



**Barrie and Community**

**Family Health Team**

# BCFHT Palliative Care Tool

## OntarioMD Every Step Conference

*Presented by:*

Dr. Anne DuVall, Clinical IT Lead BCFHT





**Barrie and Community**

**Family Health Team**

---

## **Contributors**

- Dr. Marianne Bebeau, Medical Director BCFHT
- Dr. Melissa Witty, family physician
- Dr. Paige Steciuk, family physician
- IT Team
  - Kelly Hanson
  - Heidi Andres
  - April Taggart

- **Faculty:** Anne DuVall, MD
- **Relationships with commercial interests:**
  - No relationship with commercial interests

# Disclosure of Commercial Support

- This program has not received financial support or in-kind support from any organization
- **Potential for conflict(s) of interest:**
  - Dr. Anne DuVall has not received payment or funding from any organization supporting this program AND/OR organization whose product(s) are being discussed in this program.

- There are no potential sources of bias.



## Project Objectives

- Main objective is to provide palliative care to all patients in Barrie and surrounding area
  - *Vision*: All end of life patient will have access to high quality palliative care
  - *Mission*: To provide a positive end of life experience for palliative care patients and their families. To provide supportive network for delivery of palliative care.
- Goals of Program:
  - Identify patients in need of palliative care
  - Develop seamless palliative care experience for patients. Seamless transition between home, hospital and hospice.
  - Develop a palliative care experience that respects the capabilities of families.
  - Support family physicians to continue to care for their palliative care patients. Ensure that continuity of care is maintained and capitalize on existing relationships.



# List of Tools

Accuro CMS4 2015.01 - \*\* LIVE \*\*

Patient: Bcfht, Troy 1993-Jan-01 (22 Yr male) 9876 543 210 (705) 797-8833  
Cell:(000)

Barrie & Community Family Health Team

smcconnachie

Day Sheet | Encounter Notes | Chronic Conditions | Virtual Chart | Medications | Patient Information

Patient: Bcfht, Troy | 22 years old male

Filter: --All Items-- | Providers: --All--

Palliative Flowsheet

Notes  
No Matches

Forms

- Palliative Care:
  - A Palliative Care Approach for Primary Care
  - Advance Care Planning (ACP) Checklist (Palliative)**
  - Billing Codes - Palliative Care
  - CCAC Medical Referral (Palliative)
  - EDITH (Expected Death in the Home) Protocol (Palliative)
  - Edmonton Symptom Assessment System (ESAS) (Palliative)
  - Hospice Simcoe Referral (Palliative)
  - Integrate Palliative Care Approach Community Rounds Report
  - North Simcoe Muskoka Palliative Care Network Intake Referral Form
  - Pain Diagram (Palliative)
  - Palliative Care Cumulative Profile
  - Palliative Care MCC Referral Form
  - Palliative Performance Scale (PPS)

palla

Edit

2015-Jul-10: Advance Care Planning (ACP) Checklist (Palliative)  
Provider: Unassigned, BCFHT

2015-Jul-10: Advance Care Planning (ACP) Checklist (Palliative)  
Provider: Unassigned, BCFHT

2015-Jul-10: Palliative Flowsheet  
Provider: Unassigned, BCFHT

2015-Jul-09: Palliative Care Cumulative Profile  
Provider: Unassigned, BCFHT

2015-Jul-08: Advance Care Planning (ACP) Checklist (Palliative)  
Provider: Szelag, Marek

2015-Jul-08: Advance Care Planning (ACP) Checklist (Palliative)  
Provider: Szelag, Marek

2015-Jul-08: Advance Care Planning (ACP) Checklist (Palliative)  
Provider: Szelag, Marek

Labs

Result	2014-Jun-25
Height	169, 60, 56, 56
Weight	65, 5.2, 4.3, 4.3
Heart Rate	65
BP - Systolic	120
BP - Diastolic	80
BMI	22.8
BMI	14.4, 13.7, 13.7
Waist Circumference	99

Tracking

1 | 0 | 909 | 153

History of Problems

- 2015-Apr-30: OSTEOPOROSIS / WRY NECK
- 2015-Apr-30: CONGESTIVE HEART FAILURE / HEART FAILURE
- 2015-Apr-30: ANXIETY / GRIEF REACTION / HYSTERIA
- 2015-Apr-30: ASTHMA
- 2015-Apr-30: ASHD / CORONARY ARTERY DISEASE
- 2015-Apr-30: HYPERCHOLESTEROLEMIA
- 2015-Apr-30: COPD
- 2015-Apr-30: HYPERTENSION
- 2015-Apr-30: DEPRESSION
- 2014-Jun-25: DIABETES Type 2

Active Medications

- 2015-Mar-04: C# 1% HC cream with canestan cream x 50g
- 2015-Jan-08: CHAMPX CONTINUATION PACK with 6 refills

External Medications

None Recorded

Allergies

- Penicillamine 250 mg Oral Capsule - Betalactams
- Penicillamine 250 mg Oral Capsule - Penicillamin
- LIPITOR - Statins-Hmg-Coa Reductase Inhibitors
- Penicillamine 250 mg Oral Capsule - Cysteamine

