



Provincial Palliative and End-of-Life Innovations Steering Committee



Spring has officially sprung across Alberta! The Provincial Palliative and End-of-Life Care (PEOLC) team hopes that all of you have been able to find time to relax and enjoy the beautiful weather.

The Provincial PEOLC team is happy to announce that the PEOLC Alberta Provincial Framework Addendum has been published! The Addendum summarizes where we were, where we are now, and describes the plan moving forward to refocus and reframe the work that needs to be completed in the years ahead. The Addendum can be accessed [here](#).

Alberta Health presented at the May Palliative and End-of-Life Innovations Steering Committee (PPAL/ EOL ISC) meeting. They provided a high level update on the ongoing Provincial Palliative Review. A report with recommendations from the review is expected by this summer.

Changes to the PEOLC Team

Samantha Macgregor, Administrative Assistant, has started a new Project Coordinator position within the Provincial Seniors Health and Continuing Care portfolio. In her role she will support the Continuing Care Facility Directory Expansion. The Provincial PEOLC team wishes her all the best in her new position!

Advance Care Planning

AHS's new and improved Advance Care Planning - Goals of Care Designation (ACP/GCD) e-module is now available for healthcare workers. The module is available for AHS internal and external staff! It features four topics: Advance Care Planning (ACP) Basics, Documents and Workflow, Goals of Care Designations (GCDs), and Personal Directives. This module is relevant for healthcare workers of all disciplines. Learners select the learning path most relevant to their healthcare role and setting. The new module also includes two "micro learning" options!

How to find it:

AHS Employees:

Log into MLL, search 'Advance Care Planning' or 'Goals of Care'. For the e-module, select: "Advance Care Planning Goals of Care Designation"

Prefer facilitator-led learning? For the 3hr facilitator-led ZOOM course that covers these topics select this from MLL "Goals of Care and Advance Care Planning"

Non-AHS Employees:

Access the e-module via www.ConversationsMatter.ca.

Select the "Health Professionals" box and you will see 'How to Access the e-module'

If you have any questions, please email conversations.matter@ahs.ca

For facilitator-led ACP/GCD education via ZOOM, e-mail: calgaryconversations.matter@ahs.ca



Making a Difference Through Advocacy

Alberta Hospice Palliative Care Association

The Alberta Hospice Palliative Care Association (AHPCA) has experienced the power that a small act of advocacy can have on a community.

To mark National Bereavement Day in November 2019 AHPCA wrote a letter to provincial MLAs and federal Alberta MPs advocating for increased government supports for grieving Canadians. In this letter, AHPCA raised the issue of extending compassionate care leave benefits for caregivers under the Canada Labour Code for up to three weeks after the death of their person.

One of AHPCA's letters landed on the desk of Matt Jeneroux, MP for Edmonton Riverbend. Coincidentally, he received AHPCA's letter at the same time as he was provided the opportunity to put forth a private member's bill. As a past provincial MLA, Mr. Jeneroux had championed similar amendments to Alberta's compassionate care leave legislation. In January 2020, the AHPCA team met with Mr. Jeneroux and agreed to work with him on a private member's bill to extend compassionate care leave benefits well beyond what is currently available.

Bill C-220 was debated twice in the House of Commons before going to committee in February 2021. The Standing Committee on Human Resources, Skills and Social Development, and the Status of Persons with Disabilities (HUMA) amendments made substantive changes to Bill C-220, all of which were supported by Mr. Jeneroux, AHPCA, and many other stakeholders. The original bill had a more limited scope and would impact federally regulated employees taking leave to care for a terminally ill family member.

Under the amendments, every employee whose workplace falls under the Canada Labour Code would be entitled to 10 days of bereavement leave. This would include those who are using the Compassionate Care Leave to care for a terminally ill family member.

In May 2021 Bill C-220 received unanimous all-party support in the House of Commons, an extraordinary event in a minority government. Bill C-220 will now go to the Senate, where it will be championed by Alberta Independent Senator Paula Simons.

Should it become law, Bill C-220 will have a positive impact on a wide group of Canadians. The additional days for bereavement leave would be available for caregivers, those who have lost a family member to a sudden death, and people who simply need the time to process their grief after a family member's death.

This bill recognizes grief's impact on individuals; a huge step forward in normalizing grief and becoming a more caring society. AHPCA hopes that if Bill C-220 becomes law, its content will eventually be reflected in an amendment to Employment Insurance legislation, making this benefit available to an even broader group of Canadians.

