

PHC Facility Engagement Final Report

Project Name	PHC-0043 – Redevelopment: Learning from Foreign Palliative Care Team
Date of Report	July 30, 2018
Key Milestones Achieved	<p>Discussion with Medical Director and Tour of Bradbury Hospice in Hong Kong was a success.</p> <p>The Mission of Bradbury Hospice is to care for patients with incurable disease and serve as a teaching center for palliative medicine for health care providers.</p> <p>Our review covered different aspects of palliative care delivery, organization and the local culture.</p>
Key Accomplishments	As per PHC PASS Directors request for the top 10 key lessons learned, see lessons learned box below .
Key Issues/Challenges	Some of the lessons learned might be challenging for PHC to realize. This includes the availability of full-time medical residents in pain management, medical, surgical, anesthesia (R2s and R3s).
Budget Update	<p>\$800 (the approved fund for this project was placed under <i>Facility Tours - Conference Extender</i> in the Facility Engagement Fund). This amount was the approved budget for this project.</p> <p>Detail:</p> <ul style="list-style-type: none"> - 4 hours of sessional time = \$530.28 - Expenses = \$269.72
*Project Results	See top 10 Key Lessons learned in the lessons learned box below .
*Unexpected Outcomes	N/A
*Lessons Learned	<ol style="list-style-type: none"> 1. Bradbury Hospice is located within walking distance to the academic hospital. The new SPH Hospital should consider having a stand-alone hospice within walking distance to the new SPH. 2. The proximity of hospice to the new SPH would facilitate

	<p>research (qualitative and quantitative) and teaching collaboration with world-class palliative care centers.</p> <ol style="list-style-type: none"> 3. A Spiritual room could be provided for patients who would like to use it. 4. Availability of an outdoor garden with comfortable benches and mature trees. Patients and their families could have the option of planting and tending their own plants. 5. Rigid aluminum rails/tracks could be mounted on the ceilings to allow patients to be more easily transferred from bed to the washroom, bathing and other areas. 6. Bradbury has their own travelling/outreach team that improves the efficiency and quality of admission. This should really be a key goal of SPH Palliative Care and would fit nicely with our new out-patient clinic. 7. In addition to the above, a small office in the new SPH building could bring collaboration and linkages with the community VCH Team. 8. Administration of nasogastric tubes are permitted in Bradbury Hospice. This could be considered for PHC as it expands the types of treatments, including symptom management. 9. We should re-consider the criteria for admission: DNR3. 10. Average length of stay at Bradbury is 12 days. – this could be one of the additional aspects to consider for SPH Redevelopment Plan.
*Recommendations for improvement (to inform future projects and strategic decision-making)	The top 10 lessons learned above are the recommendations for future strategic decision-making at SPH.
*Project Costs	\$ 800

****For Final Report Only***