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## A Dream Becomes Reality

Like Martin Luther King Jr., the people of Pictou County had a dream – their dream to better serve those living with or dying from a life-threatening illness such as cancer. On January 12, 2006, with the official opening of a specially-designed, dedicated palliative care unit at the Aberdeen Hospital in New Glasgow, their dream was realized.

“This warm and inviting space is really a home away from home for patients and families who need short-term, intensive hospital care and we have our community to thank for it,” said Dr. Gerry Farrell, Medical Director, Palliative Care, Pictou County Health Authority. “Palliative care has had a visible presence in Pictou County for many years and we had tremendous buy-in and support from everyone we approached.”

This support was evident from the beginning. In January 2004, Dr. Farrell, who is passionate about palliative care, received instant approval from his senior leadership colleagues to explore renovating a large storage space in Aberdeen Hospital to accommodate a palliative care unit.

“It is so heartening to see a community believe so strongly in something like this unit,” said Ms. Sheila Scaravelli, Vice President, Patient Care Services, Pictou

County Health Authority. “The dream to have a custom-made palliative care unit comes from the value our community places on creating a compassionate environment for their loved ones.”

As a health provider, Dr. Farrell was familiar with competing priorities for scarce health dollars. He knew there was no way government funding would be available to renovate the space. Dr. Farrell also knew if district senior management and the Board of Directors approved the project, the people of Pictou County would rally behind the cause.

He was right. With full endorsement for the project from the board and senior leadership, Dr. Farrell requested revenue from hospital parking fees to start a fundraising campaign to build the unit. The Board of Pictou County Health Authority made the initial donation of \$300,000 from parking revenue and this was considered the public’s contribution. The next step was a visit to the Aberdeen Hospital Foundation / Aberdeen Hospital Trust which gave \$200,000. The Frank and Irene Sobey Memorial Trust contributed \$100,000 and the Sutherland Harris Memorial Hospital Foundation donated \$100,000. The funds enabled Dr. Farrell and his project team, including Ms. Beth Sobey, project co-chair, palliative care volunteer, and

Pictou County resident, and Mr. Dennis MacDonald, Palliative Care Consult Nurse and Program Coordinator for palliative care for Pictou County Health Authority, to engage an architect and proceed with the project.

The unit was designed from the ground up, limited only by the four outside walls. The project team knew what they didn’t want and they knew what was needed. They knew that 90 per cent of people want to die at home, so the goal was to make the unit as much like home as possible – welcoming and comfortable, with private bedrooms and space for families (continued next page)



L-R: Mr. Murray Hill, Board Chair, Pictou County Health Authority; Ms. Beth Sobey, Project Co-chair, Palliative Care Unit; Dr. Gerry Farrell, Medical Director, Palliative Care; and Mr. Dennis MacDonald, Palliative Care Consult Nurse, and Program Coordinator, Palliative Care.



*Top: Two of Dr. Farrell's photographs, which have been mounted on windows between patient rooms and the hospital corridor.*

*Bottom: Family room includes full service kitchen and comfortable lounge area.*

to gather. In researching the best design elements to consider, the team visited palliative care units at the Princess Margaret and Sunnybrook Hospitals in Toronto and the Saint John Regional Hospital in Saint John.

With this information in hand, coupled with a fundraising target of \$700,000 to complete the renovation, Dr. Farrell and his team developed a list of organizations to approach and scheduled a series of individual meetings to present their case.

"The response was phenomenal," said Dr. Farrell. "In three months we surpassed our goal and raised \$1.1 million. It was, by far, the easiest campaign I've ever been involved in."

In addition to generous cash donations from several private companies and banks in the county, the new palliative care unit received many in-kind donations. Pictou County Quilter's Guild donated beautiful, hand-made quilts for the six in-patient rooms. The county's local Prostate Cancer Support Association donated lovely, buttery soft, chocolate-brown leather sofas and easy chairs for the family room. "We feel fortunate to have been able to contribute to such a worthy, local project," said Mr. Darrell Rushton, Chairman, Pictou County Prostate Cancer Support Association.

Dr. Farrell, whose other interests include gardening and photography, donated photographs of flowers and butterflies, which were mounted on glass windows between the patient rooms and the hospital corridor. The photographs, while beautiful in their own right, enable natural light to flow into the rest of the hospital, while

ensuring privacy is maintained.

