JHP is a home-centred hospice program designed to provide psychosocial, emotional and practical service to the Jewish community

INPUTS

▼ Human Resources

Jewish Hospice Manager Social Workers Rabbis Family Life Education (FLE) Volunteers (through COC partnership)

▼ Partners and Collaborations

Circle of Care (COC)
Hospice Palliative Care
Ontario (HPCO)
Interdisciplinary Teams (e.g.
Medical and Community
Health Care)
Jewish community
institutions
Central LHIN
Toronto Central LHIN

- Specialized Cultural,
 Religious and Spiritual
 Expertise
- **▼** HPCO Accreditation
- **▼** Funding

ACTIVITIES

Screening and Assessment of Referrals – Comprehensive screening and assessment of referrals to determine whether admission / eligibility criteria for JHP have been met, and if not, referral to alternate service providers

Social Work Assessment – In-depth, holistic assessment to identify individual and family needs, and inform the type and scope of services appropriate for their circumstances

Integrated Care Planning, Resource Identification and Coordination – Collaborate externally with medical and community health care teams – and internally across agency services – to develop integrated care planning, modeled on the Canadian Hospice Palliative Care Association's (CHPCA) 'domains of issues associated with illness and bereavement'

Emotional and Spiritual Support – Address the emotional, spiritual, social and practical needs of individuals and families through counselling, chaplaincy (Rabbinic counselling, consultation and visitation) and volunteer support

Bereavement and Anticipatory Grief Support – Individual and group counselling for family members

Education / Knowledge Exchange – Develop and deliver (at conferences and on a consulting basis) educational presentations about Jewish cultural and religious needs in palliative care, to support and forge partnerships with professionals in social services, medical and healthcare settings who work with the Jewish community

Advocacy / Promotion / Outreach — Create and update communication materials, and engage with other hospice palliative care providers, professional societies and associations, and the public, to raise awareness about the Jewish Hospice Program

Professional Education – Provide opportunities for professional growth and learning consistent with emerging issues and new directions in hospice palliative care

Program Evaluation and Development – Leverage the Agency's internal research and evaluation capacity (and external research study opportunities) to assess program effectiveness, define quality improvement processes based on service user feedback and current literature, and adjust program elements as required

SHORT-TERM OUTCOMES

Service planning is inclusive, holistic,

Communication between interagency providers is enhanced; fragmentation of services is reduced

and aligned with/culturally attuned

to individuals and family needs

Individuals have increased capacity to self-determine their goals and manage their quality of life and end-of-life care

Families are better equipped to help and support loved ones

Existing partnerships are strengthened; new partnerships are created

Increased understanding among palliative professionals regarding the diversity of the Jewish community

Increased community awareness about the JHP program, service criteria, and JHP-access opportunities

Increased clinical knowledge among JHP's professional team about psychosocial issues at end-of-life and during grief and bereavement

INTERMEDIATE

LONG-TERM OUTCOMES

Individuals and families have improved access to additional resources and services, both internally and externally

Individuals and families receive seamless, integrated and collaborative care that is consistent with individual/family goals of care

Individuals experience improved quality of life and reduced suffering; dignity is maintained

Individuals have choice and control over where death occurs

Caregiver exhaustion and burnout are reduced

Gaps in cultural competency are reduced

Service user feedback, research findings are used to adapt and inform existing services, and develop new services

Individuals are able to live with meaning, quality and purpose

Families feel supported, have healthy coping strategies, and are more resilient

The community has access to an expanded, flexible continuum of hospice palliative care, with more options at end-of-life