Immunization Schedule

- 2 Mth: DTAp-IPV-Hib, Pneu-C13, Rot-1
- 4 Mth: DTAp-IPV-Hib, Pneu-C13, Rot-1
- 6 Mth: DTAp-IPV-Hib
- 12 Mth: MMR, Men-C-C, Pneu-C13
- 15 Mth: Var
- 18 Mth: DTAp-IPV-Hib
- 4-6 years: DTAp-IPV, MMRV
- 14-16 years: Tdap
- 21 Yr 9 Mth: TWINRIX VACCINE ADULT, TWINRIX VACCINE ADULT
- 21 Yr 10 Mth: TWINRIX VACCINE ADULT, TWINRIX VACCINE ADULT

Immunization Summary



**Barrie and Community**

**Family Health Team**

## **Tools Available**

- A Palliative Care Approach for Primary Care
- Advance Care Planning (ACP) Check List (Palliative)
- Billing Codes (Palliative)
- CCAC Medical Referral (Palliative)
- Expected Death in the Home (EDITH) Protocol (Palliative)
- Edmonton Symptom Assessment System (ESAS) (Palliative)
- Hospice Simcoe Referral (Palliative)
- Integrate Palliative Care Approach Community Rounds Report
- North Simcoe Muskoka Palliative Care Network Intake Referral Form
- Pain Diagram (Palliative)
- Palliative Care Cumulative Profile
- Palliative Care MCC Referral Form
- Palliative Performance Scale (PPS)
- Palliative Flowsheet





**Barrie and Community**

**Family Health Team**

---

# **PALLIATIVE CARE CUMULATIVE PROFILE (PCCP)**



# Palliative Care Cumulative Profile

Palliative Care Cumulative Profile - Bcft, Troy

Title: Palliative Care Cumulative | Not Reviewed

Description: | DOS: --None-- | Provider: Adams, Sue

Click here for Community Palliative Care Program Information  
Click here for a guide for the use of Palliative Care Cumulative Profile and the Palliative Care Flowsheet

### Palliative Care Cumulative Profile

Family Physician:

Other MDs:

Other Providers (CCAC, etc.):

Pharmacy:

Primary Palliative Diagnosis: Medical:  | Cancer:

Date of Primary Diagnosis: MM/DD/YYYY

Secondary Palliative Diagnoses:

Medical:  |

Cancer:  |

Medical:  |

Cancer:  |

Course of Illness:

Course of Treatment:  Chemo  Radiation  Surgery  Palliative Care Consultation

Resuscitation:  DNR

Specific Wishes regarding End of Life:

Preference:  Home  Hospice

POAs:

Version: 1 | Page: 1/2

Print | Fax | Reviewed | OK | Close

Title **ve Care Cumulative Profile** Not Reviewed



Description  DOS **--None--** Provider **Adams, Sue**

Click here for [Community Palliative Care Program Information](#)  
Click here for a guide for the use of [Palliative Care](#)

**Text Guide:**  
[https://www.barriefht.ca/resources/Guide to the Use of the PCF and the PCCP.pdf](https://www.barriefht.ca/resources/Guide%20to%20the%20Use%20of%20the%20PCF%20and%20the%20PCCP.pdf)

**Video:**  
[https://www.youtube.com/watch?v=AZE\\_m7F-lB8&feature=youtu.be](https://www.youtube.com/watch?v=AZE_m7F-lB8&feature=youtu.be)

**Family Physician:**   
**Other MDs:**   
**Other Providers (CCAC, etc.):**   
**Pharmacy:**

**Primary Palliative Diagnosis:**   
**Date of Primary Diagnosis:**

**Secondary Palliative Diagnoses:**  
Medical:   
Cancer:   
Medical:   
Cancer:

**Course of Illness:**

**Course of Treatment:**  Chemo  Radiation  Surgery  Palliative Care Consultation

**Resuscitation:**  DNR

**Specific Wishes regarding End of Life:**

**Preference:**  Home  Hospice

**POAs:**

# Community Palliative Care Program Information

# Accuro<sup>®</sup> Tools for Community Palliative Care Guide

## Accuro Tools for Community Palliative Care Program

There is a suite of Tools in Accuro that will support all family physicians to provide palliative care to their patients whether they do this work frequently or infrequently. These tools were created to support the following Vision, Mission and Goals that were created by a group of dedicated physicians, nurses and administrators.

**Vision:** All end of life patients will have access to high quality palliative care

**Mission:**

- To provide a positive end of life experience for palliative care patients and their families.
- To provide a supportive network for delivery of palliative care

**Goals:**

- **Identify patients in need of palliative care**
- **Develop a seamless palliative care experience for end of life patients**
  - Seamless transitions between home, hospital, hospice
  - Seamless transitions between health care providers in the above locations
- **Develop a palliative care experience that respects the capabilities of families**
- **Support family physicians to continue to care for their palliative care patients**
  - In order to maintain continuity of care
  - In order to capitalize on the pre-existing doctor patient relationship.
  - With a supportive network
  - With educational opportunities

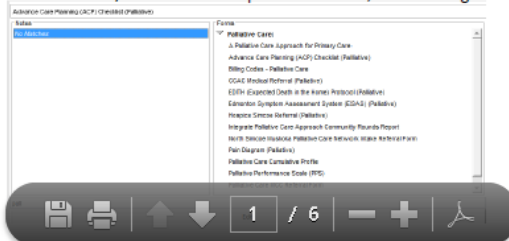
## Where to find the Accuro Tools

The suite of Tools can be accessed from the 'Encounter Notes' page of Accuro in the forms section.

