

Palliative Pain & Symptom Management Consultation Program

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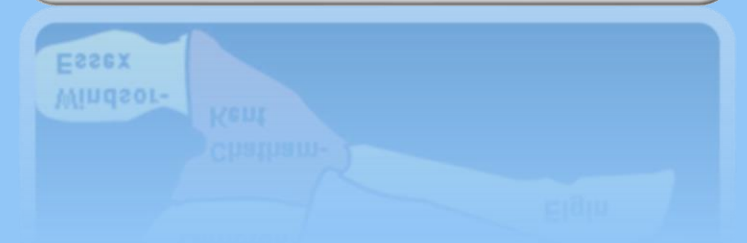


Learning Objectives

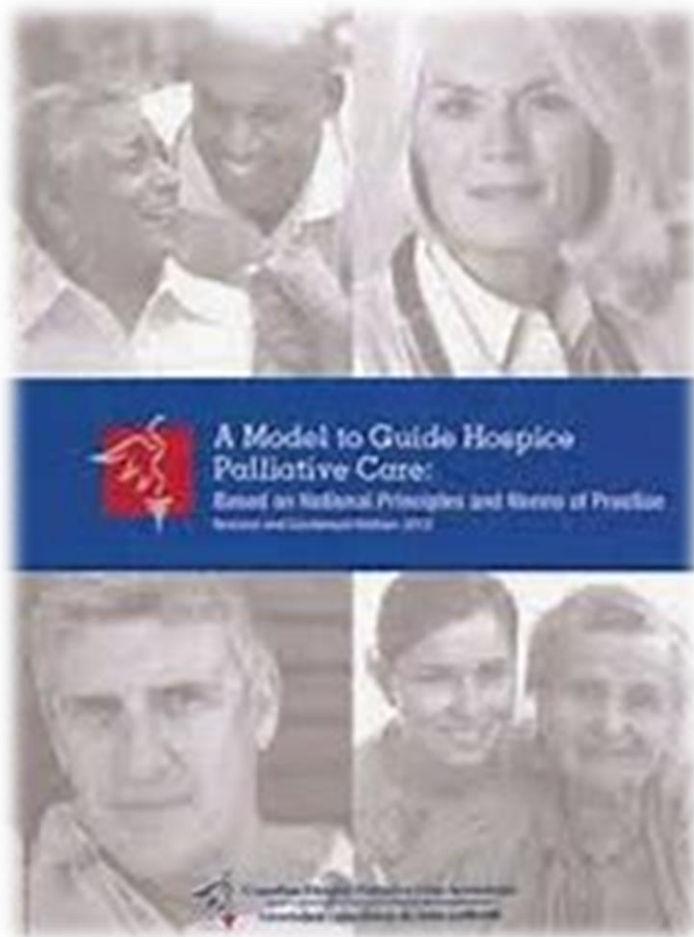
1. **Understand the Role of the PPSMC** and how the role can assist in building capacity in palliative care within their primary care practice.
2. **Explore Education Offerings:** Participants will become aware of educational offerings provided by the PPSMC program to integrate a palliative approach to care into their practice.
3. **Utilize Available Resources:** Participants will familiarize themselves with the Palliative Pocket guide which can serve as a practical resource in providing a palliative approach for their patients.

Palliative Pain & Symptom Management Consultation Program - Southwestern ON

- Funded by the provincial government
- Run through St. Joseph's Health Care in London (Parkwood)
- Consultants cover each region
 - London-Middlesex
 - Grey Bruce
 - Huron Perth
 - Oxford Elgin
 - Sarnia-Lambton & Chatham-Kent
 - Windsor Essex



