning Essential Approaches in End of Life Care (LEAP) 2 day course

• Education experience
Pallium Learning Management System

To support learners and help make palliative care education and just-in-time learning accessible

• User Management system
  – public viewing and private accounts
• Videos, Podcasts, Multimedia presentations
• Discussion Forums
• Access to Pallium’s full curriculum suite including an e-version of the PPP
Pallium Learning Management System - LMS

The LMS will provide access to:

- Pallium Canada’s E-learning tools including:
  - Doodles
  - Snippets
  - Courselets
  - Asynchronous Threading
  - Learning Modules
  - Pallium Mindmaps
  - Mobile Applications
E-Learning Resources

PALLIUM DOODLES

PALLIUM SNIPPETS

Nursing Delirium Screening Scale (Nu-DESC)

scored based on severity

0 absence 1 mild 2 severe

max score = 10
Pallium Canada Doodles

- Early is better than late
- The Wisdom of Plans
- The elephant in the room & the leaking canoe
- The “P” Word
- It all depends
- Top 10 Myths & Fallacies
- They need you!
- Different gloves for different hands
- Lost before translation

Advance Care Planning
Being Honest
What is in the name “Palliative”?
Decision making across the illness trajectory
Who provides palliative care?
Adjusting information giving to patient needs & preferences
Definitions and using the right language
Pallium Doodle – Better Early Than Late
Pallium Canada Snippet

Nursing Delirium Screening Scale (Nu-DESC)

<table>
<thead>
<tr>
<th>Category</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Studies</td>
<td>≥ 2</td>
</tr>
<tr>
<td>Recent Literature</td>
<td>≥ 1</td>
</tr>
</tbody>
</table>
1. CLINICAL PRESENTATION

Clinical Subtypes

- Delirium presents clinically in one of three forms.
(Click each of the tabs below to learn more)

Hyperactive form
- Patient has psychomotor retardation (reduced movement, withdrawn, somnolent) all the time.
- This form is often missed or misdiagnosed as depression.

Hypoactive form

Mixed form


Pallium Apps and Clinical Decision Aids
Communication Videos

Orienting Ourselves for Palliative and End-of-Life Care Work

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http://www.youtube.com/watch?v=gIFtMifr0DU

How did you feel while viewing the video?
What was done well?
What can be done better?
What are some useful phrases?
Don't Talk About It
Let’s Talk About It

Essential Conversations

Workshop
Lego Block Approach

OPTION 1

OPTION 2

OPTION 3

OPTION 4
LEAP CORE

- Taking Ownership
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- Essential Conversations
- Dyspnea and Respiratory Problems
- Gastro-Intestinal Symptoms
- Psychosocial and Spiritual Distress
- Delirium
- Last Days and Hours
- Palliative Sedation
Invited Engagement

LEAP THEMATICS

- Hospital
- Hospice
- Long-Term Care Homes and Nursing Homes
- Oncology
- Aboriginal
- Emergency Department
- Chronic Illness
- Surgery
Thank you
Welcome to the Pallium Community

Website: pallium.ca
Lighting your way to a better future: Speech delivered at launch of Mindset Network 2003

Pallium Canada