Section #4: Modules, Tools & Innovations

This module will:

- introduce resources that can help support palliative care resource teams within long term care homes

- highlight how each resource was evaluated and what benefits that a study saw after implementing each resource

- include information on how your long term care home can access more information on each of the resources

# Modules, Innovations, In-Services & Tools

The QPC-LTC Alliance as developed or implemented several resources that the four long term care home studies sites found effective. These resources include modules, innovations, and tools that can be categorized into the following categories:

1. Organizational Change (Palliative care philosophy, program description, and process for change)

2. Direct Care (physical, psychosocial, and communication)

3. Education

4. Community Partnerships

Organizational Change

Palliative Care Definitions

Palliative care definition support communication with regards to death and dying within the long term care home. By having common definitions it ensures that staff, residents, families, and community partners are on the same page when discussing and making decisions around care. This brochure is available in English and French.
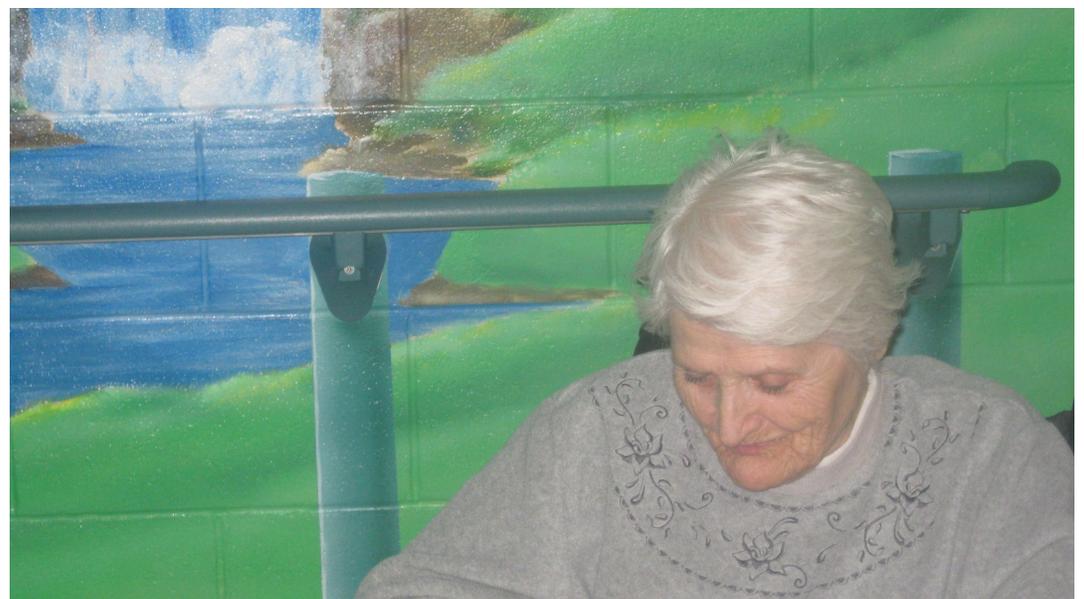
Palliative Care Resource Team

A palliative care resource team can support a long term care home with mentorship, support, information, and education around palliative and end-of-life care. A palliative care is not a clinical team, it is a team related to program development. It should be interdisciplinary in nature and have representation from all departments. This brochure is available in English and French.

Personal Support Worker Competencies

Given that Personal Support Workers provide most of the bedside care in long term care, the empowerment and education of Personal Support Workers is key to the development of a palliative care philosophy of care. The development of palliative care competencies for Personal Support Workers is a key step in the development of the palliative care team in long term care. This module is available in English and in French.

Personal Support Worker Lead Module

A Personal Support Worker lead one of the core roles within the change process. Along with the Palliative Care Resource Team, role is responsible for developing and promoting home specific innovations.

Grief Support for Staff

Front Line Staff Experiences of Grief and Loss in a LTC Home, is a sub-study of the QPC-LTC Alliance. The goal of this sub-study is to describe the experiences of grief and loss of nine front line workers in LTC and to report on recommendations of how the organization can offer support to staff after a resident dies.

Peer Led Debriefings

The Peer Led Debriefing Toolkit is intended as a practice and training resource that can be incorporated into the palliative care program of a long term care home. Incorporating routine peer led debriefings, also known as "sharing circles", into organizational culture has been shown to improve overall work place wellness and reduce staff stress and absenteeism.

