

New staffing model for an integrated specialist team approach to palliative care

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The Canadian Society of Palliative Care Physicians has developed a new staffing model for specialist palliative care teams that can deliver an optimal, integrated palliative care program. The model, based on three key interdependent roles—palliative care physician, palliative care resource nurse, and social workers—is described in detail in a Special Article published in *Journal of Palliative Medicine*.

The Special Article led by the Canadian Society of Palliative Care Physicians is entitled "<u>Staffing a Specialist Palliative Care Service, a</u> <u>Team-Based Approach: Expert Consensus White Paper.</u>" The article was coauthored by Dr. J. David Henderson and Stephanie Connidis, MD, Dalhousie University (Halifax), Anne Boyle, MD and David Lysecki, MD, McMaster University (Hamilton), Leonie Herx, MD, Ph.D. (Queen's University (Kingston), Aleco Alexiadis, MD and Doris Barwich, MD, University of British Columbia (Vancouver), and Aynharan Sinnarajah, MD, MPH, University of Calgary, Canada.

The broader interprofessional team, in which <u>primary care physicians</u>, nurses, and <u>social workers</u> play a central role, will also include therapists, pharmacists, home healthcare workers, and others. All members of the team are interdependent and need to work collaboratively for this approach to be successful. The article presents a detailed description of the model, the assumptions underlying the model, staffing requirements, and the clinical and non-clinical responsibilities of the team.

Charles F. von Gunten, MD, Ph.D., Editor-in-Chief of *Journal of Palliative Medicine* and Vice President, Medical Affairs, Hospice and Palliative Medicine for the OhioHealth system, states: "Palliative care is a team sport. It's important to develop standards so palliative care isn't watered down and the impact diminished."

More information: John David Henderson et al, Staffing a Specialist Palliative Care Service, a Team-Based Approach: Expert Consensus



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