Click the down arrow to the left of the green plus sign near the top of the page

Type in 'pall' in the bar above the 'Edit' bar half way down the page

You will see a series of materials/ forms listed in alphabetical order, this is the right sided column of the drop down



Palliative Care Cumulative Profile - Bcft, Troy

Title: Palliative Care Cumulative Profile | Not Reviewed

Description: | DOS: --None-- | Provider: Adams, Sue

Click here for Community Palliative Care Program Information  
 Click here for a guide for the use of Palliative Care Cumulative Profile and the Palliative Care Flowsheet.

### Palliative Care Cumulative Profile

**Family Physician:** Dr.Caring

**Other MDs:** Dr. Oncologit

**Other Providers (CCAC, etc.):** case manager Cindy 777-791-8863

**Pharmacy:** Shopper's Drug Mart

**Primary Palliative Diagnosis:** Medical: [dropdown] | Cancer: [dropdown]

**Date of Primary Diagnosis:** MM/DD/YYYY

**Secondary Palliative Diagnoses:**  
 Medical: [dropdown] | Cancer: [dropdown]

**Course of Illness:**

**Course of Treatment:**  Chemo  Radiation  Surgery  Palliative Care Consultation

**Resuscitation:**  DNR

**Specific Wishes regarding End of Life:**

**Preference:**  Home  Hospice

**POAs:**

Version: 1 | Page: 1/2 | Print | Fax | Reviewed | OK | Close

# Primary Palliative Diagnosis

This includes both medical and cancer diagnosis as main palliative diagnosis

- Medical: ASHD, CHF, COPD, CRF, Dementia, Diabetes, Stroke, & Other.
- Cancer: Brian, Breast, Colon, Kidney, Lung, Melanoma, Ovary, Pancreas, Prostate, Stomach, Uterus, & Other.

Palliative Care Cumulative Profile - Bcfht, Troy

Title: ve Care Cumulative Profile | Not Reviewed

Description: | DOS: --None-- | Provider: Adams, Sue

Click here for Community Palliative Care Program Information  
 Click here for a guide for the use of Palliative Care Cumulative Profile and the Palliative Care Flowsheet.

### Palliative Care Cumulative Profile

**Family Physician:** Dr.Caring

**Other MDs:** Dr. Oncologit

**Other Providers (CCAC, etc.):** case manager Cindy 777-791-8863

**Pharmacy:** Shopper's Drug Mart

**Primary Palliative Diagnosis:** Medical: |  
 Cancer: Colon - 153

**Date of Primary Diagnosis:** 02/12/2005

**Secondary Palliative Diagnosis:**

Medical: |  
 Cancer: |  
 Medical: |  
 Cancer: |

**Course of Illness:**

**Course of Treatment:**  Chemo  Radiation  Surgery  Palliative Care Consultation

**Resuscitation:**  DNR

**Specific Wishes regarding End of Life:** MM/DD/YYYY

**Preference:**  Home  Hospice

**POAs:**

Version: 1 | Page: 1/2

Print | Fax | Reviewed | OK | Close

# Primary Palliative Diagnosis

02/12/2005

February 2005

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

No Date | Cancel

Title **ve Care Cumulative Profile** Not Reviewed



Description  DOS **--None--** Provider **Adams, Sue**

Pharmacy: **Shopper's Drug Mart**

Primary Palliative Diagnosis: Medical:

Cancer: **Colon - 153**

Date of Primary Diagnosis: **02/12/2005**

**Secondary Palliative Diagnoses:**

Medical:

Cancer:

Medical:

Cancer:

**Course of Illness:**

Diagnosis of Colon Cancer February 12th, 2005.  
Rx Hemicolectomy followed by Chemo  
Did well until June 2015, presented to ER with SOB, CT showed lung mets  
Consideration given for palliative radiation to the lung

Course of Treatment:  Chemo  Radiation  Surgery  Palliative Care Consultation

Resuscitation:  DNR  
**08/01/2015**

Specific Wishes regarding End of Life:

Preference:  Home  Hospice

POAs:

Funeral Home:

Affairs in Order (refer to ACP Form):  Yes  No

Expected Death in the Home (EDITH) Protocol Complete  
[Click here for a link to EDITH - Expected Death in the Home Protocol Guidelines](#)

# Other Information

Title: Palliative Care Cumulative Profile Not Reviewed



Description: [ ] DOS: --None-- Provider: Adams, Sue

Pharmacy: Shopper's Drug M

Primary Palliative Diagnosis:

Date of Primary Diagnosis:

Secondary Palliative Diagnosis:

Medical: [ ]

Cancer: [ ]

