

# **HOSPICE PALLIATIVE CARE INTEGRATED SERVICE DELIVERY MODEL PLANNING INITIATIVE**

## **PROJECT OVERVIEW FOR KEY STAKEHOLDERS**

The main objective of the Champlain's Local Health Integration Network's (LHIN) is to promote the coordination of health services to ensure that people receive the care they need and deserve in a timely way. In keeping with this goal, the LHIN has recognized the need for enhanced coordination of hospice palliative care services in this region. Moreover, there is a need to reduce the number of inappropriate emergency room visits by palliative care patients, and ultimately, reduce the number of deaths that occur in acute care settings and increase the number of palliative deaths at home and in the community.

To respond to these issues, the Champlain LHIN has given the Champlain Hospice Palliative and End of Life Care Network (CHPEOLCN) the mandate to develop a comprehensive and integrated palliative care service delivery model. As a first step in planning, a Retreat was held in April 2009 with wide ranging representation from the many service delivery sectors, geographical areas and disciplines involved in palliative care delivery in Champlain. The purpose of the Retreat was to review the current service delivery model, explore the need for system restructuring and examine priorities that need to be addressed in order to move toward integration.

Over the next few months, working groups with representation from across the Champlain LHIN will be building on the results of the Retreat by exploring best practice models and making recommendations for service improvements in each of the following areas; community support services, bed allocation, hospice palliative care in rural settings, hospice palliative care in long-term care homes, e-health, consultation services, and patient flow mapping/service accessibility. A separate strategy will be used to engage primary care providers recognizing the critical role they have in supporting patients and their families in the community.

The Integrated Hospice Palliative Care Planning Council, comprised of the chairs of each of the working groups, will be responsible for consolidating their recommendations into a regional model for hospice palliative care for presentation to the Champlain LHIN by April 2010. Once the model has been approved by the LHIN, the Planning Council, with the support of the Network, will begin the implementation phase as it moves toward the realization of this regional model.

This is an exciting time for hospice palliative care in the Champlain region. The benefits of this regional approach will include enhanced coordination of care, the seamless transition for patients between services and the reduction in confusion for patients, their families and health providers with respect to which service to access and where and how to access it. As a key stakeholder, we will endeavour to keep you updated on the progress of this planning project. As they become available, project outcomes will be posted at [www.champlainhealthline.ca](http://www.champlainhealthline.ca). (under Health Services/End of Life)

In the meantime, if you have any questions, please do not hesitate to connect with Gwen Barton, Network Coordinator at [gwen.barton@rogers.com](mailto:gwen.barton@rogers.com) or Vivian Thompson, Senior Planner, Champlain LHIN at, [vivian.thompson@lhins.on.ca](mailto:vivian.thompson@lhins.on.ca). We thank you for your interest.

*Members of the Integrated Hospice Palliative Service Delivery Model Planning Council*