

Palliative Care Leadership Center Graduate

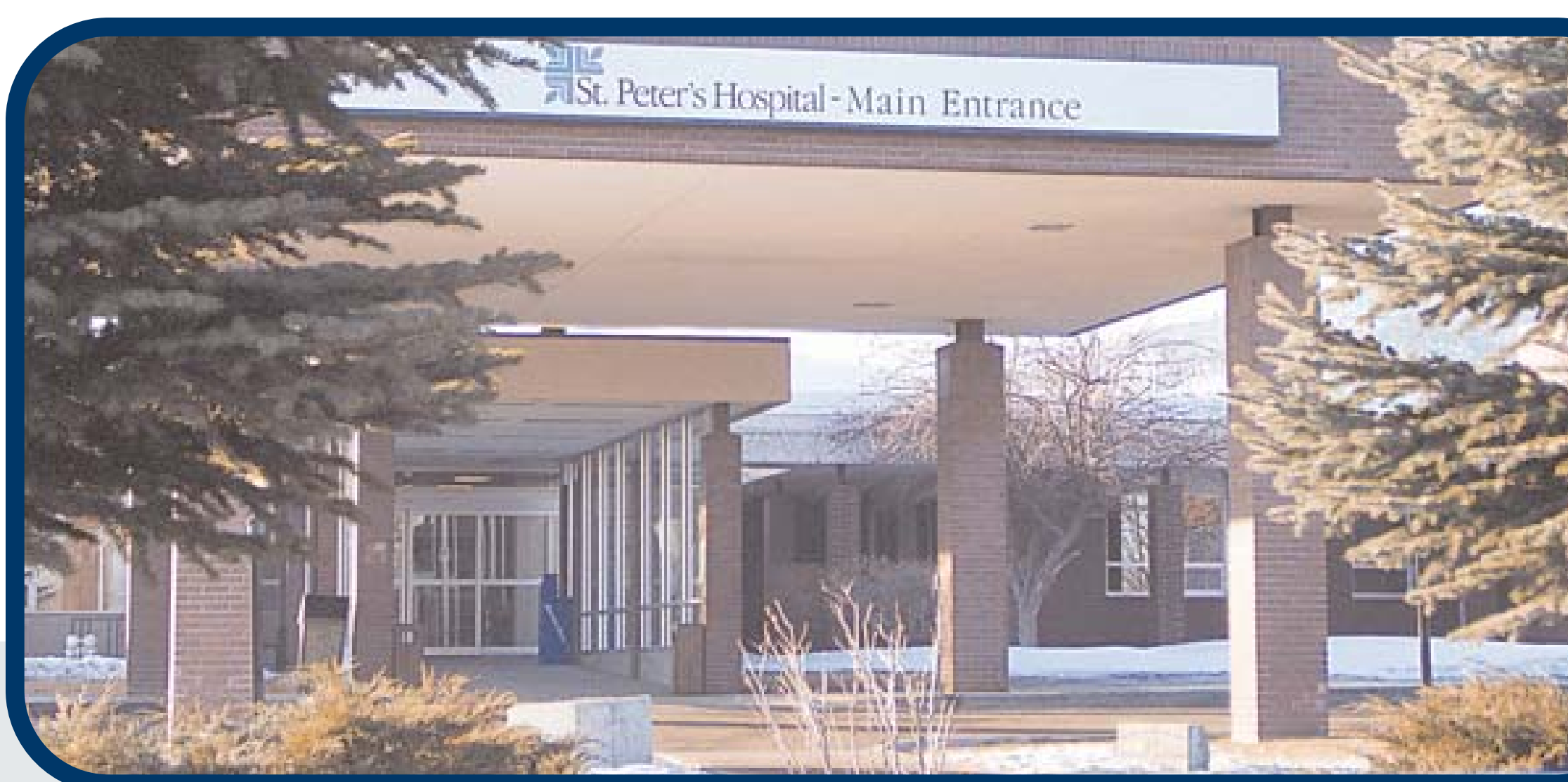
St. Peter's Hospital | Helena, Montana



Trained at Fairview Health Services

Benefits of PCLC Training

- Very high level of one-on-one attention resulted in relevant solutions for our hospital
- Increased legitimacy for palliative care within our hospital
- Greater cohesion within team; the work of the team no longer rests solely on the shoulders of the coordinator
- Comprehensive training manual provided the big picture for our program
- Expert advice when we need it



Hints for Others

- Network, network, network and build relationships.
- Work on getting buy-in from top management from the start.
- Learn all you possibly can about end-of-life conversations, hospice and listening.
- Consider attaching the program to your case management/discharge department.
- Attend a Palliative Care Leadership Center training!

About St. Peter's

St. Peter's Hospital is a 99-bed hospital in Helena, Montana, a community of about 40,000 people. The only community hospital in Helena, our mission is to ensure comprehensive interdisciplinary support for patients, families and communities faced with the complex issues of advanced illness. St. Peter's has a hospice and home-health department, but no inpatient hospice.

History of Palliative Care at St. Peter's

- Energy for a palliative care presence in the hospital came from the Ethics Committee, the hospice director, case management director, and a nurse (the palliative care coordinator)
- Team watched the Bill Moyers series on Death in America; inspired greatly by Dr. Diane Meier, the team was able to envision the gains for patients, families, the hospice and the hospital that could be made through palliative care
- Unique problems were identified and presented to the Ethics Committee, including the many "late referrals" to hospice made in crisis mode, with very short, difficult hospice stays
- Used potential increase in hospice census and increased patient and family satisfaction to establish initial business case; monies to support the program and coordinator's salary were funded by the hospice department

Profile of Our Palliative Care Program

- Consult service; staffed Monday-Friday, 8:00am-4:00pm
- Staffing: 2 RNs (RN program coordinator has certification in Hospice and Palliative Care), social worker and hospital chaplain
- Team meets daily for short "huddle;" weekly meetings to discuss impact; monthly meetings with nursing; quarterly meeting with larger committee, including physician advisors
- Focus on staff education, establishing relationships with hospitalists, and responding to institutional issues that are barriers to good end-of-life care
- 123 palliative care consults completed in first year of service; most important reason for referral was to assist with determining goals of care

Next Steps

- Use the financial impact tool, with each patient retrospectively evaluated as to their overall impact
- Implement bereavement program
- Participate in a communication skills training program called "Patient-Centered Advance Care Planning for Special Populations," a statewide initiative
- Present full report and business plan to senior management this winter
- Work on philanthropy and increasing donations to the foundation during 2005