Medical: [ ]

Cancer: [ ]

**Course of Illness:**

Diagnosis of Colon Cancer P  
 Rx Hemicolectomy followed b  
 Did well until June 2015, pres  
 Consideration given for pallia

Course of Treatment:

Resuscitation:  DNR

08/01/2015

Specific Wishes regarding B

Preference:  Home

POAs:

Funeral Home:

Affairs in Order (refer to AC

Expected Death in the Home

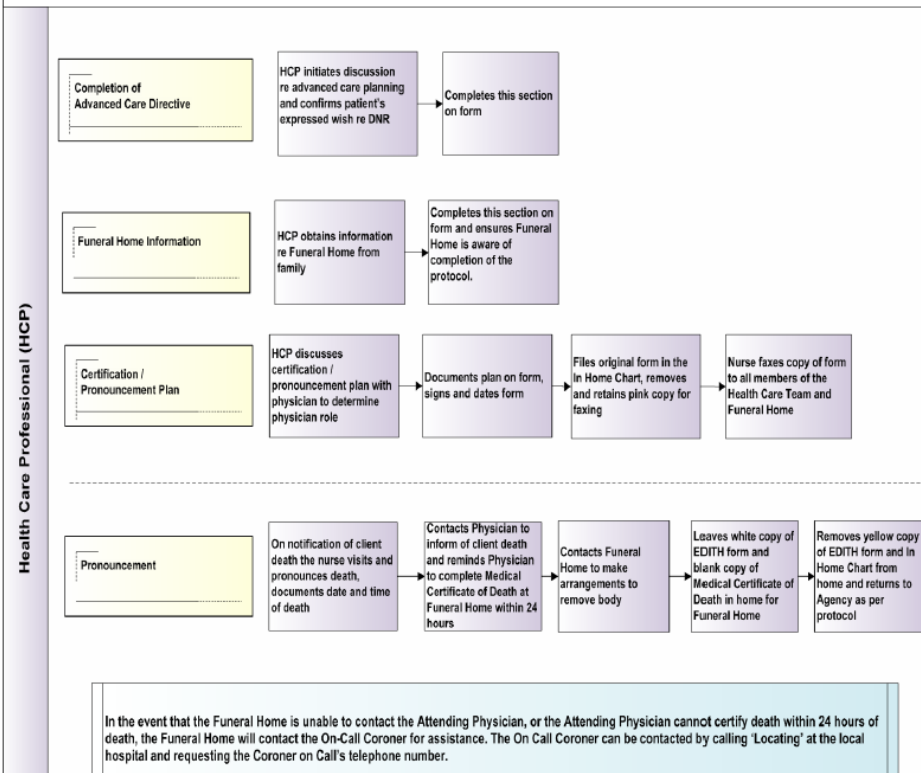
Click here for a link to EDITH

## Expected Death in the Home Protocol Guidelines

### Appendix 3 – Process for Completion of Expected Death in the Home (EDITH) Form

#### Process for Completion of Expected Death In The Home (EDITH) Form

(Do Not Resuscitate Medical Directive and Funeral Home Transfer Form)



Expected Death  
in the Home  
Protocol



Palliative Care Cumulative Profile - Bcfht, Troy

Title: Cumulative Profile - Page 2 | Not Reviewed

Description: [ ] | DOS: --None-- | Provider: Adams, Sue

Past Medical History:	Medications:	Notes/Comments:
<b>Past Medical/Surgical History</b> None Recorded	<b>Active Medications</b> 1% HC cream with canestan cream x 50g , CHAMPIX CONTINUATION PACK	Patient is interested in quality of life vs. prolonging his life unnecessarilty

Version: 1 | Page: 2/2

Print | Fax | Reviewed | OK | Close

# Palliative Care Cumulative Profile Notes



**Barrie and Community**

**Family Health Team**

---

# **PALLIATIVE FLOWSHEET**




# Palliative Performance Scale (PPS)

Palliative Performance Scale (PPS) - Bcft, Troy

Title: Palliative Performance Scale | Not Reviewed

Description: | DOS: --None-- | Provider: Adams, Sue



**Palliative Performance Scale (PPSv2) version 2**

PPS Level	Ambulation	Activity & Evidence of Disease	Self-Care	Intake	Conscious Level
100% <input type="checkbox"/>	Full	Normal activity & work No evidence of disease	Full	Normal	Full
90% <input type="checkbox"/>	Full	Normal activity & work Some evidence of disease	Full	Normal	Full
80% <input type="checkbox"/>	Full	Normal activity <i>with Effort</i> Some evidence of disease	Full	Normal or reduced	Full
70% <input type="checkbox"/>	Reduced	Unable Normal Job/Work Significant disease	Full	Normal or reduced	Full
60% <input type="checkbox"/>	Reduced	Unable hobby/house work Significant disease	Occasional assistance necessary	Normal or reduced	Full or Confusion
50% <input type="checkbox"/>	Mainly Sit/Lie	Unable to do any work Extensive disease	Considerable assistance required	Normal or reduced	Full or Confusion
40% <input type="checkbox"/>	Mainly in Bed	Unable to do most activity Extensive disease	Mainly assistance	Normal or reduced	Full or Drowsy +/- Confusion
30% <input type="checkbox"/>	Totally Bed Bound	Unable to do any activity Extensive disease	Total Care	Normal or reduced	Full or Drowsy +/- Confusion
20% <input checked="" type="checkbox"/>	Totally Bed Bound	Unable to do any activity Extensive disease	Total Care	Minimal to sips	Full or Drowsy +/- Confusion
10% <input type="checkbox"/>	Totally Bed Bound	Unable to do any activity Extensive disease	Total Care	Mouth care only	Drowsy or Coma +/- Confusion
0% <input type="checkbox"/>	Death	-	-	-	-

