White Paper: Northwest Life Passages - Improving Care for Patients with Serious Illness in Whatcom County

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Northwest Life Passages

Improving Care for Patients with Serious Illness in Whatcom County

Prepared for stakeholder review by Bree Johnston, MD, Chris Phillips, and the WAHA Outpatient Palliative Care Workgroup which includes Berdi Safford, MD; Meg Jacobson, MD; Heather Flaherty, MBA; Larry Thompson; Mary Ann Percy, MA; Liz Jones, MPH

Summary

Northwest Life Passages (NWLP) is a new collaborative service that aims to address shortcomings in care and improve services for people with serious illness and their families. The proposal is to operationally couple the outpatient palliative care services already provided by PeaceHealth and Family Care Network (FCN) with community-based support services being developed by the Whatcom Alliance for Health Advancement (WAHA). It is further being proposed that PeaceHealth and WAHA pursue a collaborative fundraising strategy that calls for WAHA to focus on the development of the community-based services and PeaceHealth Foundation to pursue support for the expansion of clinical services.

Background

Our medical system often does a poor job of providing holistic, person-centered care to patients who experience serious illness and the caregivers on whom they rely. Hospice programs provide high quality, compassionate care for a significant proportion of patients at the end of life, but many people do not qualify for hospice services because they do not have a prognosis of six months or less and/or they want to continue receiving life-prolonging treatments. For many, the last few years of life consist of bouncing back and forth among hospital, nursing home, emergency room, home care services, and clinics. For others who are home bound, care is very limited or not available at all. As a result, many patients with serious illness and their families feel isolated, overwhelmed, lack a clear vision of what is to come, and do not know where to turn.

Northwest Life Passages is designed to address many of these issues by providing a holistic, person-centered service for patients with serious illness and their families that will supplement usual care. It is the result of two years of community brainstorming and planning that was instigated by faculty from Western Washington University through the Palliative Care Initiative (PCI) and funded through a generous donation from the RiverStyx Foundation. As a result of this process, WAHA convened an End of Life Task Force that included representatives from PeaceHealth, Whatcom Hospice, Western Washington University, Family Care Network, and other interested community members. The Task Force released the “Blueprint for Community Excellence at End of Life” in December of 2014. The Blueprint outlines a set of recommendations and calls for the development of a community-based palliative care program along the lines being proposed.
Principles Guiding Program Development

- NWLP services will be available to all Whatcom County residents who have serious illness, with priority being given to patients with the greatest clinical need.
- Services will be oriented toward supporting both the patient and the patient’s family/caregiver.
- The majority of services will be provided to patients where they live in order to maximize access for all patients and to provide as patient-centered a service as possible.
- The service will be interdisciplinary in nature and include care coordination, volunteer support services, and clinical care. The latter will be provided by either a nurse practitioner or physician.
- NWLP will not duplicate existing services in a patient’s life but serve as added support and fill in gaps to support the patient’s physical, emotional, psychological, and spiritual health.
- The patient’s primary care provider will maintain principal responsibility for management of the patient’s medical care.
- The care team will seek out and communicate with others involved in a patient’s care, including the primary care physician, specialists, case managers, alternative and complementary practitioners, and social service providers.
- The primary roles for NWLP volunteers will be companionship, respite, and emotional support. Volunteer services will expand from there as needed and be supplemented by chore services.
- NWLP will emphasize Advance Care Planning as a key component of the service package offered to every patient.
- Key outcome metrics related to the Triple Aim will be tracked, including patient and family/caregiver report of satisfaction with experience of care, hospice enrollment, advance directive completion, POLST completion, number and length of hospitalizations in the last year of life, number of emergency department visits in the last year of life, quality of life, and place of death.
- Longer term sustainability will be tied to meeting quality and cost metrics which will be used to engage healthcare payers.

Structure

A Memorandum of Understanding with outlined conditions of participation will be completed by participating organizations. The participating parties, while administratively separate, will function as a cross-agency interdisciplinary team. WAHA will provide infrastructure and staff, contingent upon funding availability. PeaceHealth and FCN will contribute providers to the program. Clinical providers will, however, operate under the auspices of their respective organizations and bill for services separately.