

Unravelling the Complexities of Palliative Care: We All Have a Role!
2017 Conference At-A-Glance

THURSDAY, September 21, 2017	
5:00 pm	Registration
	Welcome
5:30 pm	Dinner
6:15 pm	Keynote –Palliative Care: Past, Present & Future Glen Maddison, MD, CCFP, FCFP
FRIDAY, September 22, 2017	
07:30 – 08:15 am	Registration & Breakfast
08:15 – 08:30 am	Opening Remarks – Carol Derbyshire, Executive Director
08:30 –10:00 am	Keynote –Living & Dying on the Streets Naheed Dosani, MD, CCFP(PC), BSc
10:00 – 10:15 am	Break
10:15 – 11:30 am	CONCURRENT BREAKOUT SESSION 1
A	Paramedic Partners in Palliative Care: Holding the Frontline in the Community Cathie Hedges, AEMCA, ACP
B	Impact of a Transplant Palliative Care Clinic on Symptoms for Patients Awaiting Lung Transplantation Nicole Freeman, MD, CCFP(PC)
C	Unraveling a Culture that is Not Complex Audrey Logan, BA, ESC Aboriginal Navigator Mark Tomen, MD, ESC Regional Cancer Lead
D	Entertain, Educate, and Enthral: Applied Theatre in Death Education Keri-Lyn Durant, OCT, Arts Educator, PhD Student
11:30 – 12:20 pm	Lunch - Dr. Jim Gall Award
12:20 pm	Reconvene in Auditorium
12:30 – 1:45 pm	CONCURRENT BREAKOUT SESSION 2
A	Paramedic Partners in Palliative Care: Holding the Frontline in the Community Cathie Hedges, AEMCA, ACP
B	Impact of a Transplant Palliative Care Clinic on Symptoms for Patients Awaiting Lung Transplantation Nicole Freeman, MD, CCFP(PC)
C	Unraveling a Culture that is Not Complex Audrey Logan, BA, ESC Aboriginal Navigator Mark Tomen, MD, ESC Regional Cancer Lead
D	Entertain, Educate, and Enthral: Applied Theatre in Death Education Keri-Lyn Durant, OCT, Arts Educator, PhD Student
1:45 pm	Comfort Break
1:55 pm	Closing Plenary Session –The Pursuit of Hope in the Age of Social Media Sheri Lynn Bergeron, MD, CCFP(PC)
3:30 pm	Closing Remarks – Stephen Brennan, Senior Director
3:45 pm	Departure

KEYNOTE PRESENTERS

Keynote: Thursday, September 21, 2017

Glen Maddison, MD, CCFP, FCFP



Palliative Care: Past, Present & Future

It has been over 20 years since the Institute of Medicine published its landmark report calling for major improvements in professional training on care for the dying patient on the part of medical educators.

Addressing palliative care training has become an important topic in medical education today. We now have a better understanding of:

- Inadequacies related to the lack of communication about prognosis;
- Patient's preferences and goals for care;
- Understanding that patients want better information in order to be able to plan and have their wishes fulfilled;
- Supporting patients and their families with complicated and difficult decisions weighing the benefits and burdens of intervention and end of life care.

With the future of palliative care we can look towards:

- Shifting the goals of palliative education to a more comfort orientated model;
- Breaking down barriers to quality end of life care;
- Improvements in provider's knowledge of in providing appropriate care at end of life;
- Management of the physical and psychosocial symptoms of end of life care;
- Focus on Symptom management, dignity and control and quality of life.

Keynote: Friday, September 22, 2017
Naheed Dosani, MD, CCFP (PC), BSc



Reframing the Social Determinants of Health: Towards Palliative Care Equity in our Communities

How do we value dignity at end of life?
Is it the same for everyone?

There is growing recognition that what makes Canadians sick is more than just biology and genetics. In fact, it is estimated that up to 60% of what causes us illness, is related to how we live, learn, work and play. These factors, known as the social determinants of health, are often overlooked in our Palliative Care delivery systems. Meanwhile, it is well known that Canada's marginalized populations, including the homeless and vulnerably housed and communities with mental illness and addictions, suffer from higher morbidity and mortality due to illnesses often stemming from social and societal circumstances. All the while, dying in social isolation, falling through the cracks, with few people and supports around them, and often, with a lack of dignity.

