



How you want to be treated.

Palliative Care

St. Paul's Hospital

Palliative Care Unit
10th floor (10D)
1081 Burrard Street
Vancouver, BC
V6Z 1Y6

604-682-2344
ext. 62297

Welcome

Welcome to the Palliative Care Unit. We are a 12-bed unit that focuses on the care of people with life-limiting illnesses. We hope you find your care to be excellent, and delivered with compassion, respect, and dignity.

This handbook tells you:

- Practical information about the Palliative Care Unit.
- What to expect from your stay.
- What palliative care is.
- Discharge information and planning.

If you have any other questions or concerns, please feel free to speak with any of our staff.

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Understanding Palliative Care

What is palliative care?

Palliative care is for anyone, of any age, who is living with a life-limiting illness such as:

- Cancer.
- Body organ failure (heart, lung, kidneys).
- Neurological degenerative diseases (such as dementia, ALS, Parkinson's).
- 'Frailty' (dying of old age).

Our goals are to:

- Relieve your pain and other uncomfortable symptoms.
- Attend to the needs of your body, mind and spirit.
- Maintain your dignity.
- Give support to both you and your family.
- Improve your quality of life.

Where is palliative care provided?

Palliative care is not limited to care on the Palliative Care Unit. Palliative care is provided where the person and their family wants, whenever possible.

Palliative care can be given:

- At home.
- In a hospice.
- In a residential care facility or care home.
- In a hospital.

What to Expect from Your Stay

How long will you be here?

That depends on why you are here and what kind of care you need.

Soon after coming to the Palliative Care Unit, we will plan a meeting with you. Some topics that may be talked about during this meeting include:

- A review of your health and what your wishes are.
- The plan for leaving the hospital.
- Future care needs.

At these meetings, you meet members of our palliative care team. You are welcome to invite family or friends to be with you.

Family support

We know it is important for your family to hear how you are doing. Some people who come to our unit have many concerned family members and friends. When this is the case, we ask that one or two family members become the 'family contact' person. We would give information about your health to your 'family contact' person who can pass it on to your family and friends.

Please let us know who your 'family contact' person is.

Expectations

During your stay you can expect us to:

- Control any uncomfortable symptoms that you have as soon as possible.
- Answer any questions that you and your family may have.
- Help you and your family plan for the future, making sure you are able to receive the care you need when you need it.

Once your symptoms are more under control or stable, the doctors, nurses, and the social worker can help explore options with you and your loved ones for leaving the hospital. This is the time to consider where you and your family will feel the safest. It could be at home, at a hospice, or at a residential care facility. Some people go back home, while others decide that they would rather move into a hospice or other care facility.

If your illness is stable and you wish to go home, we will connect you with community services and home care nursing who can help with your care at home. Your care at home is directed by your family doctor, and specialists who may be involved in your care. Some people choose to remain at home for their entire illness. If this is the case, there are community palliative care services to help with your care.

Practical Information about the Palliative Care Unit

Your room

We have both private rooms, and rooms where patients share the room and the bathroom. The bathrooms in private rooms include a toilet, sink, and bathtub with a shower. In shared rooms, the bathroom includes a toilet and sink. We have a central bathtub room and showers that our unit shares with another unit on the floor.

Each room has a fold-out reclining chair for the comfort of visiting family and friends.

Sometimes we have to move people from the bed they are in. This can be for medical reasons, to prevent the spread of infection, or for the arrival of new patients. At times we have to put men and women in the same room.

Thank you for your understanding.

Daily care

Your daily care routines are based on your 'Care Plan'. Your Care Plan is a written plan of your needs and wishes. The Plan also says how we will meet your needs. Your Care Plan is specific to you. We work with you and your family to make your Care Plan. Your Care Plan is updated when your care needs change.

Please let your nurse know if there is anything you would like us to change or add to your Care Plan.

Meals and snacks

Meal trays are served at each person's bedside.



We will talk about what you prefer to eat as well as what your nutritional needs are. Then a diet plan is made for you.

Television

While there is a television in your room, to get cable TV you will need to pay for it. Should you want the use of the TV, we will give you a form to fill in. A TV Attendant comes around each day to set it up. You can pay the TV Attendant for this service by cash or credit card.



Telephone

To be able to talk to family and friends whenever you want can be very important. There is a telephone at each bedside. There is no cost for the use of the telephone. Please ask one of us for the number of the phone by your bed.



If you wish to make any long-distance calls, you will need to do this through the hospital operator and be ready to charge the call to a phone card.

Many people ask us about using cell phones in the hospital. You are welcome to use your cell phone on our unit unless we specifically ask you not to use it. When in other parts of the hospital, please check posted signs as to where cell phones can be used.

If you are sharing a room, please keep the ringer volume on your phone turned down, and keep your voice down so you do not disturb your neighbour.

Computers

Computers are welcome. Please check with the staff to see if internet access is available.



Common areas

You and your family are welcome to use any of our common areas.

