

Challenge

To formalize palliative care program in long term care homes and create interprofessional palliative care teams that include PSWs.

Solution

To undertake five years of research with a team of researchers and foulong term care homes to create endence informed strategies.

Outcome

A toolkit of interventions that include clinical practices, policy, education and community partnerships

Long Term Care Homes

Move Toward Formalizing Their Palliative Care Programs

By Jessica McAnulty

Four long term care homes—Bethammi Nursing Home and Hogarth Riverview Manor of St. Joseph's Care Group in Thunder Bay, and Allendale Nursing Home and Creek Way Village of the Municipality of Halton in Milton and Burlington—are currently working with an alliance of more than 38 organizational partners and 27 researchers to improve the quality of palliative care.

Project goals

The Quality Palliative Care in Long Term Care Alliance is entering year three of a Community University Research Alliance project funded by the Social Sciences and Humanities Research Council of Canada. The overall goal of the project is to develop sustainable, resident-focused palliative care programs that are consistent with the Canadian Hospice Palliative Care Association's Square of Care and Organization.

More short term goals of the alliance include: engaging personal support

workers (who provide most of the front-line care) in developing a palliative care program; attracting more partners to help enhance the work done in long term care at a local, provincial and national level; and involving university and college students in the process. The alliance hopes to create a tool kit by the end of the five-year period so that other long term care homes can learn from the four study homes and adapt the tools to meet the unique needs of their own organizations.

Identifying gaps

An environmental scan conducted during year one of the project was able to identify some enablers, gaps and barriers (both external and internal to the homes) to providing palliative care within long term care. With this information, the four homes, with the support of the alliance, were able to perform interventions to create a more formal and resident-focused

palliative care program. The homes have been working on introducing and accessing many interventions, such as developing interdisciplinary palliative care teams, encouraging Snoezelen room use by volunteers and family members, providing personal support worker visiting hospice programs, creating palliative care resource packages for families, supporting staff through grief after the death of a resident and providing comfort care rounds.

Encouraging use of Snoezelen rooms was one of the first interventions completed by the homes. A Snoezelen room is a multisensory stimulation space that is generally used to calm residents with dementia. The homes noticed, however, that their Snoezelen rooms were not being used to their full potential and many staff felt they did not have the time or education to fully engage residents with this resource. With support from the alliance, a toolkit was created to help staff educate families and volunteers. The final product of this intervention was a toolkit that can be found at www.palliativealliance.ca/ alliance-resources.

More information regarding the alliance and the project can be found at www.palliativealliance.ca.

The Quality Palliative Care in Long Term Care Alliance consists of 27 researchers and 38 organizational partners from around the world who share their expertise in palliative care or related fields in LTC. The researchers in the alliance have expertise in subjects such as palliative care education, pain and symptom management and organizational health.