Great attention to detail and many thoughtful finishing touches resulted in a palliative care unit, more akin to a boutique hotel than a hospital. There are six, tastefully furnished, private patient bedrooms with wheelchair accessible ensuites and medical equipment discretely stored in wall cabinets. There is also a family room with a full service kitchen and lounge area — all the comforts of home with all the supports of a hospital.

The average length of stay for patients in this acute care unit is about two weeks. Some will stay a little longer and some will not require as long a stay. "The idea is that if someone gets into difficulty at home and needs some intensive support to get back on track, we get them in," said Mr. Dennis MacDonald. "We respond to their needs and get them back in their own home, in their own bed as soon as possible."

Pictou County has a great record when it comes to providing high quality palliative care, due in part to a long-term, strong working relationship between the health authority and the Victoria Order of Nursing. Last year, alone, almost 60 per cent of Pictou County's palliative care patients were able to remain at home until the end, an impressive fact considering that overall, 75 per cent of Canadians die in institutions. Pictou County Health Authority hopes that this new unit will provide the support necessary to enable even more of their patients to die at home.

For more information about Pictou County Health Authority's palliative care unit, please contact Dr. Gerry Farrell by email at [gerry.Farrell@pcha.nshealth.ca](mailto:gerry.Farrell@pcha.nshealth.ca) or by phone at 902-752-7600.





## Introducing...Oncology Curriculum Coordinators

They both began their careers as bedside nurses. Lisa, whose varied clinical experiences include roles in research and oncology, is completing a master's degree in nursing; Claudette has expertise in clinical teaching and is planning to pursue a doctorate degree in nursing with an oncology focus. Both are passionate about the need for lifelong learning regardless of one's chosen career. Meet Lisa Cicchelli and Claudette Taylor, the newest members of the *Cancer Care Nova Scotia* team.

As Oncology Curriculum Coordinators, Lisa and Claudette will act as champions for all *CCNS* health professional education programs, with an initial focus on Interprofessional Core Curriculum (ICC).

"I know that quality continuing education is one of the things that health professionals are looking for," said Lisa. "This includes health professionals in the broadest sense, not only physicians and nurses, but personal care workers, social workers, pharmacists, massage therapists and others. I want to reach out to this broad spectrum of health professionals and share the value of learning with them."

In this new role, Lisa and Claudette will assist districts in finding innovative ways to provide the curriculum to their staff. This may include acting as a facilitator in a district, developing specialized curriculum as need dictates and/or updating existing curriculum. Established in response to the need identified by districts for central support to assist in education delivery, the Oncology Curriculum Coordinators have the flexibility to customize their role based on the needs of a particular district.

"The two part-time positions enable *CCNS* to provide better support to districts across the province," said Anne Murray, Provincial Manager, Education and Patient

Navigation. "Lisa, who is situated in Halifax, will look after the districts from Colchester East Hants through to South West Health, and Claudette, who works out of the Cape Breton Cancer Centre in Sydney will provide support to Cape Breton District Health Authority, GASHA, Pictou County Health Authority and Cumberland Health Authority."

In addition to providing *CCNS* with the flexibility necessary to support all health districts, the part-time nature of the positions means that Lisa and Claudette can explore other interests – interests that will actually enhance their understanding of cancer education needs among health professionals. Lisa is working one day each week in the Cancer Centre in Halifax, which will help keep her clinical skills current. Claudette will continue in her role as Assistant Professor of Nursing for Cape Breton University / St. F.X. University Joint School of Nursing.

As part of their orientation, Lisa and Claudette are working closely with Cancer Patient Navigators and members of District Cancer Committees to learn about the districts and their education needs. They're meeting regularly with the Patient Navigation Community Liaison to learn the best ways to reach diverse communities and they are attending ICC modules that have already been scheduled to observe and provide feedback.

"It is only through education that we can bring the most current evidence into practice," said Claudette. "By doing so, we will improve the outcomes of people living with cancer. I am very excited about the role Lisa and I will play in working with districts to ensure their health professionals have the education supports necessary to ensure quality cancer care for all Nova Scotians."