Organizational Self Assessment

Quality Palliative Care in Long Term Care Organizational Self-Assessment module for an example self-assessment. The self-assessment tool:

- provides an opportunity to identify gaps in your palliative care programs and areas of strength and capacity

- can guide the development of programs and policies

- when used regularly, can be an ongoing evaluation of your program

- can help determine organizational palliative care priorities

Palliative Care Resource Team Retreat

The goal of the palliative care team retreat is discussion and create a consensus on the foundation of the palliative care resource team. Topic areas should include: membership, goals, mission and values, areas of team focus, determine resources, and a communication strategy.

Process Mapping

A process map according to Health Quality Ontario is a "flowchart that outlines all the different steps in a process, for example all the steps that a LTC home takes to deliver a particular kind of service." In this case, the staff created a process map of the care delivery from the admission of a resident until the death of the resident which included bereavement care of staff, families, and other residents. The completion of the process map along with the organizational self-assessment audit tool helped the staff determine palliative care priorities.

Direct Care

Advance Care Planning with Families and Residents

Advance Care Planning Advance care planning and care planning support staff members provide resident centred care until a resident dies. They allow staff to understand the physical, psychological, social, emotional, and financial needs of the resident and family. A resource module has been created to provide information on advance care planning at an organizational level, for staff, and for families. The following handout provides tips from families on how staff can prepare for an advance care planning conversation.

Advance Care Planning Module and Pamphlet

There are special considerations for advance care planning with residents living in a long term care home. The following module and pamphlet will help the staff determine if the long term care home is prepared for these conversations.

Pain Identification and Screening Training

The information in this module is based on a pilot educational event. The purpose of the training was to support all members of the interdisciplinary team in identifying, screening, and communicating pain. This innovation is not meant to be used as a pain assessment tool.

Palliative Performance Scale

Identification of residents is an integral component to any palliative care program. It provides support to staff trying to decide when a palliative approach would benefit a resident. One way to determine if a resident could benefit from a palliative approach is by utilizing a Palliative Performance Scale. The Palliative Performance Scale (PPS) is a useful tool for measuring the progressive decline of a palliative resident. It has five functional dimensions: ambulation, activity level and evidence of disease, self-care, oral intake, and level of consciousness.

Food for Thought

This brochure was created by the Palliative Pain and Symptom Management Consultants. It provides information to families on eating and nutrition at the end-of-life. This brochure is available in English, French, and Italian.

Multi-Sensory Stimulation

Multi-Sensory stimulation involves the stimulation of the sense and provides an alternative way to interact with your resident. A training resource was developed to support staff, families, and volunteers to receive training in Multi-Sensory Stimulation in order to provide stimulation to residents who would benefit from this activity.

Music Interactions

A music utilization study looked at how to best engage residents within musical recreational activities and also how best to support students and volunteers prior, during, and after volunteering in long term care homes.

Social Histories

A social history is a compilation of biographical information about an individual resident. It may include questions about an individual's unique qualities and strengths, spiritual practices, education and employment, hobbies and interests, significant events and words of wisdom. This module provides a training tool as well as gives insight to long term care homes wishing to implement social histories. This module is available in English and French.

Communication

Butterfly Indicator

The idea of using a symbol as subtle indicator to inform staff was suggested. A butterfly indicator is a quick and effective way to inform staff and others that someone in the room has died. It is an immediate action that can offers notification to staff in the event of a death and it alerts staff from all departments working in the area.

Comfort Care Bags

Communication around palliative and end-of-life care with families can be difficult for front line staff. Staff
members have described their relationship with residents as "family like" and a resident's transition to end of life can be equally emotional for staff members. The comfort care bags were an initiative developed by the Personal Support Workers on the Palliative Care Teams. Providing a comfort care bag to the family or caregiver of a resident who is at the end of life is one way staff can offer support and let the family or caregiver know that the staff are thinking of them. The bags contain personal items the family member or caregiver.

Memory Boxes

Memory boxes support the communication between staff and families after the death of the resident. Long term care homes may wish to provide the family with a memory box in order to place resident possessions in when the family is gathering resident
belonging. This handout provides a sample process on how to implement a memory box.

Sympathy Cards

Sympathy cards are also a means of continuing communication with staff and families after the death of a resident. They also
provide staff with closure and a means to say goodbye.

Palliative Care Bulletin Boards

Palliative Care Bulletin Boards allow for effective communication among staff. It supports communication between disciplines,
between floors or home areas and between full time, part time and casual staff.

Placemats

A placemat supports communication between staff, residents, families and volunteers by:

- providing non-verbal communication that a resident has died

- honouring the resident

- providing opportunity for verbal communication if desired (all people grieve differently thus some may not want or may not be ready for verbal communication)

Palliative Care Resource Team Meetings

This innovation provides information on resource team meetings. It provides information on: how often the meeting should occur, roles that should be considered, and possible agenda items.