Our common areas:

- A large lounge with a television and a balcony
- A small kitchen with a refrigerator and coffee service
- A small lounge with balcony

Visitors

Your family and friends are welcome to visit at any time that is acceptable to you. Main doors to the hospital are locked from 8:00 pm to 6:00 am. After 8:00 pm, visitors must come through the Emergency Department.



Pets as visitors

Pets are welcome visitors. We ask the owner of the pet to keep the visiting animal under control at all times. We would hate to have your pet be the cause of someone being hurt or falling. Pet owners are responsible for immediate clean up after the pet both within the hospital and on surrounding property.

Parking for visitors

Since St. Paul's Hospital is in busy downtown Vancouver, parking can sometimes be hard to find.

Here are some options for parking close to the hospital:

- St. Paul's Hospital, 1081 Burrard Street
 - access on Burrard Street.
 - parking here is limited, but if you are only here to pick somebody up, then there are time-limited spots available.
- Century Plaza Hotel, 1015 Burrard Street
 - access on Comox Street.
- Wall Centre Hotel, 1088 Burrard Street
 - access on Helmeken Street.

- Street parking
 - metered parking is available along Burrard, Helmcken, Thurlow, Comox, and Davie streets. Be aware that in some areas, you can only park until 3:00 pm.



- | | |
|---|--|
| 1 St. Paul's Hospital
1081 Burrard Street | 6 Wall Centre Hotel
1040 Burrard Street
(entrance on Hornby) |
| 2 Corner of Comox & Thurlow | 7 Advanced Parking
1237 Davie Street |
| 3 Century Plaza Hotel
1015 Burrard Street
(enter from Comox Street) | 8 Impark
1123 Davie Street |
| 4 Impark
1160 Burrard Street | 9 Burrard Motor Inn
1100 Burrard Street |
| 5 Nelson Square
808 Nelson Street | 10 Impark
1125 Burrard Street |

Keeping You Safe

The safety of patients, staff, and visitors is our priority. To learn more about Patient Safety, see the pamphlet *'Patient Safety – It's Everyone's Responsibility'*

Communication

We need to understand each other. We try hard to explain things clearly. If, at any time, you do not understand words or phrases we use, please ask us to explain it in words you can understand. If we give you forms, or other materials, and some words are not clear to you, ask us to read it to you and explain what it means.

Ask any questions that you have about your care. You may want to write down your questions, especially if you have more than one question.

If you do not speak or understand English well enough to have conversations about your health or to make medical decisions, we can book an interpreter to help us communicate. You will not need to pay for this. This also applies if you need a Sign Language interpreter. For daily communication, we have various tools that we can use to help us communicate with you such as pictures and translated cards.

Your belongings

You are welcome to have some items from your home with you in hospital. Be aware that the hospital is a public building with many people coming and going. Items do go missing or get stolen from time to time. Please do not bring in large amounts of cash or valuables. It is best that you have your family keep your valuables, jewelry or valuable keepsakes.

We suggest you obtain insurance for the valuable belongings you do have with you. This is to insure against both loss and damage. Your insurance should include coverage for glasses, hearing aids, dentures and watches, as well as your own wheelchair or walker. If you wear glasses, hearing aids, or dentures, it is a good idea to have them engraved with your name.

We are not responsible for lost or stolen money or valuables. Our insurance only covers items that we have damaged or lost.

Extra food

Your family and visitors are welcome to bring in food for you. Any foods that can spoil may be stored in the fridge located in the kitchen. Make sure you have the food labelled with your name and the date.

For your safety, we ask you to have unused food in the fridge removed after a few days. All foods kept in your room or in the fridge should be stored in containers that can be resealed.

Smoking

Both the Palliative Care Unit and St. Paul's Hospital are smoke-free facilities. There is no smoking anywhere on the premises or grounds. This includes our balconies.



If you are a smoker, speak to your nurse. We will explain what options are available to you.

Electrical Items

Any electrical items that you bring in here must be 'CSA' approved. We will check them to make sure. This includes radios, computers, televisions, clocks, shavers, etc.



Please do not bring in heating pads, electric blankets, or humidifiers. There are a number of risks related to these items such as burns, fire, and mold.

Preventing illness

Help us stop the spread of germs. The best way to stop the spread of germs is to clean your hands. When you clean your hands well, you kill many of the germs on your hands. It takes less than a minute!



To protect you and others, please wash your hands after using the toilet and before eating. To learn more about preventing infections, see the pamphlet '*Stop the spread of germs – It takes less than a minute to protect yourself and others*'

Talking about concerns

We are always working hard to improve our care and services. We want to know your ideas and concerns. Please let us know right away if you have any concerns. We do our best to see that your concerns are addressed as quickly as possible.

If you have concerns about your daily care, we ask you to first talk with the staff member directly involved. If your concern cannot be resolved by speaking with the staff member, ask to speak with the nurse in charge.

If you have concerns that are not related to your care, ask to speak with the manager.

If you are not sure who to talk to, speak to our social worker.

If you do not feel comfortable approaching another person in the Palliative Care Unit about your concerns, please feel free to contact our Patient Relations office.

