

**WECCC 2019 ANNUAL REPORT SERIES**

**CONVERSATIONS THAT MATTER**

An Education Initiative for Raising Community Awareness about Advance Care Planning in Windsor Essex County

Highlights

1053 individuals participated in 58 community education workshops and 52 1:1 sessions to learn about communicating future wishes and health care consent and capacity.

* 193 ACP/POA plans were completed
* Overall rating for the sessions was 97% based on criteria of usefulness, relevance, organization, presentation, visual aids, and instruction
* 97% of participants rated the information as relevant to their needs

Background: Advance care planning (ACP) in Ontario is a two-step process in which a mentally capable person:

1. Identifies a substitute decision maker (SDM) by either confirming the person who is ranked highest on the Hierarchy of SDMs in the Health Care Consent Act or by naming or appointing someone in a Power of Attorney for Personal Care (POAPC).
2. Explores their values, beliefs and wishes about care and communicates those to help the future SDM(s) make personal and health care decisions should they become incapable of doing so for themselves.

This process is meant to ensure an individual’s wishes and preferences are accurately represented and to prepare the SDM(s) to make decisions consistent with those preferences in the event they cannot speak for themselves. When the process is not done well, it can result in ambiguity and confusion, leaving the SDM(s) or loved ones unprepared to make substituted decisions. When ACP is not done at all, SDM(s) are left unprepared to make substituted decisions and often are bereft of any clues that may have helped inform them of their loved ones’ wishes.

To address these challenges and opportunities, the Windsor Essex Compassion Care Community initiated an ACP education project to engage community partners and individuals to promote and facilitate integration of Advance Care Planning in various community settings as well as in the health system using best practices. Through workshops, seminars or individual sessions, information about health care consent, substitute decision-making and advance care planning is addressed. Participants are given the materials, resources and guidance needed to engage in the process of planning and communicating future wishes.  This service employs a community engagement approach in delivering sustainable public awareness activities and creating supportive environments for Advance Care Planning.

WECCC’s ACP education services are designed to stimulate reflective thinking, promote dialogue among friends, family, and healthcare professionals, and provide the tools, resources, and support to engage in the Advance Care Planning process. It is based on the following elements: understanding, reflection, and discussion. By exploring these elements, each individual can better identify what is of value to her/him on a uniquely personal level.

**Understanding:**

Individuals who are able to understand:

* The importance of advance care planning (to themselves and their loved ones),
* the components of the planning process
* the benefits of planning
* the consequences of not planning

will be better equipped to consider the choices they will have available when faced with a medical emergency or serious illness. Engaging individuals in exploring their fears and concerns is often more effective than simply providing them handouts or information.

**Reflection**

This phase of the ACP process helps people identify their personal goals, values, and beliefs, and the significant impact they have on the decision-making process.

Techniques that engage people in reflecting include encouraging them to:

* tell their personal stories
* recall experiences with loved ones who have been seriously ill
* reflect upon what was learned through those experiences
* describe what living well means to them

This reflection and verbalization of goals, values, and beliefs provides a framework for determining future healthcare decisions. It is also instrumental in helping their substitute decision maker(s) identify clues for making healthcare decisions in the future, if necessary.

**Discussion**

This phase encourages participants to communicate their wishes to their chosen substitute decision maker(s), supported by their loved ones, their healthcare providers, and religious or spiritual advisors. Communication channels are identified, and suggestions are offered about how to initiate discussions with these persons. Where appropriate, assistance in formulating questions for their healthcare professionals regarding a health condition or about a treatment decision is provided. Ideally, the ACP discussion helps identify wishes that clearly represent the goals, values, beliefs, of the individual. We ensure participants understand that wishes can be expressed using any communication means or format of their choosing including, oral, written Bliss, Braille, Video etc. We also stress ACP is dynamic process in nature and that health status, personal values and goals may change over time, thus requiring wishes and preferences to be revisited.

Components of WECCC ACP education:

1. Community presentations/workshops/seminars tailored to address the specific needs of a particular group or organization (health care professionals, religious groups, chronic disease management groups, retirees, newcomers etc.)
2. Provision of tools and resources (publications booklets and/or pamphlets) specifically geared to the audience
3. Availability of individual sessions to engage in the ACP process and/or complete a POAPC

Presentations include a PowerPoint slide show, a Q&A period, and appropriate resources/handouts. The presentation is approximately one and a half hours in duration but may vary according to the needs of the group.