Comfort Care Rounds

This module is designed to empower healthcare providers and palliative care volunteers to hold Comfort Care Rounds at their long-term care (LTC) homes. Comfort Care Rounds are intended to provide a LTC home -wide forum for case-based discussions about deceased residents or those who are currently dying. There is a particular focus on providing palliative care education, reflection on resident cases, and peer support for staff and volunteers.
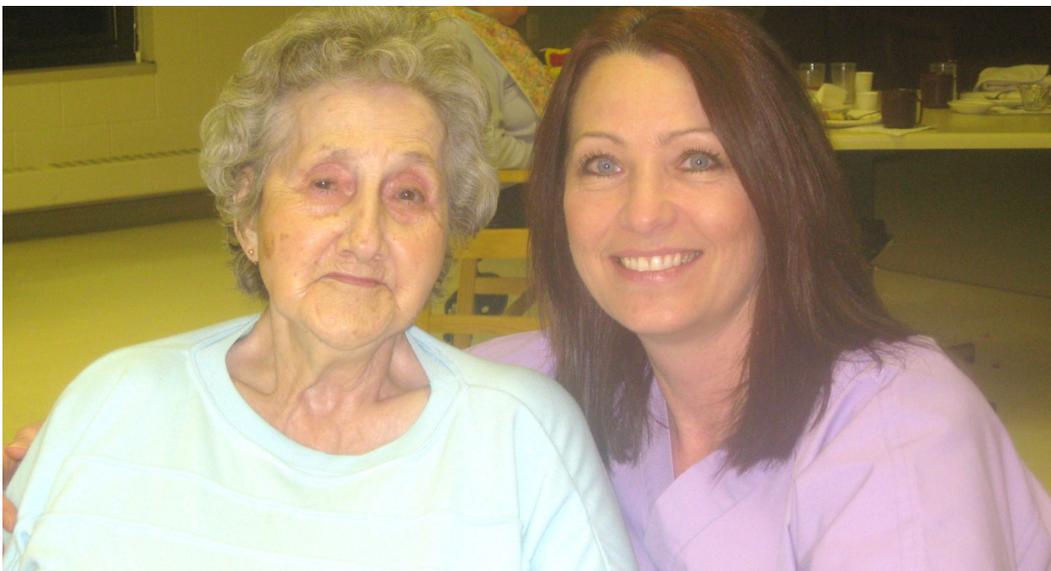
Education

Hospice Visits

Most staff in LTC had never
visited a hospice unit and did not understand how the culture of hospice palliative care differed from LTC. To create this understanding, nursing staff from LTC homes visited specialized hospice units for a two day "placement." During the two day period the LTC staff worked alongside the hospice staff. The objectives of the hospice visits were for LTC staff to:

- Develop an understanding of the philosophy of palliative and end-of-life care from a hospice perspective
- Identify how palliative care looks different in a LTC setting compared to a hospice setting
- Determine what tools / techniques and/or ideas that might be applicable to LTC.

During the LTC staff's visit they worked in pairs with a hospice staff member. This was an important exercise for LTC staff to experience the hospice culture and to see how working as a team is integral to achieving the goals of care of their residents.

Educational Blueprint

This toolkit for planning palliative care education has been designed with a focus on the competencies needed for providing quality palliative care in long term care. The thirteen competency areas are generic competencies needed by long term care home staff as a whole in order to effectively deliver quality palliative care to residents and their family members.

Palliative Approach In-Service

The following education module was created as an introduction to the palliative care approach for staff working in long term care homes. This in-service will:

- Focus on the difference between palliative care and end-of-life care in a long term care context.
- Highlight that people are not palliative, but care can be palliative
- Explain how restorative care and palliative care can be complimentary and contribute to quality resident-centred care.
- <u>Offer</u> suggestions on how to identify if a resident could benefit from palliative care.
- Describe the current stigma around palliative care and offer suggestions on how staff may overcome this when talking to residents and family members.

Allow long term care staff to think critically about the policies and procedures in their home and how they effect resident-centred and palliative care.

Spirituality vs. Religion In-service

Participants in this in-service will have the following learning outcomes:

- Appreciation of the need for spiritual care delivery in long term care especially with residents who are in need of palliative and end-of-life care.

- Understanding that spirituality is an everyday way of being. We live our lives from a spiritual perspective. We use it as a daily support, as it plays out in our daily actions. It can even be seen in the manner in which physical care is provided at bedside.