*Used with permission Victoria Hospice Society, 2006*

PPS Total 20

Palliative Performance Scale Aug 25, 2003

Version: 1 | Page: 1/1 | Print | Fax | Reviewed | OK | Close



Edmonton Symptom Assessment System (ESAS) (Palliative) - Bcft, Troy

Title: Edmonton Symptom Asses Not Reviewed

Description: DOS: --None-- Provider: Adams, Sue

Patient Name: Troy Bcft  
Date: 09/09/2015

**Cancer Care Ontario**  
**Action Cancer Ontario**

**Edmonton Symptom Assessment System:**  
(revised version) (ESAS-R)

Please circle the number that best describes how you feel NOW:

No Pain 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Pain  
Pain = 2

No Tiredness 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Tiredness  
(Tiredness = lack of energy) Tiredness = 8

No Drowsiness 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Drowsiness  
(Drowsiness = feeling sleepy) Drowsiness = 8

No Nausea 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Nausea  
Nausea = 0

No Lack of Appetite 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Lack of Appetite  
Lack of Appetite = 10

No Shortness of Breath 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Shortness of Breath  
Shortness of Breath = 2

No Depression 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Depression  
(Depression = feeling sad) Depression = 1

No Anxiety 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Anxiety  
(Anxiety = feeling nervous) Anxiety = 5

Best Wellbeing 0  1  2  3  4  5  6  7  8  9  10  Worst Possible Wellbeing  
(Wellbeing = how you feel overall) Wellbeing = 9

No Other Problem (for example constipation) 0  1  2  3  4  5  6  7  8  9  10  Worst Possible  
Other = 0

Completed by (check one):

Version: 1 Page: 1/1

Print Fax Reviewed OK Close

# Edmonton Symptom Assessment System (ESAS)



## Palliative Queries

**Lab Results Graphing**  
Anxiety for Troy Bcfht 9876543210 From 2015-May-27 To 2015-Sep-12

Date	Anxiety Score
2015-May-27	5.85
2015-Jun-14	5.85
2015-Jul-02	5.85
2015-Jul-20	5.85
2015-Aug-07	5.85
2015-Aug-25	5.85
2015-Sep-12	4.95

**Lab Tests**

- ESAS (Manual)
- Anxiety (Manual, Text)**
- Depression (Manual, Text)
- Drowsiness (Manual, Text)
- Lack of Appetite (Manual, Text)
- Nausea (Manual, Text)
- Pain (Manual, Text)
- Shortness of Breath (Manual, Text)
- Tiredness (Manual, Text)
- Wellbeing (Manual, Text)

**Options**

- Show Ref Range
- Show Meds
- Show Appts
- Show Points

**Medications**

Medication	Dose
Message therapy	1.0 null null x 0 Tablet(s)
Message therapy for medical reaso	1.0 null null x 0 Tablet(s)
1% HC cream with canestan cream >	1.0 null null x 100 g
CHAMPIX CONTINUATION PACK	1.0 null null x 2 Box(es) with 6 refills
micronazole powder 2% bactoban 2f	1.0 null null x 30 g
Mupirocin ointment 2% - 15gBetametf	1.0 null null x 20 g
DR. JACK NEWMAN'S NIPPLE CREA	1.0 null null x 25 g
BACTROBAN 2% OINTMENT 15.0g; E	1.0 null null x 20 g
Appointments	1.0 null null x 20 g

**History of Problems**

- 2015-Apr-30 OSTEOPOROSIS / WRY NECK
- 2015-Apr-30 CONGESTIVE HEART FAILURE / HEART FAILURE
- 2015-Apr-30 ANXIETY / GRIEF REACTION / HYSTERIA
- 2015-Apr-30 ASTHMA
- 2015-Apr-30 ASHD / CORONARY ARTERY DISEASE
- 2015-Apr-30 HYPERCHOLESTEROLEMIA
- 2015-Apr-30 COPD
- 2015-Apr-30 HYPERTENSION
- 2015-Apr-30 DEPRESSION
- 2014-Jun-25 DIABETES Type 2

**Active Medications**

- 2015-Mar-04 C# 1% HC cream with canestan cream x 50g
- 2015-Jan-08 CHAMPIX CONTINUATION PACK with 6 refills

**External Medications**

- None Recorded

**Allergies**

**Drug Allergies**

- Penicillamine 250 mg Oral Capsule - Betalactams
- Penicillamine 250 mg Oral Capsule - Penicillamin
- LIPITOR - Statins-Hmg-Coa Reductase Inhibitors
- Penicillamine 250 mg Oral Capsule - Cysteamine