The success of this community education initiative is the result of engaging community leaders and developing strong ties to a number of diverse groups and organizations. The following groups and organizations have participated in the initiative:

* Windsor-Essex County Hospitals
* The Hospice of Windsor Essex County (Windsor/Lakeshore Campus)
* Retirement and Long-term Care facilities
* Faith leaders/Churches, Synagogues, Mosques, Temples, and other places of worship
* Senior Community Centers
* Long-term care facilities
* Assisted Living facilities
* Seniors’ Housing
* Educational Institutions (High Schools, University, College)
* Alumni and Retired Professionals Groups
* New Immigrant and Multi-cultural Groups
* Community leaders/civic organizations
* Funeral Homes

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| Windsor Essex County Compassion Care Community  AC**P Statistical Summary**  **June 14, 2017 – December 2019** | | | | |
| **Category** | **Total #**  **To date** | **2019** | **2018** | **2017** |
| **Total Participants** | **2064** | **1053** | **711** | **300** |
| **Total Presentations** | **113** | **58** | **48** | **7** |
| **Total Individual Sessions** | **63** | **52** | **11** | **0** |
| **Total ACP/POA completed** | **572** | **193** | **187** | **192** |
| **Community Requests** | **73** | **50** | **16** | **7** |
| **WECCC Referrals** | **52** | **15** | **36** | **1** |
| **Professional/Academic Presentations** | **19** | **11** | **6** | **2** |
| **WECCC Orientations** | **10** | **5** | **5** | **0** |
| **Faith Based Groups** | **15** | **9** | **5** | **1** |
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**Evaluation of Sessions:** Program evaluation surveys were collected in 78% of the sessions provided. Participants were asked to rate the presentation using the following categories:

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| --- | --- |
| **Content**  Usefulness of material  Practical to my needs and interests  Well organized; well paced  Presented at the right level  Usefulness of visual aids and handouts | **Instructor**  Knowledge  Presentation style  Organization and Clarity  Response to questions |

**Overall rating for the sessions**: 97%

**Outlined objectives met**: 94%

**Relevance to needs or interests:** 97%

**Organization/Clarity:** 95%

**Feedback from participants includes:**



* Thank you for going WAY beyond my expectations;
* She was very good and helpful; fantastic presentation!
* Excellent power point;
* Good sense of humour; very good speaker; we need more of this!
* Cant’ imagine how it could be improved it was one of the best presentations I have attended.
* Positive approach; generous and open disposition; very inviting- didn’t make us feel silly when asking questions
* As the organizer of the group I heard nothing but high praise from the participants about your style of presentation and the resources provided!   Helpful doesn’t begin to describe their reaction to your sessions!!!!!!!
* The presenter told us what she was going to teach us, had a power point for those who learn visually better than just from listening. Kept our interest; answered questions clearly; The material was presented in a way I could understand.
* I “get   it now”! I understand how many choices I have and how circumstances can change my choices and what to do when this happens;
* Book and booklets provided - VERY helpful for those of us whose memory is not that good
* I now realize serious consequences when we don’t have the knowledge of our own rights and choices.
* So very worthwhile and necessary! WOW!
* We enjoyed your visit so much. You are especially skilled at making yourself understandable to newcomers.
* I wish I had all this information when my mom was sick. Glad I came to this talk.
* Excellent presentation…Really enjoyed it!
* Excellent! Thank you! Love the material!
* I learned a lot about ACP that I didn’t know about before.
* I learned a lot of information that I can take with me for my future nursing practice. Overall, it was a great session! Thank you very much!
* I like the resources provided. The presentation was very informative and easy to follow.
* Informative and relevant!
* It was an informative presentation that helps everyday people because this is a sensitive topic to discuss with people and their families.
* Lots of great examples, made it very personal…
* Maria is very enjoyable to listen to, and the information is very educational.
* Maria was a very knowledgeable and engaging speaker. I found this presentation to be extremely beneficial and relevant to my line of work as a social work student in long-term care.
* Maria was very informative! I stand behind her 100% if she needs an extra set of hands. I’m in!
* Maria, you are awesome!
* Maria, you are very articulate and clear, and your enthusiasm is very refreshing! I really enjoyed it!
* Thank you, Maria. I will benefit from this information in my future career and in my personal life.
* The presentation was very informative, and the presenter addressed all questions asked.
* Very applicable information that can be applied to the field of social work.
* Very captivating! Great information dissemination…Keep up the great work!
* Very informative and interesting! I appreciate all the examples you have used!
* Very informative examples were helpful to put things in a realistic perspective.
* Very informative in a light-hearted way! I will highly encourage all the people I know to speak to Maria @ Hospice.
* Very personable and made the topic and its process very easy to understand – enough information to share with others and to continue the education…

**RESULTS:**

**Raising Public Awareness:** The numbers clearly demonstrate a need for Advance Care planning conversations in Windsor- Essex community. The statistical summary highlights an upward trend in all indicators measured, particularly in community requests.

