



# Palliative & End of Life Care

## IH North Palliative Physician Group

**TOOL-KIT | 2025**

A guide to help you access the resources that you need to support your palliative patient.

*We are here to help.*

**SharedCare**   
Partners for Patients

### Acknowledgements

A special thank you to Dr. Paul Farrell, Dr. Janet Kusler, and the IH North Palliative Physician Group, for their leadership and input on the development of this toolkit.

**Sponsored by:** Thompson Region Division of Family Practice & the Shared Care Committee

# TABLE OF CONTENTS

3

## Introduction



- Introduction to Palliative & End-of-Life Care Toolkit

4

## Map



- Geographic area covered by the IH North Palliative Physician Group

5

## Section 1

### Clinical Tools



- Supportive & Palliative Care Indicators Tool
- Palliative Performance Scale
- Serious Illness Conversations
- Advance Care Planning
- Medical Assistance in Dying

7

## Section 2

### Services & Supports



- BC Palliative Care Benefits
- Home & Community Care - Interior Health
- Advance Care Planning Considerations
- Hospice
- IH North Palliative Physician Group
- Pain & Symptom Management Clinic
- Palliative Care Outpatient Clinic
- IH MAiD Coordination Centre

11

## Section 3

### Professional Development Opportunities



- Learning Essential Approaches to Palliative Care (LEAP)
- Serious Illness Conversation Guide (SICG)
- Canadian Association of MAiD Assessors and Providers (CAMAP)

12

## Section 4

### Provider Resources



- Website Resources
- Clinical Tools

13

## Section 5

### Patient & Family Resources



- BC Centre for Palliative Care
- Canadian Virtual Hospice
- BC Ministry of Health
- BC Centre for Palliative Care: Advance Care Planning
- Marjorie Willoughby Snowden Memorial Hospice Home
- MAiD

14

## Section 6

### Forms



- Palliative Package
- Additional Forms

15

## Section 7

### Contacts



- IH North Palliative Physician On Call
- Interior Health
- Hospice



# INTRODUCTION

## Palliative & End-of-Life Care

This toolkit has been developed by the IH North Palliative Care Physician group for practicing clinicians in Interior North. Advancing illnesses can bring new symptoms, increase clinic visits, treatments, and acute care stays. When patients receive good quality palliative support, life expectancy may be extended as symptoms are addressed and medical management is maximized, reducing ER visits and hospital admissions.

This toolkit is intended to be a guide to help you access the resources that you need to help your palliative patient.

### **Intended Users:**

- Primary Care Providers (FP/NP) in IH North
- Specialist Physicians
- Allied Health Care Practitioners
- Oncologists
- ER and Urgent Care Physicians
- Hospitalists
- Hospice Allied Health Care Practitioners
- Rural palliative facilities
- Others involved in Palliative Care
- Palliative Paramedics

# MAP | Geographical Area



Back to TOC



The following map illustrates the geographic area covered by the IH North Palliative Physician Group for telephone consultations to primary care providers.



**PALLIATIVE CARE SUPPORT  
FOR PHYSICIANS/  
NURSE PRACTITIONERS**

## IH NORTH

For the physician on call, search  
**MBMD IH NORTH - PALLIATIVE  
CARE TELEPHONE ADVICE**  
OR Contact through Royal Inland Hospital  
switchboard: (250) 374-5111

IH North

## IH SOUTH

For the physician on call, search  
**MBMD IH SOUTH - PALLIATIVE  
CARE TELEPHONE ADVICE**  
OR Contact through Kelowna General  
Hospital switchboard: (250) 862-4300

IH South

**OTHER SUPPORTS:**

**Provincial Palliative Care Consultation Line: 1-877-711-5757 (24/7)**



## When is it appropriate to designate my patient as palliative?

Ask yourself the “surprise” question. “Would I be surprised if this person was to die in the next one to two years?”