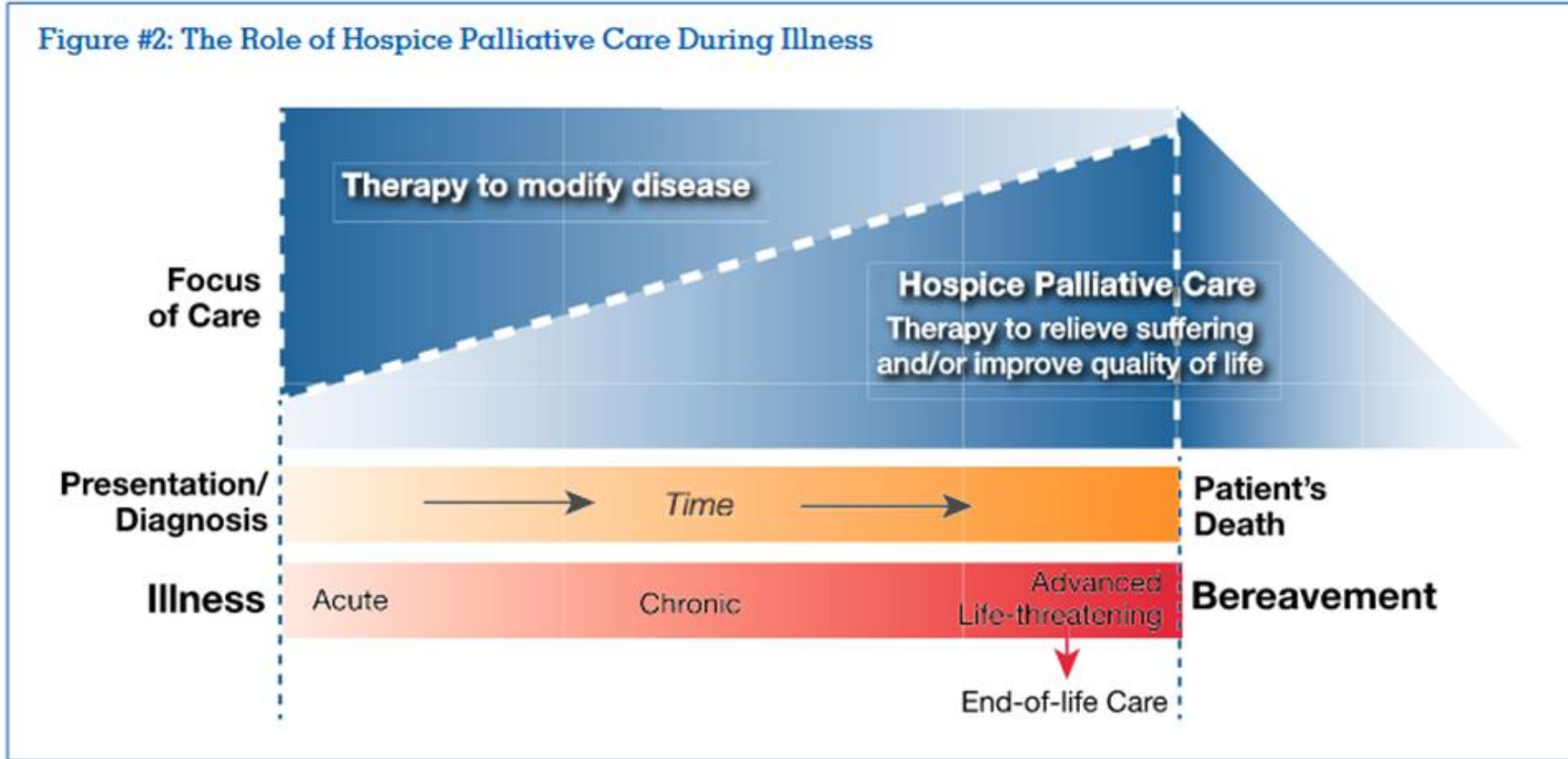
A Model To Guide Hospice Palliative Care



- Developed by the Canadian Hospice Palliative Care Association (CHPCA)
- Provides direction to government, health care professionals, caregivers and volunteers as they attempt to develop services and standards to improve care throughout the illness trajectory.
- Apply the three foundational concepts
 - Effective Communication
 - Effective Group Function
 - Ability to Facilitate Change

Model to Guide Hospice Palliative Care

Figure #2: The Role of Hospice Palliative Care During Illness



- Early identification of palliative needs and implementation of a palliative approach at the beginning of a life-limiting illness
- Focus of care
 - Palliative care and disease-modifying treatment can coexist
 - Shifts over time
- Palliative care provided starting at time of diagnosis and extends beyond death of the person into the bereavement period of loved ones

Palliative Care Health Services Delivery Framework

Ontario
Palliative Care
Network



Palliative Care Health Services Delivery Framework

Recommendations for a Model of Care to Improve Palliative Care in Ontario

Focus Area 1: Adults Receiving Care in Community Settings

April 2019



- Enable patients to remain at home as long as possible
- Reduce unnecessary hospitalizations
- Improve overall coordination and quality of palliative care in Ontario

To build competency
of providers in the
community in the
provision of quality
hospice palliative care

PPSMC ROLE

Palliative Pain & Symptom Management Consultation Program

Who do we support?