**Immunization Schedule**

Age	Vaccine
2 Mth	DTaP-IPV-Hib, Pneu-C13, Rot-1
4 Mth	DTaP-IPV-Hib, Pneu-C13, Rot-1
6 Mth	DTaP-IPV-Hib
12 Mth	MMR, Men-C-C, Pneu-C13
15 Mth	Var
18 Mth	DTaP-IPV-Hib
4-6 years	DTaP-IPV, MMRV
14-16 years	Tdap
21 Yr 9 Mth	TWIVRIX VACCINE ADULT, TWIVRIX VACCINE ADULT
21 Yr 10 Mth	TWIVRIX VACCINE ADULT, TWIVRIX VACCINE ADULT



# Palliative Flowsheet

Bcft, Troy: Palliative Flowsheet			
Patient: Bcft, Troy 9876543210 DOB: 1983-Jan-01		Provider: Adams, Sue	
	DOS: 09/16/2015 <a href="#">Select Recent Values</a>	DOS: 2015-Jul-13	DOS: 2015-Jul-13
	Current Value	Previous Value	Previous Value
Weblink	<a href="#">Click here for a guide for the use of the Palliative Care Flowsheet and the Palliative Care Cumulative Profile</a>	<a href="#">Click here for a guide for the use of the Palliative Care Flowsheet and the Palliative Care Cumulative Profile</a>	<a href="#">Click here for a guide for the use of the Palliative Care Flowsheet and the Palliative Care Cumulative Profile</a>
Weblink	<a href="#">Click for a link to A Palliative Approach for Primary Care</a>	<a href="#">Click for a link to A Palliative Approach for Primary Care</a>	<a href="#">Click for a link to A Palliative Approach for Primary Care</a>
Suggested Dignity Questions	1. What do I need to know about you to give you the best care possible? <input type="checkbox"/>	What do I need to know about you to give you the best care possible? <input type="checkbox"/>	What do I need to know about you to give you the best care possible? <input type="checkbox"/>
	2. At this time, what are the most important things to you, or the things that concern you most? <input type="checkbox"/>	At this time, what are the most important things to you, or the things that concern you most? <input type="checkbox"/>	At this time, what are the most important things to you, or the things that concern you most? <input type="checkbox"/>
	3. What are you most proud of in life? <input type="checkbox"/>	What are you most proud of in life? <input type="checkbox"/>	What are you most proud of in life? <input type="checkbox"/>
	4. Are you concerned about how your illness is affecting others close to you? <input type="checkbox"/>	Are you concerned about how your illness is affecting others close to you? <input type="checkbox"/>	Are you concerned about how your illness is affecting others close to you? <input type="checkbox"/>
	5. <a href="#">Click here for a link to the Record Me Now website</a>	<a href="#">Click here for a link to the Record Me Now website</a>	<a href="#">Click here for a link to the Record Me Now website</a>
Responses			
Responses Cont.			
Psychosocial and Spiritual Needs			
PPS	2015-Sep-09: 20: PPS	2015-Jul-13: 50: PPS	
PPS Levels	>70 60% 50% 40% 30% <20%	>70 60% 50% 40% 30% <20%	>70 60% 50% 40% 30% <20%
Pain	2015-Sep-09: 2: Pain		
Tired	2015-Sep-09: 8: Tiredness		
Drowsiness	2015-Sep-09: 8: Drowsiness		
Nausea	2015-Sep-09: 0: Nausea		
Lack of Appetite	2015-Sep-09: 10: Lack of Appetite		
Shortness of Breath	2015-Sep-09: 2: Shortness of Bre...		
Depression	2015-Sep-09: 1: Depression		
Anxiety	2015-Sep-09: 5: Anxiety		
Low Wellbeing	2015-Sep-09: 9: Wellbeing		



Patient: Bcftt, Troy 9876543210 DOB: 1993-Jan-01		
WebLink	Click here	
WebLink	Click for a	
Suggested Dignity Questions	1. What do	
	2. At this time	
	3. What are	
	4. Are you	
	5. Click here	
Responses		
Responses Cont.		
Psychosocial and Spiritual Needs		
PPS	2015-Se	
PPS Levels	>70 ⓘ	
ESAS	Pain	2015-Se
	Tired	2015-Se
	Drowsiness	2015-Se
	Nausea	2015-Se
	Lack of Appetite	2015-Se
	Shortness of Breath	2015-Se
	Depression	2015-Se
	Anxiety	2015-Se
	Low Wellbeing	2015-Se

New Worksheet

## Cancer Care Ontario Action Cancer Ontario

Search CCO

- About CCO
- Ontario Cancer System
- Prevention & Care
- Research
- CCO Toolbox
- QuickLinks



### CCO Toolbox

- Evidence-Based Guidelines
- Non-PEBC Guidelines
- Drug Formulary
- Cancer Drug Reimbursement
- Drug Information for Patients
- Palliative Care Tools**
- Palliative Care Toolkit for Aboriginal Communities
- Diagnostic Assessment Forms
- Multidisciplinary Cancer Conference Tools
- Oncology Information System Standards
- Patient and Family Advisory Council Toolkit
- Screening Correspondence Provider Resource Package
- Screening Resources for Newcomers and Immigrants
- Surgical Oncology Tools
- Symptom Assessment and Management Tools
- My CancerQ
- Health System Data
- Libraries and Archives
- App Library

### Palliative Care Tools

Links to best-practice tools from around the world to support primary care providers in the delivery of palliative care.