In 2019, community requests have more than doubled and the marked increase in individuals requesting session after attending a presentation clearly indicates a growing appetite for this service in the community, both amongst laypersons and professionals. Within the last 2 years, 31% of those who attended a presentation completed an ACP/POA, indicating there is a demonstrated application of the information participants received. Given the sensitivity of the topic and lack of awareness about ACP in general, the numbers suggest the program has positively impacted community.

**Normalization:** WECCC has woven ACP conversations into every-day activities. Our focus has been on the positive feelings and benefits associated with learning about and participating in ACP. We highlight the messages that ACP is, not only about dying, but rather about planning for when a person is unable to make their wishes known.

In focusing on this messaging WECCC is beginning to upstream and normalize conversations about ACP. In our evaluations and feedback many participants spoke about being grateful for the tools and techniques that made a difficult conversation easier to begin; they spoke of having peace of mind, and doing this as a gift to their family and loved ones; they indicated they felt more confident and comfortable in having the conversation about their future care; many wished they had known this information before their loved one was hospitalized; others described having ‘a huge weight lifted off my shoulders’. Students commented that they found the workshop/information really changed their perspective with regard to the need for and benefits of ACP.

**Upstreaming:** Like many public health initiatives, WECCC’s ACP education and engagement program seeks to create social changes that promote healthy behavior, reduce harm, and maximize well-being and quality of life. ACP conversations require a broad participation of multiple stakeholders, not limited to only health care providers. WECCC’s role and partnerships within the community uniquely positions us to reach a diverse population. All encounters were initiated by individuals or groups who identified the need for and importance of this information. By engaging schools, workplaces, service clubs, recreation facilities, and faith leaders, momentum exists to change social attitudes and behaviours, and improve the experiences of living until death.

**Preventative rather than Reactive Approach:** ACP is an essential part of a life well lived/ planned and should begin long before someone is faced with a crisis or life-limiting illness. WECCC’s service is proactive, engaging people in conversations before a crisis rather than just reacting to changes in health conditions. Initiating these conversations earlier in the life cycle, when a person is generally healthy and has decision-making capacity, further normalizes discussion about values and life goals and avoids the stress and emotion often experienced when these conversations are had in the midst of a health crisis.

**Going into the Community -Meeting People Where They Are:** Social support has been shown to have the greatest influence on health- related quality of life outcomes (Fayers, Machin 2013). WECCC’s program meets people in their own environments - where they feel most comfortable and at ease. By gathering loved ones, friends, and people who matter most around a kitchen table or a common meeting area, social engagement and support occur organically. These difficult discussions are made easier and more comfortable when taking place before a crisis, and in the comfort of a natural surrounding—not the intensive care unit.

**Intergenerational Conversations:** An interesting result of our ACP initiative was the increased opportunity for intergenerational conversations. As one of the nursing students noted, *“ It’s not an age thing, it’s a life thing”* Students who participated in ACP workshops and presentations were very eager to share the information with their parents and grandparents or with the residents where they worked part-time. A number of students requested additional resources to complete with their family and friends.

**Providing religiously/culturally sensitive ACP:**  Faith beliefs and culture influence our ideas and perceptions of ACP. Recognizing this, WECCC’s program offers customized presentations to groups ensuring our approach to ACP respects cultural diversity. Our partnerships with cultural groups, community clergy, spiritual leaders and places of worship affords us a unique opportunity to engage groups and individuals in conversations about ACP. Our partnerships allow us to build understanding and to support the discussion about ACP in those communities.

**Ease of Accessibility to Resources:** There are excellent tools and resources available through Speak Up Campaign and other organizations, however the vast majority of the participants (both professional and lay) did not know where or how to access them. WECCC provides many of these tools and resources making it simpler and easier to access for most people. Participants often ask for a second copy of the Speak Up workbook or the case studies we use in our program. Providing support and guidance on how to use ACP resources and tools helps prepare people when they enter the healthcare system which in turn helps health care providers respect the autonomy and wishes of the patient.

**Singular Focus - ACP**: Good ACP requires substantial time for information sharing and exploring values and beliefs. Clinicians both in private practice and hospitals seldom have the time or may lack the tools or skills needed to effectively have such a conversation. Advance care planning does not typically fit well within the standard workflows of medical providers. Because there is a singular focus on ACP, WECCC provides the community with the knowledge, skills, resources, and time necessary to have quality conversation. It allows participants to fully explore their values, fear, and beliefs. Follow-up is often provided to those who have booked individual sessions. Building a successful ACP program requires passion, persistence, and patience.

