Rural Community-Based Palliative Care

Why focus on palliative care in rural communities?
Palliative care is supportive medical care for people with serious illnesses. It focuses on providing patients with relief from the symptoms, pain, and stress of a serious illness – regardless of the diagnosis. It is appropriate at any age and at any stage in a serious illness and can be provided along with curative treatment. Rural populations are disproportionately older, poorer, and are more likely to have a range of chronic illnesses than their urban counterparts. They are also less likely to have access to palliative care services, as the majority of palliative care programs have developed in larger urban hospitals delivery models. Rural communities are uniquely positioned to meet the challenges of providing palliative care through collaborative efforts, and development of interdisciplinary palliative care services can be a cornerstone of better addressing the needs of patients with life-limiting illness and high health care costs.

Project overview
MetaStar and the Wisconsin Office of Rural Health is working with Stratis Health to support a multi-state, multi-faceted project to increase access to palliative care services in rural communities to improve quality of life and quality of care for those with advanced illness and complex care needs. The project will build rural community-based palliative care philosophy and services in an initial five to eight communities each in North Dakota, Washington, and Wisconsin.

This effort builds on the proven model developed and implemented by Stratis Health in 26 rural communities. The formula for successful program development is outlined below:
Community data and goals
Stakeholder input/
Community-based team
(i.e., focus on community
needs and resources)
+ Access to national
standards, intervention
models and resources (e.g., NQF
Preferred Practices)
+ Structured process for
development/implementation
(facilitated planning and
networking support)

= Custom-designed
community-based rural
palliative care program

Program Components

- **Project Partners** To support implementation and help ensure long-term sustainability, the project includes a partnership between Stratis Health and State Offices of Rural Health in ND, WA, and WI who will engage state and local partners.

- **State Advisory Groups**: Each state will engage a state advisory group with a broad range of state-based stakeholders to help understand local context and/or supports needed for development of rural community-based palliative care services.

- **Community Cohorts to Develop Palliative Care Services**: Each state (ND, WA, WI), will work with a cohort of five to eight rural communities, leading them through a facilitated planning process for development and implementation of palliative care services uniquely designed to meet community needs and tailored to enhance and align local resources.

- **Centralized Support and Resource Center**: The online Rural Palliative Care Resource Center will continually updated to include additional tools, trainings, and best practices identified across participating states and communities.

Project Timeline
A staggered approach to project implementation will foster additional knowledge transfer between the 24-month, state-based cohorts. The total project will span three project years (Fall 2017 – Summer 2020).

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