Madawaska Valley Hospice Palliative Care

Rural Communities Have a Big Heart for Hospice Palliative Care

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No Potential Conflict of Interest to Declare

We do not currently have an affiliation (financial or otherwise) with a commercial entity.
Welcome to Renfrew County
Isolation

- Designated by the MOHLTC as very small, rural, and isolated.
- The only isolated Hospital in the Champlain LHIN and the only independent isolated Hospital in Southern Ont.
Challenges

- Remote area
- Depressed economic status
- Elderly population
Travel distances - family members may be far away.
Weather conditions
Home Care nurses and Support Workers are challenged by distance and road conditions.
Determines patient and family needs; asks for:
- Nursing visits
- Personal Support workers
- Physiotherapy
- Dietitian
- Social worker

Asks Bayshore or St Elizabeth to provide staff.
A Key to Success

Good COMMUNICATION reviewing all area HPC patients
Volunteer Visitation Program

We provide services in:

- Patient homes
- Long Term Care facility
- Seniors’ Residence
- Family members’ home
- Hospital
- Community Living residence
- Residential Hospice
Volunteer Training
The majority of our Volunteers respond to “at need” requests rather than weekly scheduling.
Touch Base

- Memorial Service
- Opportunity to share experiences
- Ongoing education
Ongoing Education Topics

- Therapeutic Touch
- Namaste Care
- Feeding
- Body Mechanics
- Compassion Fatigue
- Gentle Massage
- Mindfulness
Community Education

- Telehealth
- Training events
- Focus
  - Hospice Palliative Care
  - Advance Care Planning
  - The Grief Journey
MV Hospice Palliative Care
Annual Average

Volunteer hours: 4,016
Travel distance: 39,193 km
Equipment Loan
Cupboard & Lending Library
Bereavement Support

- Training
- Visit or call 4 times in first year
Butterfly
Release
“Hope for the Holidays”
What Makes Us Unique
Family are key members of the team supported by:

- Trained volunteers
- Nurses visit 1–4x daily
- Either Nurse or Personal Support Workers (PSW’s) are scheduled for night shifts
Family uses full bathroom with shower

Bedroom with 2 single beds for family
Full Livingroom and Kitchen
Why hospice apartment instead of dying at home:

- Neutral space for family members (blended and extended families)
- Spouse does not have to be host/hostess or housekeeper
- More physical space than might be at home or in hospital
- Encourages family to be part of the care team, which improves patient/family outcomes.

- Closer to medical access in our rural area
- Physician visits daily
Advantages for Community Care Providers

- Central location for service providers to travel
- Central location for delivery of supplies, medications and oxygen
- Two patients can be supported at the same location
- Supplies (wound care, incontinent care, medication administration) can be kept in a supply cupboard and prevent wastage
Seed Money = $35,000
from local community hospital
to develop and start volunteer visiting program
Community Champions
Low operating costs due to:

- lease from hospital includes hydro, water, sewer, heat, snow plowing, taxes
Service contracts with hospital for:
- maintenance
- IT services
- housekeeping
- laundry
* We do not hire 24/7 professional staff

We partner with community agencies for nursing, and Personal Support Workers.
Budget

Government Funding 85 %
Donations 15 %

Total Annual Budget = $155,000

NOTE – 80% of the construction costs or $400,000 was raised by the community

Distribution

Staffing (3 part time) 73%
Overhead 13%
Supplies 10%
Volunteer program 3%
Loan equip space 1%
In Summary:
“We cannot change the outcome, but we can affect the journey.”

Questions?
Please Complete the Evaluation Form