Contact Us

For more information, you may contact a social worker at 416-785-2500, ext. 2329.

Inquiries can also be sent to palliativecare@baycrest.org.

Palliative Care Unit: [http://www.baycrest.org/Baycrest/Healthcare-Programs-Services/Clinical-Services/Palliative-Care-Unit](http://www.baycrest.org/Baycrest/Healthcare-Programs-Services/Clinical-Services/Palliative-Care-Unit)
The Palliative Care Unit

The Palliative Care Unit is a 31-bed unit providing 24-hour pain and symptom management in combination with emotional and spiritual support to patients with late or end-stage disease in need of palliative care.

Applications for short term pain and symptom management may be considered.

Goals of the program

An integrated, interdisciplinary holistic approach to care that encourages a support network among patients, family, staff and volunteers.

The focus of care is on pain and symptom management.

Admission Criteria for the Palliative Care

Inclusion

- Adults aged 55 and older who have been diagnosed with a terminal illness requiring palliative care (24-hour pain and symptom control)
- Patient is medically stable (i.e. does not require acute care intervention)
- If patient smokes, is able to do so safely and make own arrangements

- Patient and power of attorney/substitute decision maker will understand and accept the philosophy of palliative care and reason for admission.
- Expected prognosis of 90 days or less
- Should the patient’s condition/care needs stabilize, the patient or substitute decision maker is expected to cooperate in discharge planning to transition to an appropriate destination

Exclusion

- Dialysis
- Mechanical ventilation
- Bi-level Positive Airway Pressure (BiPAP)
- Cuffed Tracheostomy Tube
- Needs greater than 50% Oxygen
- Total parenteral nutrition (TPN)
- Bariatric equipment needs (300lbs +)
- Patients requesting resuscitation
- Patients seeking life-prolonging active intervention/treatment

Application Process

Referral (RMR) system or via fax: 416-785-2471.

Applications are reviewed by the palliative care team for appropriateness.