For information on upcoming ICC modules and other continuing education programming, visit the *CCNS* website at [www.cancercare.ns.ca](http://www.cancercare.ns.ca)

L-R: Claudette Taylor  
and Lisa Cicchelli



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This is a newsletter for and about the people and issues affected by Nova Scotia's cancer care system. It is produced by *Cancer Care Nova Scotia*.

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If you want to be added to our mailing list, or if you want to regularly receive additional copies of this newsletter for your office or waiting room, please contact us at the above address with the number of newsletters you need.

The deadline for articles and story ideas for Volume VII, Issue Two is April 7, 2006.

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## Study Informs More Efficient Patient Care

**R E S E A R C H** Many cancer patients receive their chemotherapy intravenously. The most commonly used of intravenous devices, peripheral venous catheters, are generally inserted into the veins of the forearm or hand and require flushings to prevent complications including: line blockages because of blood clots or air bubbles, phlebitis and infection.

The accepted protocol for flushing catheters varies by institution in this province and elsewhere.

This can create challenges as organizations often work closely with one and other. It has implications for human resources, financial resources and may be an unnecessary inconvenience for patients. For these reasons, Dr. Sam Campbell and Ms. Stacy Ackroyd-Stolarz of the Department of Emergency Medicine, Dalhousie University together with, student researcher, Mr. Jan Trojanowski, conducted a retrospective study to determine the number of times a catheter should be flushed to ensure patient safety and optimal treatment outcome.

Prior to this study, the institutional policy for flushing catheters at the QEII Health Sciences Centre was to flush them three or four times a day. The Medical Day Unit, which is part of the QEII, and treats outpatients with various types of cancer, did not follow QEII protocol and flushed catheters every 24 hours. Anecdotally, they reported very few complications related to this decision. Like Medical Day Unit, Home Care Nova Scotia

recommended flushing every 24 hours.

Dr. Campbell and his team audited the charts of all eligible patients treated with IV therapy from both Home Care Nova Scotia and Medical Day Unit for the period between May 1, 2002 and June 30, 2003. Only patients with a treatment course of three or more days were included. The study included 111 catheters from 63 different patients. Eighty-nine per cent of these were flushed every 24 hours; 2.7 per cent were flushed every 12 hours; and 8 per cent were flushed every eight hours.

The findings indicated that patients whose catheter was flushed once during a 24-hour period did better than those whose catheters were flushed more often. As a result, the QEII Health Sciences Centre and others have changed their institutional policies to reflect the knowledge gained from this study.


"The new protocol of flushing catheters once in a 24-hour period is beneficial for all concerned," said Dr. Campbell. "From a provincial perspective, the consistency in policy is welcome.


From a human resource perspective, it saves health professionals' time and frees them to treat other patients. From an institutional perspective, it saves money and finally and perhaps most importantly, from the patient perspective, it means fewer trips to a hospital or emergency department."

This research project was funded through *Cancer Care Nova Scotia's* Norah Stephen Oncology Scholar Awards. Mr. Jan Trojanowski was an award recipient in the spring of 2005.



## News and Notes

 *CCNS' Cervical Cancer Prevention Program* recently sent personal specimen adequacy report cards to more than 900 Nova Scotia doctors who perform Pap tests. This is the second year for the report cards, which detail the specimen adequacy of all cervical cytology specimens submitted by a doctor during 2004. Similar to last year's results, the reports indicate an average satisfactory rate of 99 per cent. *CCNS* congratulates all Nova Scotia doctors who perform Pap tests for continuing to provide their patients with high quality screening for cervical cancer.

 All are invited to attend a free public screening of the *Sky Works* documentary, *Kids Care*, which

explores the issues and concerns of young people who have lost a loved one to cancer. The 77-minute production is currently on a cross-Canada tour. It will be presented in Halifax on Sunday, April 30 at 2 p.m. in the Royal Bank Theatre, Halifax Infirmary and on Monday, May 1 at 4 p.m. in Theatre B, Tupper Building, Dalhousie University.

Some of the young people who appear in the documentary will be present for the screenings and will serve as peer facilitators for a discussion following the presentation. For more information contact Leslie McLean by phone at 902-473-3162 or by email at [leslie.mclean@cdha.nshealth.ca](mailto:leslie.mclean@cdha.nshealth.ca)