

**Title:**

Transforming Palliative Care: The Compassionate Collaborative Care Model

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**Session Title:**

Enhancing Palliative Care

**Slot:**

J 01: Tuesday, 31 October 2017: 8:00 AM-8:45 AM

**Scheduled Time:**

8:00 AM

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**Keywords:**

collaborative practice, palliative care and quality care

**References:**

American Association of Colleges in Nursing. (2013). The Arnold P. Gold Foundation Joins with AACN to Launch a National Initiative Promoting Compassionate Care in Nursing. *Journal of Professional Nursing*, *29*(5): 255-256.

Schwartz Center (2014). Recommendations from a conference on advancing compassionate, person-and family-centered care through interprofessional education for collaborative practice. Emory Conference Center, Atlanta, Georgia, Oct. 30- Nov. 1, 2014. [http://www.theschwartzcenter.org/media/Triple-C-Conference-Framework-Tables\\_FINAL.pdf](http://www.theschwartzcenter.org/media/Triple-C-Conference-Framework-Tables_FINAL.pdf)

World Health Organization. (2015). WHO global strategy on people-centered and integrated health services: Interim Report.

Geneva. [http://apps.who.int/iris/bitstream/10665/155002/1/WHO\\_HIS\\_SDS\\_2015.6\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/155002/1/WHO_HIS_SDS_2015.6_eng.pdf)

**Abstract Summary:**

The compassionate collaborative care (CCC) model presents new opportunities for nurses to transform palliative care globally by strengthening patient-centered care, empowering individuals and teams in decision making, fostering interprofessional communication and cultivating a collaborative practice organizational culture.

**Learning Activity:**

<b>LEARNING OBJECTIVES</b>	<b>EXPANDED CONTENT OUTLINE</b>
Explain the purpose and contributing factors for the development of the Compassionate Collaborative Care model	Background, Introduction
List key quality indicators of compassionate collaborative care in palliative settings	Methods and Results
Describe measures to enhance collaborative practice culture among health care	Results and Discussion section

professional individuals, teams, and organizations in palliative settings globally	
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**Abstract Text:**

**Introduction:** In the last decade, several professional organizations have issued recommendations for integrating compassion and collaboration into health professional education and clinical care (AACN, 2013). In 2014, an expert panel convened by the Schwartz Center for Compassionate Healthcare and the Arnold P. Gold Foundation developed the compassionate collaborative care (CCC) model with the “triple aim” of improving health status, strengthening care provision, and controlling health cost. The model’s potential for improving quality standards across care settings, along with re-shaping inter-professional education, practice and policy-making, presents new opportunities for nurses to transform care globally. In view of the 2015 WHO call for integrated people-centered health services, empowering stakeholders to take charge of their own health, the CCC model can facilitate a paradigm shift.

**Aim:** To develop an operational definition of the CCC model and identify key quality indicators across palliative and end-of-life care settings at the individual, team and organizational levels.

**Methods:** An integrative review of the current state of the palliative and end-of-life care literature. The WHO Framework for Action on Interprofessional Education & Collaborative Practice along with Donabedian’s quality of care framework were adapted.

**Results:** Final literature sample consisted of 25 articles. Findings were presented as a narrative summary of overarching themes, organized into structures, processes, and outcomes categories. Sub-categories included the individual, team, and organizational levels. Respect, patient and family-centeredness, communication, and shared decision-making emerged as the overarching themes. Sub-categories included commitment, dignity, resources, care rounds, Schwartz Rounds, consultation, pain and symptom management, satisfaction, teamwork, and program development.

**Discussion/Conclusion:** The CCC model can facilitate evaluation of structures, processes, and outcomes at three levels; individual patient/provider, team, and organizational. Compassionate collaborative care can be viewed as the ‘missing antecedent’ for fully operationalizing and sustaining patient-centered care in palliative care settings. Nurse clinicians, managers and educators can play a key role in further refining and operationalizing this model.