

Interprofessional Palliative Care Champion Team

Terms of Reference

Purpose

The interprofessional palliative champion team (PCT) is a key element necessary for the successful delivery of palliative care. A multi-disciplinary team made team of staff, and volunteers, whose members are passionate about delivering a palliative approach; motivated to participate in a change initiative and willing to act as leaders in the home to help guide implementation. The team meets on a regular basis to facilitate collaborative palliative care for all residents through continuous recognition and improvement. Members of this team are critical to providing a localized, comprehensive perspective that will make the program feasible, relevant, and sustainable.

Responsibilities

- Attend monthly meetings, plan for implementation of elements of a pallliative program and report on progress/issue/changes required
- Attend training sessions as needed to learn more about each component of the palliative program
- Help organize elements of a palliative approach i.e. Palliative Performance Scale,
 Comfort Care Rounds, Palliative Care Conferences and Post bereavement follow up
- Consider how to best incorporate the implementation process of a palliative approach considering the organizational context of the specific site
- Identify anticipated barriers and facilitators that will impact the implementation process of the palliative approach to care
- Disseminate important information regarding palliative care to the appropriate departments within the home
- Offer ad-hoc consultation with other staff seeking information and support with implementation of the program
- Promote palliative care within the home through activities associated with the implementation of a palliative approach to care that emphasizes evidence-based practice, quality of care, resident safety and practice enhancement
- Enhance collaboration within and between disciplines with regards to palliative care

Membership

Potential PCT members:

- Upper management i.e. Director of Care, Administrator
- Nurses (RPN,LPN, RN)

Your homes logo



- Nurse Practitioner. Clinical Nurse Specialist
- Personal Support Workers/Care Aides
- Recreation therapists
- Dietician
- Dietary aides
- Occupational therapist
- Physiotherapist or physio aide
- Palliative consultants
- Spiritual supports i.e. chaplain, priest, rabbi
- Housekeeping staff
- Physicians
- Life transitions coaches
- Pharmacist
- Social workers
- Residents and Families
- Volunteers
- Other

Frequency of Meetings

Ideally, the champion team meets on a monthly basis. Meetings can also be conducted as needed at the discretion of the team. Agenda items and supporting documents are to be sent to the team prior to the meeting

Venue & Time

To be defined by each facility

Decision Making Process

The PCT meetings provide an environment for group discussion and collaboration of multiple disciplines within the LTC home. An overall goal of the team should be to establish a consensus with regards to problem solving and decision making.

Minutes

Minutes may be taken by a member of the PCT and distributed to the membership within a week of the meeting date. A copy of all meeting agendas and minutes should be kept where members can access and review as needed.