URGENT Palliative Care Program Application for Registration Process



Urgent = patient requires immediate attention, urgent symptom management, home care services or admission to hospital

Explore goals of care and appropriate resources required to Evaluate if the patient meets palliative program criteria: meet patient needs Access CCMB Pain & Symptom · diagnosis of life-limiting illness Physician on call (see schedule) or CCMB · estimated prognosis less than or equal to 6 months Transition & Palliative Care Clinical Nurse • "do not attempt resuscitation" status established Specialist at 204-235-3363 No · not undergoing or planning a course of treatment with expectations of monitoring for and intervening for complications WRHA Palliative Care Program Rural RHA can be consulted in any care setting · contact individual RHA to obtain details on eligibility criteria for issues related to life-limiting illness. ** Note: Application is sent to RHA where municipal taxes are paid or Rural resources vary. the region where the first nations reserve is geographically located **Explore Options for Admission** Yes 1) Hospital (urban or rural) via emergency department or direct admission to ward Does the patient require admission? 2) In Winnipeg: contact WRHA Palliative Yes Care Program at: 204-237-2400 to No inquire about bed availability. If after hours a Physician may contact the Palliative Care Physician on call through StB Paging at 204-237-2053. **Complete Palliative Care Notice of Expected Death Ensure Primary Care Program and Manitoba** at Home **Provider Aware of Transition Palliative Care Drug Access** to Palliative Care · Complete if death is imminent **Program (PCDAP) Applications** Require physician signature Communicate that palliative Phone palliative care program to · Discuss patient choice of application completed alert of urgent application and funeral home Request urgent contact with patient discuss patient/family needs Complete letter (see J drive) for discussion/management of: Require patient signature (PCDAP) - provide copy to pt/family - advance care planning Require physician/NP signature - fax to: funeral home. - symptom issues medical examiner's office (fax #: Ensure patient/family aware of 204-945-2442), application primary care provider, and Discuss advance care planning **Consider Psychosocial Needs** palliative care program - Health Care Directive Assess current services or notify current CCMB clinician of referral Palliative care program may have All palliative care forms. Keep in mind that rural/remote psychosocial resources that can be info and handouts available areas may have limited accessed. Contact palliative care on the J drive, in the

First Nations, Métis and Inuit Cancer Control can be accessed at: 1-855-881-4395.

"Palliative Care" folder

Palliative Care Program Information

home care services available

If questions, call the palliative care program directly. WRHA palliative care program inquiries can be directed to 204-237-2400. Rural contact info varies.

CCMB Resources Contact Information

coordinator to request

If questions, call CCMB CNS -Transition & Palliative Care at: Tel. 204-235-3363 Pager 204-931-3061 or the CCMB Pain & Symptom Physician on call