- Any member of the interprofessional team in any setting in the community

What kind of support?

- Consultation
- Education
- Mentorship
- Palliative care resources

Services - What Does Our Support Look Like?

Courses

- Fundamentals of Hospice Palliative Care
 - For any member of the interprofessional team
- Comprehensive Advanced Palliative Care Education (CAPCE)
- Essentials of Pain Management (EPM)
- LEAP (through Pallium Canada)
- Canadian Serious Illness Conversations (CSIC)

Events

- West Region Palliative Care Education Day
- In the Know virtual learning series

Individualized

- Assisting in developing & reaching goals of palliative program
- In-services on any topic related to palliative care (pain, EOL etc.)
- Researching and compiling general palliative resources
- 1-on-1 secondary level consults & mentorship

*we don't work directly with patients/residents

**Pain & Symptom
management**

**All domains of
palliative care**

**A particular situation
or common situations**

**Coaching and
mentorship of
providers**

Consultation

In the Know: Palliative Education Series

- Free, monthly, hour long lunch and learn
- Nov 13th 2024 - Dr.Kelly Fenn: role of the coroner
- Jan 8th 2025 - Charles Skeete, spiritual care provider: existential suffering
- Feb 12th 2025 - Mike Bennett: sexuality in palliative care
- March 19th 2025 - Dr.Joanna Humphreys: communicating with grieving children and youth
- April 9th 2025 - Bluewater Palliative Care team :Palliative Care Emergencies
- May 14th 2025 - Lisa Louch, RN discusses the role of the Care Coordinator



Canadian Serious Illness Conversation Training

- CME credits
- Course developed by Harvard
- Free
- 1-2hours of independent work online, 2 hours of class time
- 3 learners/ facilitator
- Practice using the patient tested language and sequence of questions



Physician Education Day

- CME credits
- Half day
- 3 speakers
- Living and dying with non-malignant illness: optimizing symptoms and medication management
- **Save the date: April 10th**

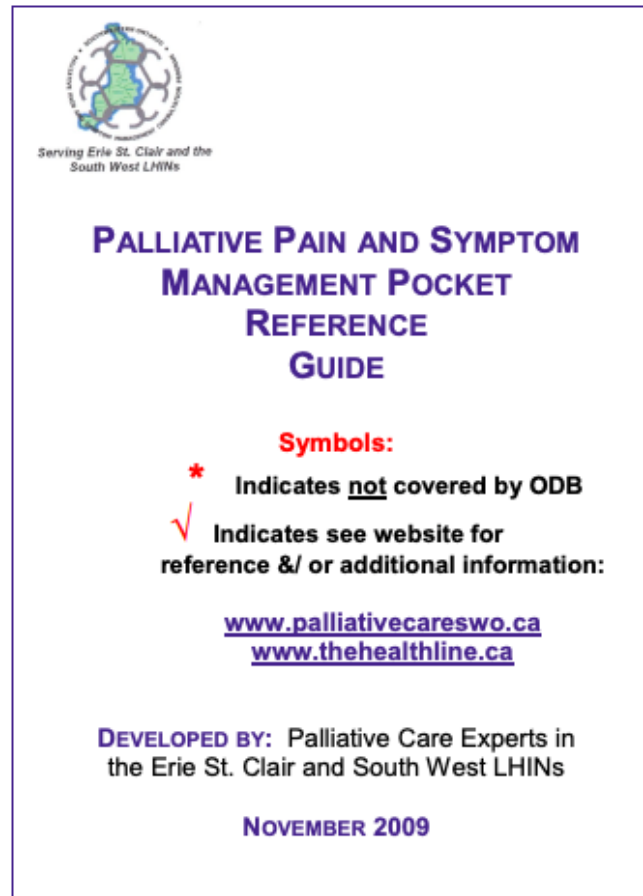
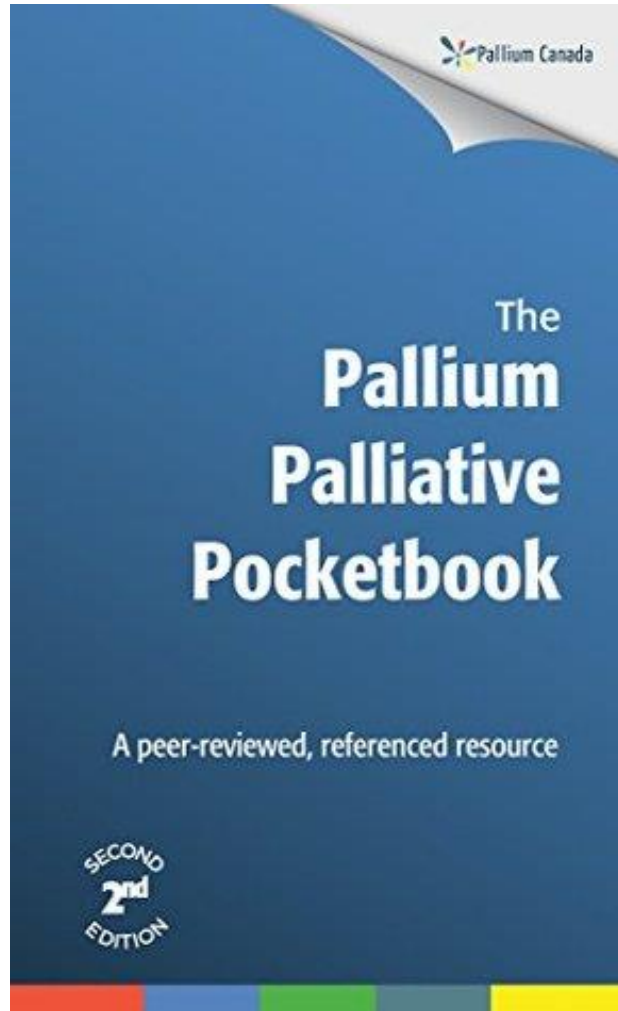
Registration will be
available on our
website in the new
year