**References:**

The HPCO Practical Guide to Health Care Consent and Advance Care Planning in Ontario <https://www.speakupontario.ca/resource-guide/>

Health Care Consent Act, s.21 <https://www.ontario.ca/laws/statute/96h02>

Health Care Consent Act, s.5 <https://www.ontario.ca/laws/statute/96h02>

Fayers P.M., Machin D. Quality of Life: The Assessment, Analysis and Interpretation of Patient-Reported Outcomes. John Wiley & Sons; Hoboken, NJ, USA: 2013. ]

Allan Kellehear <https://ebrary.net/1801/health/advance_care_planning_public_health_issue>

**Appendix: Group/Community Demographics**

* **Seniors** 
  + Retirement Homes/Assisted Living
  + Senior’s Apartments
  + Long-term Care Facilities (Huron Lodge)
  + Retiree Groups (Elder College, Retired Teachers Group)
* **Schools**
  + University of Windsor Nursing Department Human Meaning of Death Course

(Nursing, Social Work, Human Kinetics, Psychology, Women’s Studies, Disability Studies)

* **Churches/Faith Groups**
  + Roman Catholic Churches in Diocese (Sacred Heart Lasalle, St. Francis Xavier Tilbury, St. Paul’s Lasalle)
  + Anglican Church (St. Mark’s Anglican by the Lake)
  + Religious Groups (Holy Name of Mary Sisters)
  + Assumption University -Learn for Life Program
  + St. Mark’s Anglican Church
  + Assumption Cares Initiative
* **Community Groups & Centres**
  + Libraries throughout Windsor Essex County
  + Coffee Klatch Groups
  + Community Centres (Kingsville, Life After Fifty Gino Marcus)
  + YMCA Newcomers program (ESL class)
  + WEST (Women’s Enterprise Skills & Training)
  + W5 (Windsor Women Working with Immigrant Women)
  + Seniors Expo Libro Centre Amherstburg
  + 50+ Expo WFCU Centre Windsor
  + Libero Community Centre Amherstburg

* **Professionals/Health Care Groups**
  + Hotel- Dieu Grace Hospital Staff/Volunteers
  + The Hospice of Windsor Essex County
  + Erie Shores Hospice Leamington
  + Alzheimer’s Society
  + Windsor Family Health Team
  + University of Windsor
  + Chronic Disease Management Group