- Highlighting the importance of Front Line Workers who provide care to residents with kindness, compassion, empathy and respect, often feeling like family members of the residents.

End-of-Life Communication Utilizing Simulation

Personal Support Workers identified the need to improve their skill and comfort communicating with residents and families about end-of-life issues. To address this need, an educational intervention was developed using a high fidelity simulation lab. A simulation lab uses high fidelity manikins (with laptops, software, and compressors) to provide a realistic experience of being at a resident's bedside. The resident (manikin) can communicate and has fully functioning blood pressure, pulse point, respiratory and cardiac sounds, as well as a chest that rises and falls with breathing. A case study was designed for use in the simulation lab so PSWs could further develop their skills talking to residents and families about palliative care / end-of-life care in a controlled and safe environment. The simulation experience and the debriefing session at the end of the simulation gave personal support workers the opportunity to learn from each other. This intervention proved effective based on a pre and post survey as well as a post interviews.

Train and Sustain

This module is named Train and Sustain: A Model for Volunteer Spiritual Care Training in Long Term Care is aimed to support long term care homes with the training of their volunteers.

Still Alice

This Toolkit is designed to empower healthcare providers, caregivers and volunteers to hold a small guided group discussion on the obstacles sur-rounding a diagnosis of dementia. The major goal of the book chat was to bring families and staff together to talk about dementia through the lens of a book.

- Readers build empathy and understanding for people with dementia by following the protagonist¡¦s experience

- The book chat provides an opportunity to discuss care for people in the later stages of dementia

- The book chat discussion allows one to explore the family member's experience surrounding a loved one¡¦s diagnosis of dementia

When Someone Close to You is Dying– Way You Can Expect and How You Can Help

This brochure was created and is distributed by the National Initiative for the care of the Elderly. This tool can be used to provide families in order to support them in better understanding the dying process and what to expect throughout the process.

Palliative Care for Front Line Workers

Palliative Care for Front Line Workers is a course delivered through the Centre for Education and Research on Aging & Health (CERAH) at Lakehead University in Thunder Bay Ontario. This course includes 10 modules and can be delivered face to face or by distance.

LEAP in Long Term Care

LEAP in Long Term Care was developed by Pallium Canada. This course is delivered through the Centre for Education and Research on Aging & Health (CERAH) at Lakehead University in Thunder Bay Ontario as well as other organizations across Canada.

Community Partnerships

Thunder Bay Local	Hamilton- Local	Provincial/ National
• Alzheimer Society of Thunder Bay • Anishnawbi Mushkiki • Bethammi Nursing Home • Confederation College • Hogarth Riverview Manor • Hospice Northwest • Indian Youth Friendship Society • L'Accueil Francophone de TB • Lakehead University – Department of Languages • Lakehead University - Gerontology Program • Lakehead University - School of Nursing • Lakehead University - School of Social Work • Lutheran Community Care Centre • North West Community Care Access Centre CCAC • North East Ontario End-Of-Life Care Network • Northwestern Ontario End-Of-Life Care Network • Palliative Care Program Pain Management Program St. Joseph's Hospital • Saint Joseph's Care Group • Saint Joseph's Health Centre of Sudbury • Thunder Bay Multicultural Association • Thunder Bay Regional Health Sciences Centre –Nurse led Outreach Team • Thunder Bay Regional Health Sciences Centre Regional	• Allendale Long-Term Care Home • Alzheimer Society of Hamilton/Halton • Carpenter Hospice • Conestoga College Institute of Technology and Advanced Learning • Creek Way Village • Halton Peel Palliative Care Consultant Education • Hospice PC Network, Hamilton Niagara Haldimand Brant • Mississauga Halton Palliative Care • Mohawk College of Applied Arts and Technology • Schlegel-UW Research Institute for Aging	• Advocacy Centre for the Elderly • Alzheimer Society of Ontario • College of Dental Hygienists of Ontario • Canadian Hospice Palliative Care Association • Canadian Virtual Hospice National Initiative for the Care of the Elderly • Concerned Friends of Ontario • Family Councils Program • Life and Death Matters Canadian Coalition for Seniors Mental Health • ON Association of Non-Profit Homes - Services for Seniors • ON Interdisciplinary Council for Aging and Health • Ontario Long Term Care Association • Ontario Multifaith Council on Spiritual & Religious Care • Ontario Network for the Prevention of Elder Abuse • Ontario Palliative Care Association – Pain & Symptom Management Saint Elizabeth Health Care Ontario Community Support Association • Seniors Health Research Transfer Network (SHRTN)