### 1.1 | Supportive and Palliative Care Indicators Tool

The Supportive and Palliative Care Indicators Tool (SPCIT) is a best practice tool intended to guide clinicians in assessing whether a patient is at risk for dying or health deterioration due to a life-limiting illness. The assessment often initiates serious illness conversations and advanced care planning.

[Supportive and Palliative Care Indicators Tool](#)

### 1.2 | Palliative Performance Scale

The Palliative Performance Scale is a tool to complement professional judgement, intended to assess a patient's palliative care stage based on performance of a number of variables such as ambulation, activity & evidence of disease, self-care, intake, and conscious level.

[Palliative Performance Scale](#)

### 1.3 | Serious Illness Conversations

Serious illness conversations are important. When a person's life expectancy is six to 12 months, then it is time for that person to plan for palliative care services and end-of-life. Some people live with advancing illnesses for many years, and serious illness conversations help discuss a person's current condition and what the future holds.

The Serious Illness Conversation Guide (SICG) is intended to help navigate complex discussions in clinical practice and is considered part of advance care planning. It promotes earlier, more, and better conversations with patients living with a life-limiting illness. Providers are not only encouraged to utilize the SICG but to complete the CME-accredited workshop to support the integration of the guide into clinical practice.

[Serious Illness Conversations: BC Centre for Palliative Care](#)

[Serious Illness Conversation Guide Documentation Template](#)

### 1.4 | Advance Care Planning

When your patient has a life-limiting illness it is important to prompt reflection, communication, and documentation of one's beliefs, values, and wishes concerning personal and health care decisions should they become unable to communicate on their own as they navigate end-of-life and palliative care. Depending on individual wishes, several forms are available to finalize/legalize the plan. Further Advance Care Planning information and forms can be found at the links below.

[Interior Health](#)

[BC Centre for Palliative Care](#)

[BC Ministry of Health Advance Care Planning Guide](#)



## 1.5 | Medical Assistance in Dying

It is important that health care providers feel supported to increase their comfort, knowledge and understanding regarding end of life care including medical assistance in dying (MAiD).

*Any health care provider (HCP) may share information in relation to all end-of-life care options, including MAiD, in accordance with their respective regulatory body. HCPs must not discuss MAiD with a person with the aim of inducing, persuading, or convincing the person to request MAiD. Physicians and Nurse Practitioners have a professional obligation to initiate a discussion about MAiD if a patient might be eligible for MAiD.*



Confident Conversations Script: [Including MAiD in Palliative and End of Life Care Conversations](#)

### Building MAiD Community and Support Case Review Rounds

A regular meeting of MAiD professionals who support clinicians particularly around Track 2 cases. You are welcome to present a case or listen in.

Contact [✉ MAiD@interiorhealth.ca](mailto:MAiD@interiorhealth.ca) or Dr. Sarah Broder for a link and more information.





### I designated my patient as palliative... now what?

Primary care providers are expected to initiate the palliative care package, and it is hoped they will continue to care for the patient until death.

## 2.1 | British Columbia Palliative Care Benefits

Apply for Palliative Care Benefits. Palliative Care Benefits provide financial support for drugs and medical equipment and supplies for patients within 6-12 months of death.



**Note:** Requires submission annually.

For more information review the [Palliative Patient Info](#)

1. Complete the British Columbia [Palliative Care Benefits Registration Form](#).
2. Send to appropriate recipients listed on the form.

## 2.2 | Home and Community Care – Interior Health

Services provided:

- Respite & Family Caregiver Support
- Occupational Therapy, Physiotherapy, Respiratory Therapy, and Social Work
- Emotional & Spiritual Support
- Nursing Assessment and Symptom Management
- Teaching
- Home Support

Complete the [Home Health Referral Form](#).

**Phone:** 1-800-707-8550

**Fax:** 1-866-250-7952



**Note:** Referrals should be made earlier and not when in crisis.



## 2.3 | Advance Care Planning Considerations

Determine the patient and family wishes for palliative care and preferred location of death.

### Chosen location of Death

#### Expected Death In the Home

The Notification of Expected Death in the Home Form requires a signature from the primary care provider and submission to the funeral home. In absence of this form, the funeral home will not pick up the body and it becomes a coroner's death.

