Paramedics Providing Palliative Care at Home Program:
Bridging the gap during a crisis

By Dr. Alix Carter, Ms. Marianne Arab, and Ms. Michelle Harrison

The Paramedics Providing Palliative Care at Home Program in Nova Scotia and Prince Edward Island enhances the care provided by paramedics for those receiving palliative care by “bridging” palliative care supports until the patient’s usual care team can take over. This article will focus on the program in Nova Scotia (more information on the service in PEI can be found at: www.healthpei.ca/palliativecare).

Background

In Canada, of those who have a preference, 75% wish to die at home or receive their care at home in the last weeks and days of life. Despite this, 70% die in hospital, and most will visit an emergency department. Paramedics, also known as emergency medical services (EMS), facilitate over half of these emergency department visits. Emergency departments tend to be loud, busy, overcrowded, and are stressful for patients receiving palliative care who are often seeking urgent symptom control.

In 2014, with funding from the Canadian Partnership Against Cancer, Cancer Care Nova Scotia and Nova Scotia Emergency Health Services (EHS), in partnership with Health PEI and Island EMS, launched the ‘Paramedics Providing Palliative Care at Home Program’ to enhance the care paramedics provide to patients receiving palliative care.

About the Program

The aim of the Paramedics Providing Palliative Care at Home Program is to:
- Improve access to palliative care supports at home regardless of time of day or location in Nova Scotia;
- Enhance the palliative and end-of-life experience for patients and their families by “bridging” palliative care supports until the usual care team can take over;
- Avoid/reduce emergency department visits for patients receiving palliative care; and
- Improve paramedic comfort and confidence in supporting patients (and their families) receiving palliative care.

We felt very comforted in the fact that we could call any time, day or night, even if the home care office was closed we could call the paramedics if there was a problem.

Family Member

Paramedic Palliative Care Clinical Practice Guideline

Palliative crises/emergencies can occur for physical (e.g., pain, dyspnea, delirium, etc.), emotional, and/or existential reasons, and often involve both patient and their family/caregiver. Patients or their families seek EMS support when their usual supports are delayed, when there is a sudden increase in need (e.g., the patient unexpectedly worsens) and/or the usual care team is unavailable.

Prior to the Paramedics Providing Palliative Care at Home Program, most clinical practice guidelines (CPG) were designed to stabilize patients and transport them to the closest emergency department. However, paramedics indicated that these CPGs often did not fit with the needs and wishes of patients receiving palliative care. The project team helped to develop an innovative palliative CPG for paramedics. This guideline provides...
Providing Care in Line with the Patient’s Wishes

The EHS Special Patient Program
Although people may discuss their end-of-life wishes with a family member, rarely are these preferences shared with health care providers. However, patients who have end-of-life discussions with their health care team and family are more likely to be satisfied with their care, require fewer aggressive interventions and are more likely to die at home. Knowing and understanding these wishes has been a particular challenge for paramedics who arrive at a person’s home in the midst of a crisis.

In Nova Scotia, the EHS Special Patient Program (SPP) was developed over a decade ago to identify and promote strategies to maintain the comfort and quality of life for patients with unique care needs. In 2015, the SPP was expanded to include patients who are receiving palliative care, enabling paramedics to access their wishes for care.

You can help – Enroll your Patients in the EHS Special Patient Program
Enrollment into the SPP is the best way to make a patient’s wishes for care known to paramedics. Family physicians and other health care providers are asked to complete a SPP Enrollment Form, in discussion with patients/families to ensure palliative patients receive the best support possible from paramedics. The SPP Enrollment Form, as well as information on completing and submitting the form, is available on the EHS website: www.novascotia.ca/dhw/ehs/palliative-care.asp.

After the completed form is reviewed and approved by the EHS Provincial Medical Director, the patient is mailed a light blue SPP card with a unique identification number. Patients also receive a SPP magnet with their identification number, a copy of the care plan, as well as an information brochure. Should the patient’s condition and/or wishes change, providers may submit an update.

Following enrollment in the SPP, patients/families that require an EMS response, should call 9-1-1 and when transferred to Ambulance Dispatch, identify themselves or their loved one as a “Special Patient” and provide their identification number. Paramedics will be dispatched and will receive the information from the enrolment form on their computer tablet.

If paramedics arrive to provide assistance to a palliative care patient who has not enrolled in the SPP, they are still able to provide supports. However, it may take time to establish goals of care and some aspects of the support may not be possible. For example, if a regular care team is not clear, as it would be if the patient was registered in the SPP, it may not be appropriate to give a one-time dose of medication and leave the patient at home with no long-term solution. Patients receiving palliative care who are not registered with the SPP are assessed and managed on a case-by-case basis.

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The Program is currently being evaluated to improve understanding of the outcomes of this new model. The evaluation is being focused on impacts at three levels: paramedic, patient/family, and emergency health system. An interim analysis has revealed that EHS paramedics are able to keep patients with palliative goals of care at home 55% of the time. For patients who are able to stay home, the total time from when paramedics are dispatched on a call to when they clear the scene or turn over care to another provider is comparable to those who are transported to hospital.

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In Summary

- The Paramedics Providing Palliative Care at Home Program provides Nova Scotia paramedics with education and supports to respond to calls from patients receiving palliative care when their usual palliative care team is unavailable.
- Nova Scotians experiencing an acute palliative crisis can contact paramedics, 24/7, to receive support for pain and other symptoms (e.g., breathlessness, nausea, agitation, etc.) as well as psychosocial support.
- All patients receiving palliative care with comfort goals of care are eligible to receive care under the palliative Clinical Practice Guideline regardless of diagnosis.

Family Physicians Play an Important Role
Family physicians and other primary care providers can support the Paramedics Providing Palliative Care at Home Program and ensure their palliative patients receive care consistent with their wishes by enrolling their palliative patients in the SPP, (www.novascotia.ca/dhw/ehs/palliative-care.asp). This will enable patients to receive more specific palliative supports (e.g., expanded formulary) if this is part of their SPP care plan.

This will align a patient’s emergency care with the care outlined in their care plan, which they and their health team discussed and developed. This may increase the probability of the patient being able to remain at home.

For More Information

If you would like more information or would like to enroll a palliative patient in the EHS Special Patient Program, please visit www.novascotia.ca/dhw/ehs/palliative-care.asp.

If you would like more information and tips on serious illness conversations, please visit: https://www.ariadnelabs.org/areas-of-work/serious-illness-care/resources/.

If you have questions about the Paramedics Providing Palliative Care at Home Program, please email Marianne Arab at Marianne.arab@ccns.nshealth.ca or call her at 902-473-3825.

About the Authors

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In Practice is written specifically for primary care practitioners with information that we hope will make a difference in your cancer practice.

Please contact Christine Smith, Communications Manager, Program of Care for Cancer, by phone at 902.473.2932 or by email at christine.smith@ccns.nshealth.ca with comments or suggestions for future topics.