

RESEARCH ON THE RUN

End of Life Care

Co-design of hospice outreach by digital means

A group of 5 exciting and related projects emerged from a co-design process with a rural Ontario residential hospice that wanted to extend its reach into the community using digital technologies in a variety of ways. The co-design process continues within each of the 5 projects.

Key learnings

A rural residential hospice had a vision to extend its services to a broader region, and had some ideas on how to do achieve that vision.

Partnering with the hospice, Saint Elizabeth led a co-design process centred on the patient and family experience of services involved direct health and social care providers, volunteers, bereaved family members, and hospice administrators. A set of 5 projects emerged to meet the hospice's vision in innovative ways. Co-design processes are underway for each of the 5 projects to develop them further for widespread sharing and scaling.

Project overview

Saint Elizabeth has a broad commitment to improving end of life care in Canada. Since 2015, Saint Elizabeth has invested \$4 million to support local hospice care, education, public awareness and research. As part of that effort, Saint Elizabeth partnered with Hospice Georgian Triangle to develop a vision of wider accessibility for end of life care, with the goal of creating a model that could be shared and scaled nationally.

Hospice Georgian Triangle is a 6-bed hospice in Collingwood, Ontario. The Hospice board, management and volunteers want to extend the Hospice’s services into the community, through digital and other means, so that more rural patients and families might benefit from what the Hospice could offer when they choose a home death. The Hospice also aspires to realize the challenge of the innovative approach to palliative care in the Quality End of Life Care Coalition’s *The Way Forward*:

An integrated palliative approach to care focuses on meeting a person’s and family’s full range of needs – physical, psychosocial and spiritual – at all stages of frailty or chronic illness, not just at the end of life.... It sees hospice palliative care as less of a discrete service offered to dying persons when treatment is no longer effective and more of a simultaneous or integrated approach to care that can enhance their quality of life throughout the course of their illness or the process of aging.

What did we do?

Saint Elizabeth’s Research Centre introduced its co-design methodology, including both in-person and online engagements, to guide the process of moving from the vision to concrete ideas and then to action.



Looking for Your Opinion on Possible New Services from Hospice Georgian Triangle (home)

The Catalyst

Peter has had a cough that hasn't gone away and is experiencing shortness of breath. His doctor is worried that the symptoms have not changed and refers him to the Simcoe Muskoka Regional Cancer Centre in Barrie.

Click to listen to Rebecca.

Do you think outreach services offered by the hospice could help here?

Yes

No

If you answered yes, please explain what that role might be.

Are there other organizations you would think should be involved?

What did we find?

Twenty ideas emerged from the co-design process, and they were consolidated into projects. The 5 projects include the following: (1) developing a name for services to be offered to community members with life-limiting disease diagnoses before they are ready to access “palliative” or “hospice” services; (2) defining that set of services; (3) developing a communications tool to enable patients and family caregivers and healthcare workers to share information about the journey toward death; and, (4) developing an online ‘end-of-life experience’ to help people understand the kinds of choices and decisions they may encounter as they journey toward death; and (5) developing a Home Self-Care Kit for patients and their caregivers to use in their homes, to include resources and plans to respond to concerns about the palliative approach, including but beyond pain management.

Innovative approach:

The Saint Elizabeth Co-Design approach brings together the co-design approaches used in healthcare, and the service design approach from the design world. While these methodologies are commonly thought to be similar and the names interchangeably used, they are distinct, and each has its strengths. The Saint Elizabeth approach emphasizes collaborative work by all users/participants in a process or service in all phases, including problem identification, collaborative brainstorming with an emphasis on empathy mapping, and ideation for improvement and innovation. The process continues with prototyping, again involving all users, and measurement of outcomes.

IMPACT: How are we moving Knowledge to Action

The co-design process has continued to evolve each of the projects and bring them to reality.



About our researchers

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About the Saint Elizabeth Research Centre

At the Saint Elizabeth Research Centre, we study the needs of people, their caregivers, and health care providers to develop innovative solutions to improve health and care experiences across the continuum/ more effective approaches to care. The Research Centre has four areas of focus: integrated care and transitions, end of life care, caregivers and person and family centred care. Our goal is to improve people’s health and care. We work on innovative solutions for tough problems.

We see possibilities everywhere.