 [Expected Death In the Home Form](#)

 [Resource: Joint Protocol for Expected/Planned Home Deaths in British Columbia](#)



**Note:** The EDITH form requires a signature every three months.

### Hospice

Requires primary care provider referral and patient/caregiver consent.

Admission eligibility is based on the need for:

1. End of life care
2. Respite
3. Pain and symptom management

## 2.4 | Hospice

There are 20 hospice beds in Kamloops located in three different facilities. Similar to long term care, there is a per diem associated with hospice admission and temporary rate reductions are available to eligible clients.

**Services provided:** All three facilities offer admissions for end-of-life care, pain and symptom management until managed and respite care.

### Primary Locations:



[Marjorie Willoughby Snowden Memorial Hospice Home](#) 

12 hospice beds



[Trinity Care Hospice at Overlander](#) 

4 hospice beds



[Royal Inland Hospital](#) 

4 hospice beds



## 2.5 | IH North Palliative Physician Group

The IH North Palliative Physician Group is a team of physicians with a special interest and additional training and expertise in Palliative Care. Based in Kamloops, the team of eight physicians provides consultative services to primary care providers for palliative patients living in IH North. The group provides 24/7 call coverage. Palliative care consults and referrals are encouraged at anytime where the primary care provider needs assistance.

**Contact us:** Call Royal Inland Hospital Switch Board and ask to speak to the Palliative Care Physician on-call.

 250-374-5111.

### Services Provided:



#### Palliative Consultations

Available to all health care providers who may require assistance with the palliative process of their patients. Consults can be delivered in person in all settings including Hospice, Hospital, Long Term Care, Community, and in office, or virtual encounters as appropriate and at the request of the primary care provider.

To ensure patients are appropriate for Hospice, and to allow for the opportunity to triage based on urgency if there are more patients waiting than there are available beds, the referring provider is requested to contact the palliative physician group for a consultation ahead of a hospice admission.



#### Palliative Physician

**Acceptance Criteria:** This service can be accessed if any of the following criteria are fulfilled.

- Patient does not have a longitudinal primary care provider and is to be transferred to hospice. The referring provider (Hospitalist, Specialist, Oncologist, or other) must request a formal transfer of care by telephone with the on-call palliative care physician, and that physician has accepted the patient.
- Patient who requires admission to hospice and has a longitudinal primary care provider BUT they reside in a community that makes it impossible for them to provide care in a facility in Kamloops and the primary care provider has performed a formal transfer of care by telephone with the on call palliative care physician, and that physician has accepted the patient.
- Exceptional Circumstances – the referring provider has performed a formal transfer of care by telephone with the on call palliative care physician and that physician has accepted the patient.



#### Interdisciplinary Conferences

- With other primary care providers.
- To provide consultative advice to the primary care provider without the need to see or talk with the patient.



## 2.6 | Pain and Symptom Management Clinic

The purpose of the clinic is to help with the symptom burden related to a patient's advanced, progressive, life-limiting illness, but do not necessarily have to be palliative. The goal is to effectively stabilize their pain and symptoms and then have patients return to their primary care provider if they have one. The clinic will continue to follow patients that do not have a primary care provider. Early referrals are encouraged for all unattached cancer patients, even without symptoms, with the goal of increasing awareness of the services should the patient need them in the future.



**Note:** This clinic is separate from the chronic pain clinic and the outpatient palliative care clinic at Marjorie Willoughby Snowden Memorial Hospice Home.

### Clinic Information

Kamloops Primary Care Clinic  
#36-450 Lansdown Street  
Kamloops, BC  
V2C 1Y3

 **Phone:** 250-851-7954

 **Fax:** 250-581-7965

 **Schedule:** Clinic days are Monday and Friday morning or afternoons.

### Referrals:

**Accepted by:** Fax

**Accepted from:** primary care providers, specialists and Interior Health Home and Community Care.

**Additional details:** We accept referrals from primary care providers that are struggling to get a particular symptom under control. We endeavour to see all urgent consults within 2-4 days and non-urgent consults within 1-2 weeks.