www.palliativecareswo.ca

LEAP via Pallium Canada

- CME credits
- Sessions can be arranged through the PPSMC program
- Cost dependent on the size of the group

Reach out via
email or phone



Palliative Pain and Symptom Management Pocket Reference Guide

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April, 2024

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2024 best practices



accessible



quick reference



**direct users to
more information**

Chapter 2: Pain Overview

Pain Classification & Assessment

Pain can be classified in multiple ways:

1. **Severity:** Scale of 0 to 10; 0 = no pain, 10 = worst pain they can imagine
 - Mild(1-3/10); Moderate (4-6/10); Severe (7-10/10)
2. **Inferred Underlying Mechanism** (useful for guiding selection of appropriate therapies, including adjuvant treatments):
 - Nociceptive Pain (Somatic, visceral pain)
 - Neuropathic Pain (Dysesthesia type, neuralgic type)
 - Central Pain (damage to the CNS)
 - Sympathetically maintained (complex regional pain syndromes I and II)

Assessment of Pain

The goal is to develop an appropriate treatment strategy, which requires identification of the sites and causes of pain, severity, and its impact on functioning, mood and overall quality of life. It is crucial to perform a comprehensive assessment, including history, physical exam, and relevant tests, to identify the cause of pain and guide treatment.

The Fraser Symptom Assessment Tool (see QR code) can be used to help delineate pain symptoms:



Fraser Symptom Assessment Tool

Pain Management

The WHO Ladder is a stepped approach to selecting an analgesic regimen based on severity of pain.

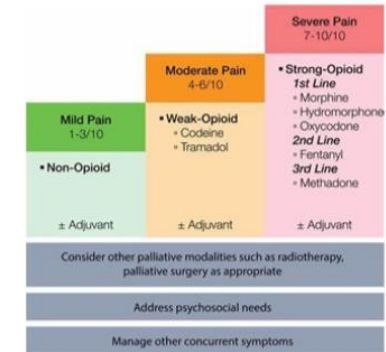


Figure 2-1: The WHO three-step analgesic ladder. (Source: 2nd Edition, Pallium Palliative Pocketbook)



For cancer related pain, see [Cancer Pain: WHO Analgesic Ladder](#)

General Notes:

- If a particular step is ineffective, patient should be advanced without delay to a higher step
- If an intervention (e.g., radiation) significantly reduces pain, reduce the analgesic dose or step down to a lower step
- Adjuvant therapy or adjuvant analgesics may be added at any step

Where do I go to access services and resources?

www.palliativecareswo.ca



Join our mailing list!

London Middlesex Mailing List
Sign Up



We send out a monthly email with upcoming educational opportunities and resources related to palliative care

Questions?

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Consultation Program of Southwestern
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Thank you!