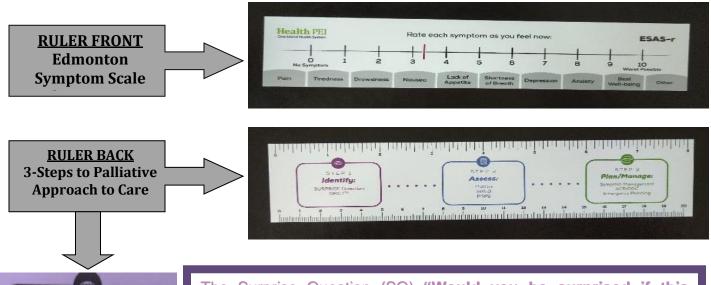
THE PALLIATIVE CARE RULER

Our "Palliative Care Ruler" as we call it has the Edmonton Symptom Assessment System (ESAS-r) scale on the front side and the three steps to the palliative approach to care on the back – Identify, Assess and Plan/Manage listing the care tools and resources for each of these three steps. These steps follow the Gold Standards Framework structure, and the care tools and resources selected for each step are used in numerous health jurisdictions across Canada and beyond. This tool can also serve as a ruler – hence its name the "Palliative Care Ruler."





The Surprise Question (SQ) "Would you be surprised if this patient were to die in the next 6-12 months?" is NOT a standalone prognostic tool, but rather one used alongside other "trigger" tools such as Supportive and Palliative Care Indicators Tool (SPICTTM). If the answer to the SQ is YES, the patient should be reassessed regularly. If the answer to the SQ is NO or NOT SURE, the SPICTTM can be used to confirm that the patient has general or specific indicators of decline.



The outcome of identification and assessment leads to determine the care required to meet a patient's needs. To assist with symptom management, the BC Guidelines are helpful found at www.bc-cpc.ca/cpc/symptom-management-guidelines. Tools for Advance Care Planning are the Health Care Directive and the ACP Workbook PEI found at www.advancecareplanningpei.ca. Other tools for care planning include the Goals of Care form, Virtual Hospice at www.livingmyculture.ca and our Health PEI "The Serious Illness Conversation Guide."



Patients who could benefit from palliative care early are flagged and assessed using best practice tools including the ESAS-r, the Palliative Performance Scale version 2 (PPSv2), and the Patient Reported Functional Status (PRFS). The Eastern European Oncology Group (ECOG) scale is also used for research, treatment planning and clinical trials at the Cancer Treatment Centre.