**Referral form:** [Pain and Symptom Management Referral Form](#)  must be completed.

## 2.7 | Palliative Care Outpatient Clinic

The clinic is located at Marjorie Willoughby Snowden Memorial Hospice Home in Kamloops and was designed for the IH North Palliative Physician Group to provide in-person interviews and examinations of palliative care patients possibly needing intervention. The clinic is situated within Hospice to:

1. Provide more ready access for Hospice staff to palliative care physicians on site.
2. Increase patients' comfort in accessing hospice services.
3. Improve the patient and family experience associated with their palliative care journey.
4. Enhance supports for the physician team to better support palliative patients in a coordinated, and efficient way.

If you feel your patient would benefit from a consult within this space, please contact the on-call physician for the IH North Palliative Physician group.

## 2.8 | IH MAiD Coordination Centre

Interior Health's MAiD Coordination Centre is available to answer any questions and to assist with managing the coordination of requests for medical assistance in dying. Please contact:

 **Address:** H2, 505 Doyle Avenue, Kelowna, BC, V1Y 0C5

 **Email:** MAiD@interiorhealth.ca

 **Phone:** 250-469-7073 (Kelowna area) / 1-844-469-7073 (Toll Free)

 **Fax:** 250-469-7073

 **Office Hours:** 8am - 4pm (Pacific) Voice mail for afterhours

## SECTION 3 | Professional Development Opportunities



**Are you uncomfortable with managing end-of-life care?**  
*Consider an education course, either at basic or advanced levels.*

### 3.1 | Learning Essential Approaches to Palliative Care (LEAP)

LEAP courses equip primary care providers with the knowledge, attitudes, and skills to help provide timely, effective care to palliative patients and their families.

To find out more and to [register](#). 

**Contact Pallium Canada for questions:**

 **Email:** [info@pallium.ca](mailto:info@pallium.ca)

### 3.2 | Serious Illness Conversation Guide (SICG)

The Serious Illness Conversation Guide (SICG) is intended to help navigate complex discussions in clinical practice; it promotes earlier, more, and better conversations with patients living with a life-limiting illness. Providers are encouraged to complete the CME-accredited workshop to support the integration of the guide into clinical practice.

**Contact BC Center for Palliative Care for training opportunities:**

 **Email:** [office@bc-cpc.ca](mailto:office@bc-cpc.ca)

### 3.3 | Canadian Association of MAiD Assessors and Providers (CAMAP)

CAMAP has launched the Canadian MAiD Curriculum (CMC), the first comprehensive, nationally accredited, evidence-based program designed to support MAiD practice in Canada. This modular course provides education for new practitioners, enhances the skills of those already providing MAiD, and promotes a consistent standard of care by supporting providers across the country.

 [To find out more and to register.](#)

## Website Resources

### [BC Center for Palliative Care](#)

A comprehensive palliative care focused website for health care professionals, patients and families. Resources included but not limited to advanced care planning, symptom management, serious illness conversation resources, publications and educational resources.

### [Interior Health Website](#)

Access commonly used palliative care related forms, pre-printed orders, toolkits, goals of care and advance care planning, and patient and family education resources.

IH has pre-printed orders available for the following:

- Adult Palliative Symptom Management - Hospital based
- Adult Palliative Symptom Management - Community Hospice Bed and Long-term Care
- Adult Palliative Sedation Therapy
- Adult Palliative Just in Case Symptom Management Kit Prescription Form
- Palliative Symptom Management PPOs 6 month review [Webinar](#) 

### [Canadian Virtual Hospice](#)

A comprehensive website for health care providers, patients with advanced illness or near end-of-life, and for their families. Hosts resources around key topics such as emotional and spiritual health, symptom and health concerns, financial assistance and access to professional advice.

