**Implementing the Palliative Care Pathway Worksheet**

**Stages 1-5 with external care partners**

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| **Stages 1-5** | **What is already in place** | **Key process and consent** | **What needs to be accomplished/**  **implemented** | **Decisions to be made** | **Stakeholders** |
| **Client is Identified** | Points of entry  Program criteria | Information sharing (what and to whom) |  |  |  |
| **Client is Referred** | Community referral process | Information sharing (what and to whom) |  |  |  |
| **Comprehensive Assessment** |  | Information sharing (what and to whom) |  |  |  |
| **Case Conference and Creation of a Care Plan** |  | Information sharing (who is in the Circle of Care) |  |  |  |
| **Coordinated Health Care Delivery** |  | Information sharing (what and to whom) |  |  |  |

**Stages 6-9 with internal care partners**

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| **Stages 6-9** | **What is already in place** | **Key process and consent** | **What needs to be accomplished/**  **implemented** | **Decisions to be made** | **Stakeholders** |
| **Planning for Passing** | Points of entry  Program criteria | Information sharing (what and to whom) |  |  |  |
| **Client has Passed on** | Community referral process | Information sharing (what and to whom) |  |  |  |
| **Follow-up and Bereavement Support** |  | Information sharing (what and to whom) |  |  |  |
| **Case Closure** |  | Information sharing (who is in the Circle of Care) |  |  |  |