Tools are organized according to the 3-step model of best practice proposed by the [Gold Standards Framework \(GSF\)](#): Identify, Assess, and Plan. This evidence-based approach has been adopted broadly across the United Kingdom. Work has also been done to adapt the GSF in British Columbia for an [End of Life Care](#) Module developed by the General Practice Services Committee. For resources tailored to support First Nations, Métis and Inuit families and communities, please see [Tools for the Journey: Palliative Care in First Nations, Inuit and Métis Communities](#), a [Resource Toolkit](#), developed by the Aboriginal Cancer Control Unit at Cancer Care Ontario

To view a detailed map of the standard of care and support that all cancer patients and their families should receive, please refer to the [Psychosocial Oncology/Palliative Care Pathway](#) (Cancer Care Ontario).

#### STEP 1: IDENTIFY

Identify persons who may benefit from a palliative care approach early in the illness trajectory by using available tools.

View Tools for Step 1: Identify

#### STEP 2: ASSESS

Assess the person's current and future needs and preferences across ALL domains of care (see [Domains of Issues Associated with Illness and Bereavement - PDF](#)) using validated screening tools, and through an in depth history, physical examination, and relevant laboratory/imaging tests.

View Tools for Step 2: Assess

#### STEP 3: PLAN/MANAGE

Plan and collaborate ongoing care to address needs identified during assessment, including prompt management of symptoms and coordination with other care providers.

View Tools for Step 3: Plan/Manage

# Cancer Care Ontario Palliative Tools

		DOS: 09/16/2015 <input type="button" value="Select Recent Values"/>	
		Current Value	
Patient Understanding of Planned Rx and Prognosis	Weblink	Click here for a guide for the use of the Palliative Care Flowsheet and the Palliative Care Cumulative Profile	
	Weblink	Click for a link to A Palliative Approach for Primary Care	
	Values, Wishes and Preferences	Suggested Dignity Questions	1. What do I need to know about you to give you the best care possible? <input type="checkbox"/>
			2. At this time, what are the most important things to you, or the things that concern you most? <input type="checkbox"/>
			3. What are you most proud of in life? <input type="checkbox"/>
			4. Are you concerned about how your illness is affecting others close to you? <input type="checkbox"/>
			5. Click here for a link to the Record Me Now website
	Responses	<input type="text"/>	
	Responses Cont.	<input type="text"/>	
	Psychosocial and Spiritual Needs	<input type="text"/>	
PPS	2015-Sep-09: 20: PPS <input type="button" value="+"/>		
PPS Levels	>70  60%  50%  40%  30%  <20%		
Symptom Issues, PPS and ESAS	ESAS	Pain	2015-Sep-09: 2: Pain <input type="button" value="+"/>
		Tired	2015-Sep-09: 8: Tiredness <input type="button" value="+"/>
		Drowsiness	2015-Sep-09: 8: Drowsiness <input type="button" value="+"/>
		Nausea	2015-Sep-09: 0: Nausea <input type="button" value="+"/>
		Lack of Appetite	2015-Sep-09: 10: Lack of Appetite <input type="button" value="+"/>
		Shortness of Breath	2015-Sep-09: 2: Shortness of Bre... <input type="button" value="+"/>
		Depression	2015-Sep-09: 1: Depression <input type="button" value="+"/>
		Anxiety	2015-Sep-09: 5: Anxiety <input type="button" value="+"/>
Low Wellbeing	2015-Sep-09: 9: Wellbeing <input type="button" value="+"/>		

# Dignity Questions



	DOS: 2015-Sep-16
	Current Value
Weblink	Click here for a guide for the use of the Palliative Care Flowsheet and the Palliative Care Cumulative Profile <b>i</b>
Weblink	Click for a link to A Palliative Approach for Primary Care <b>i</b>

Patient Understanding of Planned Rx and Prognosis  
Values, Wishes and Preferences