 [Membership in the Palliative Section of Doctors of BC for Physicians](#)

 [Joint Protocol for Expected/Planned Home Deaths in BC](#)

 [BC Society of Palliative Care](#)

 [Canadian Society of Palliative Care](#)

### Clinical Tools

 [Supportive and Palliative Care Indicators Tool](#)

 [Palliative Performance Scale](#)

 [Serious Illness Conversations: BC Centre for Palliative Care](#)

 [Serious Illness Conversation Guide](#)

 [Interior Health](#)

 [BC Ministry of Health Advance Care Planning Guide](#)

 [Confident Conversations Script: Including MAiD in Palliative and End of Life Care Conversations](#)

## [BC Centre for Palliative Care](#)

A comprehensive palliative care focused website for health care professionals, patients and families. Resources included but not limited to advanced care planning, symptom management, serious illness conversation resources, publications and educational resources.

## [BC Ministry of Health](#)

A patient & family resource to prepare for end-of-life planning.

## [Marjory Willoughby Snowden Memorial Hospice Home](#)

- Caregiver Support Group
- Virtual Caregiver Workshop Series
- Advance Care Planning
- Palliative Information Services
- Grief Support Services
  - **Bereaved Parent Group:** For any parents who have experienced the loss of a child
  - **Children & Family Grief Group:** Children aged 6 – 12
  - **Youth Grief Group:** Youth Ages 13 – 17
  - **Good Mourning Coffee Club Men's Group:** For men who have experienced the death of a spouse or partner.
  - **A Grieving Heart – Grief Talk for Women:** For women who have experienced the death of a spouse or a partner.
-  [Supporting Children with Grief:](#) Helpful Hints on Supporting Children with Grief and Loss.

## [Canadian Virtual Hospice](#)

A comprehensive website for health care providers, patients with advanced illness or near end-of-life, and for their families. Hosts resources around key topics such as emotional and spiritual health, symptom and health concerns, financial assistance and access to professional advice.

## [BC Centre for Palliative Care: Advance Care Planning](#)

### MAiD Resources

#### [Bridge C14](#)

Volunteer/charitable organization that offers support groups for patients and families.

#### [MAiD Family Support](#)

Volunteer/charitable organization that offers support for families and caregivers.

#### [MAiDHouse](#)

Freestanding facilities in Toronto and Victoria that support MAiD.

#### [End of Life Doula Association of Canada](#)

People who can provide hands on care and support around the actual end of life (analogy of midwife in birthing); private pay.

#### [Willow End of Life Education and Planning](#)

Offers workshops to facilitate planning for end of life; private pay.

#### [MAiD: Information for Individuals and Loved Ones](#)

#### [A Shared Journey in MAiD](#)

## Palliative Package

The following forms comprise the palliative package:

- 
-  [Palliative Care Benefits](#)  
*\* Requires submission annually.*
  -  [Home Health Referral](#)
  -  [Interior Health Community Hospice Bed Access Referral](#)
  -  [Medical Orders For Scope of Treatment \(MOST\)](#)
  -  [Do Not Resuscitate \(DNR\)](#)
  -  [Expected Death in the Home \(EDITH\)](#)  
*\* Expected Death in the Home form requires renewal every 90 days.*

## Additional Forms

-  [Pain and Symptom Management Clinic Referral Form](#)



## IH North Palliative Physician On Call

### RIH Switchboard:

 **Phone:** 250-374-5111

## Interior Health

### Interior Health Home and Community Care Central Intake:

 **Phone:** 1-800-707-8550

 **Fax:** 1-866-250-7952

### Pain and Symptom Management Clinic:

 **Phone:** 250-851-7954

 **Fax:** 250-581-7965

### MAiD Coordination Centre

 **Phone:** 250-469-7073 (Kelowna area)

1-844-469-7073 (Toll Free)

 **Fax:** 250-469-7073

 **Email:** [MAiD@interiorhealth.ca](mailto:MAiD@interiorhealth.ca)

## Hospice

### Marjorie Willoughby Snowden Memorial Hospice Home:

 **Phone:** 250-372-1336

### Trinity

 **Phone:** 250-554-6036