The AHPCA team could not be more pleased that Bill C-220 started in response to their advocacy letter. This was a rare circumstance where the timing of everything aligned and led to the uncommon outcome of all-party support pushing this bill forward as rapidly as possible. AHPCA's message is to take a chance and speak up. Write that letter. Make that phone call. It could lead to something incredible.

Palliative Institute

There is excitement and energy in the Palliative Institute about partnerships and future direction for palliative care in Alberta! They have welcomed several new staff (14 to date), with a wide variety of skills to work on the Alberta Health grants. They have begun a stakeholder analysis to identify a wide range of people and organizations who may have a relationship with palliative care in Alberta.

The Advance Care Planning (ACP) Alberta Project, which aims to equip every Albertan to make the necessary health, legal, and personal decisions involved in planning for their future care, has begun work with provincial ministries to identify opportunities to promote ACP. This work will be repeated with other partners who can help with public messaging.

The Public Awareness grant is also learning more about public awareness tools and how best to relate to people regarding palliative care. Their partners and research have made it clear that advancing a Compassionate Communities approach will be integral to the process. A survey of Alberta's valued hospice societies, as well as of Death Café facilitators, will further inform

their approach.

The receipt of the new Competency & Education grant on March 31 means that Alberta will be able to build on the new palliative care competencies (<https://www.albertahealthservices.ca/info/Page14559.aspx>) and provide a provincial approach to palliative care education. The Palliative Institute has started this work by distributing a needs assessment to managers and educators in order to confirm what education is currently available and identify existing gaps. They are currently creating an advisory committee for this project to ensure that broad advice is captured on the activities of the grant, as they have done for the ACP Alberta and Public Awareness grants, from which they are already seeing enormous benefits.

As always, please let the Palliative Institute know if you are interested in any aspects of palliative care awareness, advance care planning, or palliative care competencies and education projects. The Palliative Institute continues to gain new knowledge and expertise through these partnerships!



ACP Long-Term Care Community of Practice

Advance Care Planning (ACP) in Canada, in partnership with McMaster University, have launched The Palliative Approach in Long-Term Care (LTC) Community of Practice. The group is made up of professionals, patients, caregivers and other interested individuals who come together on a monthly basis to share experiences and best practices regarding ACP and palliative approaches in LTC education and implementation in Canada – including challenges and successes.

The meetings are co-chaired by Karine Diedrich, Director of ACP in Canada, and McMaster University's Dr. Sharon Kaasalainen.

The next meeting is scheduled for June 10 at 11:00 am ET. For more information and to sign up for the group, visit advancecareplanning.ca/ltc-cop



CHPCA Conference

This year, CHPCA is hosting their first virtual conference: The Road Ahead — Staying the Course. This dynamic online event promises to be a wonderful learning and networking experience!

TO SUBMIT AN ABSTRACT for the conference, please visit the website at: chpca.ca/conference/abstracts

FURTHER CONFERENCE INFORMATION and details about speakers will be announced online, please check chpca.ca/conference for updates.



Quality Indicators in HPC

For National Hospice Palliative Care (HPC)Week (May 2–8, 2021), the Canadian Hospice Palliative Care Association (CHPCA) along with Dawn Guthrie from Wilfrid Laurier University hosted a **sold-out** webinar entitled “A Bright Future: How We Can Make a Difference in HPC with Quality Indicators.”

To view the recorded webinar and to learn more about quality indicators and their role as decision-support tools in health care, visit <https://fb.watch/5zPAFMxnON/>

For PEOLC education opportunities, review the Provincial PEOLC Education Bulletin link. www.albertahealthservices.ca/info/page14438.aspx

Calgary Zone

The Calgary zone Palliative and End-of-Life Care portfolio is excited to be offering a half-day *virtual* Mary O'Connor Palliative and Hospice Care Conference on June 17th of this year. This year marks a milestone as we are celebrating the conference's 20th anniversary; "*The Tapestry of Twenty Years: Weaving the Threads of Patient and Professional Experiences*". This half-day (8:00 am to 1:00pm) will provide time for practitioners to pause, reflect and honor all that has occurred in the last year, at no cost!

