AN EXPLORATION OF PALLIATIVE CARE PROVIDERS’ LIVED EXPERIENCES OF IMPLEMENTING THE GOLD STANDARDS FRAMEWORK IN ONCOLOGY CARE, FROM A HOSPITAL-BASED OUTPATIENT PALLIATIVE CARE SETTING

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BACKGROUND

- Palliative care is defined as specialized medical care that incorporates an interdisciplinary team of healthcare providers to provide a multidisciplinary approach of care for patients whose diseases are not responsive to curative treatment¹.
- The delivery of palliative care aims to improve quality of life and relieve symptoms. However, there are still common issues that are faced in relation to the provision of this care such as: effective pain management, proper communication, and coordination of care².
- The Gold Standards Framework (GSF) is a tool created to help enable healthcare providers in limiting these gaps throughout the delivery of palliative care. It is composed of 7 key tasks namely: Communication, Coordination, Control of Symptoms, Continuity of Care, Continued Learning, Carer Support and Care in the Dying Phase³.

OBJECTIVE

- The implementation of the GSF is currently instituted by Cancer Care Ontario (CCO). However, studies on implementing the GSF have been completed without the context of the Canadian healthcare system.
- This study purposed to explore the lived experiences of palliative care providers on what factors (facilitators and barriers) impact the implementation of the GSF from a hospital-based, outpatient care setting in Ontario.

METHODS

- As this is a qualitative study, semi-structured, in-depth interviews were conducted with 6 consenting participants (nurse and physicians) from Lakeridge Health Oshawa, a community-based hospital in Ontario.
- Participants’ responses were analyzed using Jonathan Smith’s Interpretative Phenomenological Analysis which consists of phenomenology, hermeneutics and idiography⁴.

RESULTS

- The conceptual underpinnings of the GSF were used as a guide for data analysis. 11 themes emerged from 6 of the 7 key tasks
- **Communication**
 - Inter-professional Communication
 - Establishing Patient Rapport
 - Advance Care Planning
- **Control of Symptoms**
 - Pain and Symptom Management
- **Continuity of Care**
 - Reliable Access
 - Electronic Maintenance of Patient Records
 - Inadequate Community Supports
- **Continued Learning**
 - Standardized Approach
 - Poor Educational Supports
- **Carer Support**
 - Active Family Involvement
- **Care in the Dying Phase**
 - Comfort Measures

DISCUSSION

- Engaging in inter-professional communication contributes to excellent standards of palliative care for patients, as providers have a deeper understanding on how to approach a patient’s goals and deliver comprehensive care⁵.
- Strong patient rapport conveys consistency, dependability, and competence in all areas of palliative care, leading to patient-focused outcomes. Advanced care planning enables patients to feel autonomous in making end-of-life care decisions².
- Limiting pain symptoms is a contributing factor to success around palliative care treatment. Assessment tools are an effective way to measure pain and solidify pain and symptom management¹.
- Enabling the provision of unlimited support fosters reliability. Addressing patient concerns at the appropriate time may help limit unnecessary visits to the emergency department, thereby propagating cost saving measures for the Canadian healthcare system².
- Incorporating more in-home supports for palliative patients with a preference to die at home may help patients experience a good death as aligned with their goals. Funding from governmental institutions would be beneficial in supporting this³.

POLICY IMPLICATIONS

- **Practice**
 - Enhance more community supports to help limit unnecessary emergency department visits.
- **Policy**
 - Ensure more hospital-based, outpatient palliative care services are available for patients
- **Education**
 - Raise more awareness of the GSF to be implemented by care providers
 - Provide more educational supports to help providers implement the GSF

CONCLUSION

- This study helped identified what factors impact the implementation of the GSF. Additionally, this study identified areas of strength as well as areas for improvement to establish sustainable palliative care in an outpatient setting.
- Implementing the GSF regularly can enable patients to receive an exceptional quality of life when desiring a holistic approach to palliative and end-of-life care.

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