



STRENGTHENING A PALLIATIVE APPROACH IN LONG-TERM CARE (SPA-LTC) PROJECT

RESEARCH BRIEF

Family Care Conferences in Long-Term Care: Exploring Content and Processes in End-of-life Communication

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Canadian Frailty Network | Réseau canadien des soins aux personnes fragilisées

Known previously as Technology Evaluation in the Elderly Network, TVN

BACKGROUND

- End of life (EOL) communication in long-term care homes (LTC) is often inadequate and delayed, leaving residents dying with unknown preferences or goals of care
- Poor communication with staff contributes to families feeling unprepared, distressed, and unsatisfied with care
- Family Care Conferences (FCC) aim to increase structured, systematic communication around goals and plans for EOL

RESEARCH TOPIC

- The purpose of this sub-study is to examine FCC: a) content, and b) guiding processes such as documentation and multidisciplinary staff participation using mixed methods

METHODOLOGY

- As part of the 'Strengthening a Palliative Approach to Care' (SPA- LTC) project, FCCs were implemented in 4 LTC sites in Ontario, Canada
- 24 FCCs were held for residents with a Palliative Performance Scale of 40% (nearing death)
- Data was collected from conference forms, site- specific electronic chart documents and field notes
- Directed-content analysis of the data was informed by the Canadian Hospice Palliative Care Association's 'Square of Care' model

KEY FINDINGS

- FCCs addressed an average of 71% of content domains with physical and EOL care addressed most frequently, and loss/bereavement addressed the least
- Examination of processes supporting EOL communication found: i) advantages to using FCC forms vs. electronic charts, and ii) high level of multidisciplinary participation overall but limited participation of Personal Support Workers (PSWs) and physicians
- Description of content and FCC processes provides guidance to persons implementing FCCs

CONCLUSION

- Communication around EOL in LTC can be improved by using FCCs
- Recommendations to optimize communication include use of specific conference forms, increased bereavement discussion, further engagement of PSWs and Physicians