Each year palliative providers come together to celebrate, learn, and refresh with friends and fellow practitioners. During this unusual and challenging time, we felt it especially important to continue to find a way to come together and provide a safe and enjoyable opportunity for learning, respite and restoration. Please know that this has been planned with the same heart and passion as our in-person conference.

This year's presentations include:

Dying with Laughter, A Patient's Journey to Accepting Life & Death through the Power of Laughter from award-winning actor, producer, and podcast host, who also happens to be living with Cystic Fibrosis: Jeremie Saunders.

Exploring Compassion-Based Approaches in Difficult Times from professor of Thanatology at King's University College at Western University and internationally-recognized speaker and author: Darcy Harris.

Laugh Again: The Caregiver's Guide to Survival and Sanity from award-winning best-selling author and radio host who has lived experience with dementia and caregiving: Phil Callaway.

For more information, please visit: <https://www.maryoconnorpalliativeconference.com/>

It is with mixed emotions that the Calgary zone team announces Janice Hagel will be retiring from her position as Manager of the Palliative Care Consult Service, Hospice Operations and Hospice Access, & Palliative Physician ARP programs as of August 13th. Janice has been a key leader in the Calgary zone Palliative and End-of-Life Care portfolio since 2009. Her contributions to the Palliative Care Consult Service, and larger palliative care portfolio have been extraordinary, exemplary, and innumerable. Janice's leadership has embodied a passion for a patient and family approach to palliative care and an innovative spirit for the delivery of care.

The team encourages you to reach out to her with your wishes and acknowledgment of the tremendous leader and person she is. Janice will remain in a casual role to provide project support within the Palliative & End of Life Care portfolio.

Palliative Care, Early and Systematic



Update: Shared care letters are spreading

"Shared care letters" for advanced colorectal cancer strengthen care coordination between patients, their oncologists, and family doctors and encourage a palliative approach to care. Implemented in 2019 in Calgary, the use of shared care letters is now spreading to Central Zone and Edmonton Zone with financial support from Choosing Wisely Alberta via its partners: the Alberta Medical Association, Alberta Health, Alberta Health Services, and the College of Physicians and Surgeons of Alberta. For more information or to get involved in this quality improvement project visit www.pacesproject.ca or contact Jessica.simon@ahs.ca. To view the shared care letters and other resources *you* can use for early palliative care, visit www.ahs.ca/guru. The early palliative care pathway and associated resources can be found under Palliative and Supportive Care (Metastatic Colorectal Cancer: Early Palliative Approach).



Pixaby. (2013). *Person Holding Pen*. Pexels. photograph, Pixaby. <https://www.pexels.com/photo/adult-business-businessman-composition-261599/>.

North Zone

The North Zone program successfully transitioned to Connect Care as part of Wave 3 on April 10. While there is still a lot to learn, improved access to information that will benefit our patients is already evident.

The North Zone program added another occupational therapist to their team. Melissa Janssen, based in Fairview, brings a wealth of rural acute, community, and long term care experience, as well as advanced training in dementia, seating, and wound care. Welcome Melissa!

They have also added a Spiritual Health Practitioner (SHP), Jane Christensen, M.Div., to augment the current religious and cultural resources currently available.

While local faith leaders, healers, and clergy address some religious and cultural needs, SHPs bring unique expertise and training in a variety of areas, which enhance and broaden existing resources. Some of these include deeper exploration of psycho-spiritual suffering, ethical and existential issues, family and cultural dynamics as well as considering current life circumstances with each patient and family. Other factors that influence one's ability to cope can include mental illness, substance use disorders and trauma, and the added stresses of Covid-19 and MAID on bereavement, grief, loss, lament, hope, and purpose.

Sometimes the seemingly simple shift from being the caregiver or the one in charge, to the one being cared for, can cause a crisis of personal identity, purpose, and angst. SHPs can facilitate exploration of these issues and help people re-connect with their values, healthy boundaries, and identity, and promote reconciliation and emotional/spiritual processing for palliative patients and their families. With this more robust assessment of how life-limiting conditions can affect a person's emotions, spirituality, and relationships, our therapeutic approach builds capacity in patients and families to recognize, accept, and articulate thoughts, feelings, and emotions. Outcomes can include decreased anxiety, depression, total pain; and increased peace, comfort, and hope.



Pok Rie. (2016). Close-up Photo of White and Pink Plants. Pexels. photograph. <https://www.pexels.com/photo/close-up-photo-of-white-and-pink-plants-265261/>.

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