Plenary Speaker: Friday, September 22, 2017
Sheri Lynn Bergeron, MD, CCFP (PC)



The Pursuit of Hope in the Age of Social Media

The age of internet and social media with Google and Facebook has changed the landscape of patient understanding of their disease, treatments and alternative treatment options. We will discuss common alternative cancer treatment options seen on social media and how that affects the hope of our patients and their loved ones.

CONCURRENT WORKSHOP DESCRIPTIONS

Friday, September 22, 2017

Session 1: 10:15 – 11:30 am

Session 2: 12:30 – 1:45 pm

A. Paramedic Partners in Palliative Care: Holding the Front Line in the Community

Cathie Hedges, EMS, AEMCA, ACP

The first ambulance transportation service in Ontario was established in 1832 in the Toronto area to remove ill and deceased patients during a cholera outbreak in the town of North York (now Toronto). Since that time the ambulance services and the paramedics who work for them have been seen largely as a support service to many other health care disciplines. With advances in education, skill sets, and technology, paramedics are more involved in the care of patients in the pre-hospital setting. The provision of supportive care and navigation through the system is becoming the norm in many communities.

This session will highlight the evolving role of the paramedic as an integral member of the palliative care team providing in-home community care.

Learning Objectives:

1. Outline the history of ambulance services and emergency medical services in Ontario and Essex County.
2. Describe the evolving, expanding role of the paramedic in the community.
3. Highlight the Vulnerable Patient Navigator Program which exists within Essex Windsor EMS and how it enhances palliative care delivery in the home setting.

B. Impact of a Transplant Palliative Care Clinic on Symptoms for Patients Awaiting Lung Transplantation

Nicole Freeman, MD, MD, CCFP(PC)

The main objective for this study was to evaluate the effectiveness of an outpatient palliative care intervention for patients with end-stage, non-malignant lung disease awaiting transplantation.

A secondary objective was to document the frequency of prescription of opioids and their duration of use in the post-lung transplant period. This research established that an ambulatory palliative care clinic may improve symptom burden in patients prior to lung transplant, and demonstrates that patients who take opioids to manage dyspnea and cough are able to discontinue use of opioids after transplant with no indication of prolonged use or addiction. Furthermore, this study provides further support for the role of palliative care in the non-malignant population.

Learning Objectives:

1. To improve our understanding of the symptom burden experienced by patients with end-stage lung disease (ESLD).
2. To explore the role of palliative care for the ESLD population awaiting transplantation.
3. To assess the benefits and risks of opioids in this population.

C. Unraveling a Culture that is Not Complex

Audrey Logan, BA, ESC Aboriginal Navigator

Mark Tomen, MD, ESC Regional Cancer Lead

The workshop will open and close with a traditional ceremony participants can take part in! This workshop is intended to showcase some of the innovative work completed to date by the Erie St. Clair Regional Aboriginal Cancer Lead and the Aboriginal Navigator, unraveling the mysteries. Through case studies, the participants will come understand some of the challenges and strengths facing indigenous people in palliative care. There will be an opportunity for questions. The participants will be provided with skills they can feel comfortable using when delivering indigenous patient care. Health Care Providers will be armed with an understanding of the audience they are working with. While the focus of this workshop is on indigenous people, we have heard through evaluations, that this workshop has helped participants in the delivery of care to other nations of people. Everyone is in the circle of life, come find out what this means. There will be a question period following and participants will be provided with handout materials and contact information for later reference.

Learning Objectives:

1. Participants will acquire skills in direct care working with Indigenous people.
2. Participants will be provided with a basic understanding of Indigenous knowledge as it applies to palliative care.
3. Participants will understand there are many nations and we need to collaborate to find solutions to care.

D. Entertain, Educate, and Enthral: Applied Theatre in Death Education

Keri-Lyn Durant, OCT, Arts Educator, PhD Student

Have you considered the role creativity plays in what you do?

In the areas of my work and research, creativity expressed through applied theatre often holds a key role in areas such as engagement of trust, fruitful communication, interdisciplinary strategizing, and emotional and physical wellbeing (care given and self-care).

Learning Objectives:

1. The role of applied theatre in my explorations of death education;
2. How I have harnessed this creative expression in tangible ways;
3. Building foundations and moving forward – where to go next?