As outlined in the Ontario Renal Plan II, the goal of the ORN Palliative Care portfolio is to establish an integrated process for early identification and management of people with chronic kidney disease (CKD) who would benefit from palliative care.

- Of 5,507 Ontario patients who died on dialysis from 2010 – 2012, 59% used the emergency care unit in the last 30 days of life.
- Advance Care Planning and Goals of Care (GOC) conversations were a key recommendation outlined in the ORN Palliative Care Report and in alignment with provincial direction.
- A current state analysis of the 26 Regional Renal Programs processes indicated a system gap for Goals of Care conversations.
- Treatment decisions should align with a patient’s wishes, values, and beliefs, based on their current health condition, and the healthcare team should be aware of and able to follow patient preferences.

### Person-Centred Decision-Making Continuum

In Ontario, Advance Care Planning, Goals of Care, and Health Care Consent are situated along a continuum that comprise the person-centered decision-making process:

- **A person’s values, wishes, beliefs and goals for their care**
- **FUTURE CARE**
  - Goals of Care Discussion
  - Treatment Decisions & Informed Consent
- **CURRENT CARE**
  - Treatment decisions to be made

### Results

- One nephrologist champion and one multidisciplinary champion identified in each Regional Renal Program
- Over 400 renal healthcare providers trained in LEAP Renal across 24 of 26 Regional Renal Programs in fiscal year 2016 – 2017; Overall knowledge quiz results increased by 6 points from pre- to post-survey
- A standard approach to the provincial collection for GOC conversations data was developed
- Over 300 multidisciplinary healthcare providers trained on GOC and Treatment Decisions & Informed Consent assessments
- A data submission tool developed to capture patient’s GOC and Treatment Decisions & Informed Consent assessments as part of the PCDM initiative

### Methods

- Identified Local Clinical Champions for palliative care in each Regional Renal Program
- Collaborated with Pallium Canada to develop and deliver Learning Essential Approaches to Palliative Care (LEAP) Renal
- Developed education resources on GOC conversations
- Implemented the PCDM initiative to ensure all CKD patients will have had a GOC conversation by 2019, with annual re-assessment
- Collected GOC conversation data

### Education Materials Developed

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### References

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