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Issue Date: February 25 2015	Subject: Palliative Care Referral
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**SUBJECT:**

Palliative Care Referral

**PURPOSE:**

This policy describes the process to access the Southern Health-Santé Sud Palliative Care Program's services, the criteria for consultation with the Palliative Care Team and for registration with the Palliative Care Program.

**BOARD POLICY REFERENCE:**

Executive Limitation (EL-2) Treatment of Clients

**POLICY:**

Palliative care services are available to individuals and their support network to improve the quality of life at the end of life.

The goal of palliative care services is to alleviate suffering and maximize quality of life. Care and service provision focus on:

- comfort through pain and symptom management and
- psychosocial support through the end of life and into bereavement.

Palliative care services focus on enhancing quality of life and are not about prolonging or shortening life.

People are eligible for registration with the Palliative Care Program and to receive on-going support and end-of-life care when they:

- Have a diagnosis of a life-limiting illness confirmed by a physician
- Have an estimated prognosis of less than or equal to six months
- Are prepared to accept on-going palliative care services

A consult for palliative care services may be sent at any stage in a life-limiting illness trajectory for assistance with pain and symptom management, psychosocial or spiritual distress or functional impairment.

The Palliative Care Team will work in collaboration with the primary care team. The Primary Care Team will support individuals undergoing therapy intended to prolong life, such as chemotherapy and radiation therapy when experiencing complications of that therapy.

## **DEFINITIONS:**

**Palliative care** is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.

Palliative care:

- provides relief from pain and other distressing symptoms;
- affirms life and regards dying as a normal process;
- intends neither to hasten or postpone death;
- integrates the psychological and spiritual aspects of patient care;
- offers a support system to help patients live as actively as possible until death;
- offers a support system to help the family cope during the patient's illness and in their own bereavement;
- uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated;
- will enhance quality of life, and may also positively influence the course of illness;
- is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications. \*

World Health Organization, 2014

## **PROCEDURE:**

The referring person (which may be an individual seeking care, a family member, or a health care provider will complete the "Palliative Care Referral Form".

1. All fields on the referral form must be completed. Please forward additional documents such as:
  - a. Palliative Care Drug Access Application (please see related policy for completion processes)
  - b. Health Care Directive, if completed
  - c. Advanced Care Plan, if completed
2. Forward the completed form to the Palliative Care Program.
3. The Palliative Care Team will review the referral for completeness. If information is missing or is unclear the program will contact the sender and/or the primary care provider for additional information.

4. The Palliative Care Team will contact the client and determine further service needs within five working days of receiving the referral.
5. The referral will be entered in the Palliative Care database.
6. If the person is opened on the Palliative Care Program, the program will notify the primary care provider of the services being provided.

**IMPORTANT POINTS TO CONSIDER:**

- The person being referred and/or their family should be aware of the referral and of the diagnosis and prognosis.
- Where this information has not been discussed with the person being referred, the Palliative Care Program will contact the referrer *before* contacting the person being referred to gain further context and information.

**SUPPORTING DOCUMENTS:**

[CLI.5910.PL.001.FORM.01](#)

Palliative Care Referral Form

[CLI.5910.PL.003.FORM.01](#)

Palliative Care Drug Access Program Application

**REFERENCES:**

Provincial Palliative Care Network, Manitoba. Norms of Practice: Hospice, Palliative and End-of-Life Care (revised 2010).

Regional Health Authority Central Manitoba Inc.-Office regional de la santé du Centre du Manitoba Inc.. Policy: Palliative Care Registration and Referral (2010).

South Eastman Health-Santé Sud-Est Inc.. Policy: Eligibility Criteria for Regional Palliative Care Program/Services (2005).

World Health Organization (2014). Definition of Palliative Care. Available on-line:  
<http://www.who.int/cancer/palliative/definition/en/>