604-806-8284

Leaving Hospital

Passes

When you leave the hospital for short time periods, it is called being given a 'pass'. A pass could be for a couple of hours, a couple of days, or anything in between. Some people go on passes to see if they are able to manage safely at home. We will work with you to prepare you for the pass, along with the people who are taking you on your pass.

Going home

Your palliative care doctor will contact your family doctor, giving information about your hospital stay, as well as going over what the plans are for your care.

To prepare for going home, there are a number of things we may need to arrange. It depends on what you will need for care at home.

If you need home care...

We will arrange for a home care nurse to visit you when you are at home. Before you leave hospital, a nurse who works for Home Care Services will meet with you and give you:

- Information about the health care unit in your area.
- The contact information for the home care nurse.
- When to expect your first visit.

If you need extra equipment to make your home safe...

Our occupational therapist will visit you and help decide whether or not you need special equipment at home to make your home as safe as possible. It is important that your home is set up so it is a safe place for you. If needed, an occupational therapist from Home Care Services may visit you at home to check and see you have what you need to be safe at home.

If you need help with finances or other 'red tape' issues...

One of our social workers can meet with you to discuss any financial or other "red tape" issues that you and your family may have.

If you need help managing your medicines...

One of our pharmacists can come and see you before you leave to review your medicines with you and your family.

If you need home oxygen...

One of our respiratory therapists will visit you before you leave to identify what type of oxygen support you need. The respiratory therapist will then apply to the Home Oxygen Program for you.

You may need to complete two forms before you leave the hospital:

1. The **BC Palliative Care Benefits Program Application** form

This program is available to people in the last 6 months of life. The program covers the cost of equipment (if needed) for the home, most medications, and extra home support worker hours.

2. The **Provincial No Cardiopulmonary Resuscitation** form

You complete this form if you do not want to have cardiopulmonary resuscitation (CPR) done to you should you die at home. It directs family members, home support workers, ambulance attendants, other community workers, and emergency room personnel not to start CPR on you.

What to take home with you

There is a pocket in the back cover of this handbook. Use this pocket to store the following papers:

- BC Palliative Care Benefits Program Application form.
- Provincial No Cardiopulmonary Resuscitation form. (When you get home make sure you put this somewhere emergency help can find it if they are called to help you. Talk to the home care nurse about where a good place might be).
- Home care nurse and community health unit contact information.
- Prescriptions.
- Any other papers, brochures, or pamphlets that you have gathered during your stay.

Going to a Hospice

Some people move to a hospice after they leave the hospital.

A hospice is a place for people to live until the natural end of their life. A hospice has a home-like environment. There are living rooms and areas to sit and visit with your family and friends, the difference being that there are nurses and doctors to care for you, and your meals are prepared for you.

Before going to a hospice, the social worker and other health care team members talk with you about what needs to happen before your move.

If you have any questions about hospice, please ask any member of the palliative care team. We will be happy to answer your questions.

Who Works on the Palliative Care Unit?

Your care team

The Palliative Care Unit at St. Paul's Hospital is staffed with a team of health care professionals:

- Doctors are on the unit every day of the week, and on call every night and on weekends.
- Each nurse cares for between 3 and 4 patients.
- Other staff, including a pastoral (spiritual) care worker, social worker, physiotherapist, occupational therapist, dietitian and pharmacist also work with you to make sure that you receive the best care possible.

You may notice students in the Palliative Care Unit. St. Paul's Hospital is a place of learning for our staff and future professionals. We welcome the opportunity to teach others about palliative care. We hope you will welcome these learners to be a part of your care.

We also have a large group of trained volunteers who can help you with a number of services should you feel you need extra support. Ask any of the palliative care staff about all our services.

Outside therapy and extra care

Sometimes, a person may want to have extra care beyond what we already give, or may want to have treatments we do not offer.

Please let us know if you wish to have someone who does not work in the hospital come in and give you extra care or therapy. We call the people who give this extra care 'Non-staff Practitioners'. For example, you may want extra care from a massage therapist or chiropractor. Or you may wish to receive treatments such as acupuncture, therapeutic touch or reiki. It is possible to have these types of care while living here. Let us know what type of extra care or treatment you want, and we will give you a package of forms and set of instructions.

Also tell us if you are taking, or wish to take, any herbal remedies or other medicines. These are reviewed by our pharmacist.

Whether it is outside therapy or extra medicine, we look at the proposed care or treatment to make sure it does not interfere with the care you are getting from us.

Donations

We are fortunate to have the financial support of patients, as well as families and friends of our palliative care patients. Donations help us do renovations, purchase equipment, and fund activities that make life better for those who we care for. We also use donated monies to help pay for the ongoing learning of our staff.

If you would like more information on how to make a donation, please ask one of our staff.

Appointments

You have the following appointments:

What:
Where:
When:

What:
Where:
When:

What:
Where:
When:

What:
Where:
When:



How you want to be treated.

www.providencehealthcare.org