

Dear colleagues,

Please share this Ontario Palliative Care Network (OPCN) update with your team members.

**FOR YOUR ACTION: CAPACITY PLANNING**

Last year, the OPCN completed its first phase of its capacity planning work, making recommendations to the Ministry on filling the gaps in residential hospice palliative care beds in the province.

Please note we are asking your Network Directors and LHIN Leads to provide follow-up information to the **residential hospice capacity expansion updates** that were submitted in December. We are asking the Network Directors and LHIN Leads to visit the [OPCN SharePoint site](#) to respond to three additional questions no later than February 17, 2017.

**FOR YOUR INFORMATION: FUNDING FOR VOLUNTEER TRAINING**

Ontario is providing an additional \$1 million in annual funding to expand visiting hospice volunteer services across the province. The province is also providing one-time funding across regions with lower visiting hospice volunteer capacity so they can improve access to these services in new and underserved communities. The news release is available [here](#) for more details. As only LHIN CEOs received this announcement, we are including it to ensure all CCO Regional Vice Presidents are also aware of this news.

**FOR YOUR INFORMATION: FUNDING STATUS OF HIGH-STRENGTH, LONG-ACTING OPIOIDS**

As you may be aware, last July, the Ministry of Health and Long-Term Care announced that the Ontario Drug Benefit (ODB) Formulary/Comparative Drug Index would be updated in January 2017. Specifically, effective January 31, 2017, the following products will be delisted from the ODB Formulary:

- Higher strengths of long-acting opioids, including:
  - Morphine 200 mg tablets;
  - Hydromorphone 24 mg and 30 mg capsules; and
  - Fentanyl 75 mcg/hr and 100 mcg/hr patches.

The delisting of these drugs is intended to raise awareness and encourage appropriate prescribing in accordance with clinical practice guidelines. Lower-strength, long-acting opioids will continue to be funded under the ODB program.

We are pleased to announce that as a result of our collaboration with the Ministry's Ontario Public Drug Programs Division, the Ontario Medical Association, and other health care providers and key groups specializing in palliative care, also effective January 31, 2017, patients receiving palliative care will continue to have access to the above high-strength long-acting opioids through the Ontario Drug Benefit programs:

1. Palliative Care Facilitated Access (PCFA) mechanism, for physicians who are registered PCFA prescribers through the Ontario Medical Association; OR
2. The Exceptional Access Program's (EAP) Telephone Request Service (TRS) for physicians who are not registered PCFA prescribers if the request meets specified criteria.

For more details, please see the OHIP INFOBulletin Notice published November 30, 2016 at: <http://www.health.gov.on.ca/en/pro/programs/ohip/bulletins/4000/bul4682.aspx>

## Ontario Palliative Care Network

In alignment with this work, the PCFA prescriber eligibility criteria have also been updated along with the corresponding Physician Declaration Form. For more details, please visit the OMA website at: <https://www.oma.org/wp-content/uploads/private/pcfadecclaration.pdf>

This collaboration is an excellent example of the OPCN's commitment to working with other health system leaders and providers to improve access to quality hospice palliative care in Ontario, and we thank all those who worked with us on this initiative.