Psyc

PPS

PPS

Symptom Issues, PPS and ESAS  
ESAS

Majo

le  
w

# Palliative Performance Scale

		DOS: 09/16/2015 <span>Select Recent Values</span>	
		Current Value	
Weblink		Click here for a guide for the use of the Palliative Care Flowsheet and the Palliative Care Cumulative Profile <span>i</span>	
Weblink		Click for a link to A Palliative Approach for Primary Care <span>i</span>	
Patient Understanding of Planned Rx and Prognosis Values, Wishes and Preferences	Suggested Dignity Questions	1. What do I need to know about you to give you the best care possible? <input type="checkbox"/>	
		2. At this time, what are the most important things to you, or the things that concern you most? <input type="checkbox"/>	
		3. What are you most proud of in life? <input type="checkbox"/>	
		4. Are you concerned about how your illness is affecting others close to you? <input type="checkbox"/>	
		5. Click here for a link to the Record Me Now website <span>i</span>	
	Responses	<input type="text"/>	
	Responses Cont.	<input type="text"/>	
	Psychosocial and Spiritual Needs	<input type="text"/>	
	PPS	2015-Sep-09: 20: PPS <span>+</span>	
	PPS Levels	>70 <span>i</span> 60% <span>i</span> 50% <span>i</span> 40% <span>i</span> 30% <span>i</span> <20% <span>i</span>	
Symptom Issues, PPS and ESAS ESAS	Pain	2015-Sep-09: 2: Pain <span>+</span>	
	Tired	2015-Sep-09: 8: Tiredness <span>+</span>	
	Drowsiness	2015-Sep-09: 8: Drowsiness <span>+</span>	
	Nausea	2015-Sep-09: 0: Nausea <span>+</span>	
	Lack of Appetite	2015-Sep-09: 10: Lack of Appetite <span>+</span>	
	Shortness of Breath	2015-Sep-09: 2: Shortness of Bre... <span>+</span>	
	Depression	2015-Sep-09: 1: Depression <span>+</span>	
	Anxiety	2015-Sep-09: 5: Anxiety <span>+</span>	
	Low Wellbeing	2015-Sep-09: 9: Wellbeing <span>+</span>	

2015-Sep-09: 20: PPS ▼

2015-Sep-09: 20: PPS

2015-Jul-13: 50: PPS

2015-May-27: 50: PPS



# PPS Decision Support

Psychosocial and Spiritual Needs		No religious affiliation. Patient feels that they are coping well emotionally at this time.	
Symptom Issues, PPS and ESAS	PPS	2015-Sep-09: 20: PPS <input type="button" value="+"/>	<p>Ensure referral to CCAC complete and urgent assessment of understanding, goals of care and End of Life Care Plan</p> <p>Consider EDITH Protocol/Hospice Referral'</p> <p>Ensure the ACP is completed</p> <p>At 20% PPS and below, totally bed bound unable to do any activity extensive disease minimal intake total care</p>
	PPS Levels	>70 ⓘ 60% ⓘ 50% ⓘ 40% ⓘ 30% ⓘ <20%	
	Pain	2015-Sep-09: 2: Pain <input type="button" value="+"/>	
	Tired	2015-Sep-09: 8: Tiredness <input type="button" value="+"/>	
	Drowsiness	2015-Sep-09: 8: Drowsiness <input type="button" value="+"/>	
	Nausea	2015-Sep-09: 0: Nausea <input type="button" value="+"/>	
	Lack of Appetite	2015-Sep-09: 10: Lack of Appetite <input type="button" value="+"/>	
	Shortness of Breath	2015-Sep-09: 2: Shortness of Bre... <input type="button" value="+"/>	
	Depression	2015-Sep-09: 1: Depression <input type="button" value="+"/>	
	Anxiety	2015-Sep-09: 5: Anxiety <input type="button" value="+"/>	
Low Wellbeing	2015-Sep-09: 9: Wellbeing <input type="button" value="+"/>		
		<	
New Worksheet			

		DOS: 09/16/2015 <input type="button" value="Select Recent Values"/>		
		Current Value		
	Psychosocial and Spiritual Needs	at this time.		
Symptom Issues, PPS and ESAS	PPS	2015-Sep-09: 20: PPS <input style="float: right;" type="button" value="+"/>		
	PPS Levels	>70 <input type="button" value="i"/> 60% <input type="button" value="i"/> 50% <input type="button" value="i"/> 40% <input type="button" value="i"/> 30% <input type="button" value="i"/> <20% <input type="button" value="i"/>		
	ESAS	Pain	2015-Sep-09: 2: Pain <input style="float: right;" type="button" value="+"/>	
		Tired	2015-Sep-09: 8: Tiredness <input style="float: right;" type="button" value="+"/>	
		Drowsiness	2015-Sep-09: 8: Drowsiness <input style="float: right;" type="button" value="+"/>	
		Nausea	2015-Sep-09: 0: Nausea <input style="float: right;" type="button" value="+"/>	
		Lack of Appetite	2015-Sep-09: 10: Lack of Appetite <input style="float: right;" type="button" value="+"/>	
		Shortness of Breath	2015-Sep-09: 2: Shortness of Bre... <input style="float: right;" type="button" value="+"/>	
		Depression	2015-Sep-09: 1: Depression <input style="float: right;" type="button" value="+"/>	
		Anxiety	2015-Sep-09: 5: Anxiety <input style="float: right;" type="button" value="+"/>	
	Low Wellbeing	2015-Sep-09: 9: Wellbeing <input style="float: right;" type="button" value="+"/>		
	Major Concerns	Patient and family would like to have transfer to hospice.		
	Major Concerns Continued			
Physical Exam	Physical Exam			
Assessment	Assessment			
Plan	Plan	Hospice referral activated.		

# Clinical Summary



**Barrie and Community**

**Family Health Team**

# **QUESTIONS AND COMMENTS**

