

Working Group on Best Practices and Quality Care Terms of Reference

Scope

Issues related to guidelines, norms of practice and an integrated approach to palliative and end-of-life care.

Mandate

The Best Practices and Quality Care Working Group will promote, facilitate and coordinate implementation activities, including possibly:

- assessment of the particular needs and values of specific cultural groups;
- ethical decision making guidelines to assist care providers, patients and family members to make appropriate care and treatment choices near the end-of-life;
- consideration given to spiritual and cultural issues;
- consideration given to the situation(s) of the family caregiver;
- models for coordination and integration of palliative and end-of-life care;
- assessing the need for clinical practice guidelines for various aspects of end-of-life care; and
- the dissemination and adoption of the Canadian Hospice Palliative Care Association's (CHPCA) norms of practice for hospice and palliative care.

Membership

The Working Group will consist of no more than 10 members including 2 co-chairs, to be appointed by Health Canada. The members will represent organizations and associations and will be chosen for their experience and expertise and the resources they can bring to the table. Health Canada will be a member of the working group. Other expertise may be brought to the table as needed.

Potential members: (are seeking suggestions for a multi-cultural national and/or umbrella organization and a grass-roots hospice organization) Canadian Society of Palliative Care Physicians, Canadian Hospice Palliative Care Association, Canadian Medical Association, Royal College of Physicians and Surgeons of Canada, Regional Health Authorities/Provincial Cancer Agencies, Canadian Association for Community Care, Canadian Nurses Association, Canadian Home Care Association, Canadian Council on Health Services Accreditation, Association québécoise de soins palliatifs, Canadian Caregiver Coalition, and Canadian Association of Pastoral Practice and Education.

Responsibilities of Members

- Attend all meetings
- Consult with their respective networks
- Bring resources to the table (e.g. expertise, experience, financial as applicable)
- Coordinate efforts among themselves
- Communicate with one another and with their organization(s)
- Establish linkages with broader stakeholder networks

- Initiate activities at the organizational level
- Co-chairs are required to provide a progress report to the Coordinating Group by end of November 2003. This report will include suggestions for future directions for end-of-life care initiatives in Canada, relative to their theme or issue area.

Budget

Health Canada will support up to two face-to-face Working Group meetings per year, as well as teleconferences as needed. Members' travel and accommodation expenses will be reimbursed according to Treasury Board guidelines. Given the voluntary nature of the involvement in the Working Group, no honoraria will be paid to members.

Timeframe

The Working Group will be put in place until March 31, 2004. The Working Group will assess future directions at that time.