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| Advance Care Planning Services  DETAILED REPORT | | | | |
| 2019 Stats | | | | |
| January | Group/Location | Participants | Requested by | Notes |
| 19 | Devonshire Retirement Home  Holy Names Sisters | 26 | Community Request |  |
| 22 | Hospice New Nursing staff | 3 | Community Request |  |
| 24 | Living with Hospice | 48 | Community Request |  |
| 30 | Learn for Life  (St. Paul’s Church Lasalle) | 7 | Community Request |  |
| 30 | Individual Session | 1 | Followup from St.Paul talk | 1 ACP completed |
| 31 | ACP Student training | 18 | WECCC |  |
| Feb |  |  |  |  |
| 12 | U Windsor Nursing Human Meaning of Death Class | 89 | Community Request |  |
| 13 | Learn for Life St. Paul’s Lasalle | 6 | Community Request |  |
| March |  |  |  |  |
| 1 | Individual Session | 1 | Community Request | 1ACP COMPLETED |
| 5 | WECCC students | 5 | WECCC |  |
| 6 | Erie Shores Volunteer Education | 48 | Community Request |  |
| 12 | Individual Session | 1 | Community Request | Follow up from Erie Shore Hospice talk ACP COMPLETED |
| 19 | Individual Session | 1 | Community Request | 1ACP COMPLETED |
| 26 | Individual Session | 1 | Community Request | 1ACP COMPLETED |
| 27 | Hospice Wellness Group | 2 | Life & Living Well Group (LLW) |  |
| 27 | Individual Session | 1 | LLW follow-up | 1ACP COMPLETED |
| 27 | Individual Session | 2 | LLW follow-up | 2 ACP COMPLETED |
| April |  |  |  |  |
| 5 | Forest Glade Library Coffee Klatch | 16 | LLW |  |
| 11 | Social Worker+ Students Community Partners | 25 | Community Request |  |
| 15 | Hotel-Dieu Grace Volunteers | 15 | Community Request | Part of Volunteer Week Activities |
| 24 | Hotel-Dieu Grace Staff | 30 | Community Request | Partnership with HDGH+ CCBI-A for ACP week |
| 25 | Windsor Family Health Team | 16 | Community Request |  |
| MAY |  |  |  |  |
| 29 | St. Mark’s Anglican Church | 30 | Community Request |  |
| 29 | Individual Session | 2 | Community Request | 2 ACP/POAPC completed |
| 29 | Individual Session | 1 | Community Request | 1ACP/POA completed |
| June |  |  |  |  |
| 5 | Individual Session | 1 | WECCC referral | 1ACP/POA completed |
| 7 | Libero Amherstburg | 25 | WECCC Event | Information provided |
| 11 | Family Health Team (clients) | 11 | Community Request | Nurse Educator |
| 14 | Individual Session SMJ Member | 1 | WECCC referral | 1ACP completed |
| 20 | Individual Session Client | 2 | WECCC referral | 2ACP/POA completed |
| 25 | Individual Session Client | 2 | Community Request | 2ACP/POA completed |
| 27 | ACP Orientation new students | 9 | WECCC |  |
| July |  |  |  |  |
| 5 | Individual Session Clients | 2 | WECCC Referral | 2 ACP/POA completed |
| 9 | Individual Session Client | 1 | Community Request | 1ACP/POA completed |
| 12 | W5 Group | 35 | Community Request |  |
| 18 | Individual Session Client@ Huron Lodge | 1 | WECCC Referral | 1ACP/POA completed |
| 26 | Individual Session Client ACP POA | 1 | Community Request | 1ACP/POA completed |
| 29 | University of Windsor Nursing HMD | 110 | Community Request | 110 ACPs completed |
| August |  |  |  |  |
| 2 | Individual session | 1 | Community Request | 1ACP/POA |
| 6 | Gino Marcus Centre (Chronic Disease Management group) | 30 | Community Request | Windsor Essex Community Health Centre |
| 8 | Individual Session | 4 | Community Request | 4ACP/POA completed |
| 14 | Individual Session | 4 | Community Request | 4ACP/POA completed |
| 19 | Individual Session | 5 | Community Request | 5ACP/POA completed |
| 23 | Individual Session | 2 | Community Request | 2ACP completed  + Respect Survey |
| 24 | Individual Session | 2 | Community request | 2 ACPS completed  + Respect survey |
| September | | | | |
| 16 | WECCC Student orientation | 4 | WECCC request |  |
| 17 | Individual Session | 1 | Community Request | 1ACP completed |
| 23 | Assumption Cares | 20 | Community Request |  |
| 24 | YMCA ESL program | 20 | Community Request |  |
| 25 | Take a Break Essex Retirees Group | 25 | Referral WECCC |  |
| October |  |  |  |  |
| 1 | Life After 50 (Rivard Apt) | 18 | Community Request |  |
| 4 | ACP Champion Mentoring | 1 | Community Request |  |
| 9 | ACP/POAPC/DNRc | 1 | Community Request | 1DNRc form information required – Assisted person with finding physician and completing a DNRc form |
| 21 | Individual Request | 1 | Community request | 1ACP completed |
| 23 | LAF 140 Bridge | 25 | Community request |  |
| 23 | U Windsor Nursing Clinical Class | 31 | Community Request |  |
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| November |  |  |  |  |
| 7 | Life After 50 ( 920 Ouellette) | 15 | Community Request |  |
| 7 | Individual Requested(ACP info/resources) | 1 | WECCC referral | 45 minute phone conversation |
| 8 | individual Request (POAPC revised) | 1 | WECCC referral | 1 POAPC revised/ACP completed |
| 14 | Assumption Cares | 6 | Community Request |  |
| 19 | Windsor Family Health Team | 10 | Community Request |  |
| 20 | Life After 50 (Riverside Dr.) | 25 | Community Request |  |
| 21 | Individual sessions | 2 | Community Request  Follow Up from WFHT | 2 ACPs completed |
| 21 | Life After 50 (Jewish Community Ctr) | 6 | Community Request |  |
| 28 | Assumption Cares ACP Clinic | 4 | Community Request | 4 ACPs/POAPC completed |
| December |  |  |  |  |
| 2 | Individual Request | 1 | Follow up from (JCC) | 1 POAPC |
| 11 | Hospice Request | 15 | Review of ACP materials | Presentation to Clinical Leadership team |
| Total to date |  |  |  |  |

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| **2018 Stats** | | | | |
| Jan | Group/Location | Participants | Requested/Referred by | Notes |
| 10 | WECCC Student Orientation | 15 | WECCC |  |
| 11 | Erie Shore Hospice | 3 | Community Request | Leadership/Coordinator |
| 24 | WECCC Student Orientation | 15 | WECCC |  |
| Feb |  |  |  |  |
| 8 | Kingsville Community Centre | 5 | Life & Living Well (LLW) |  |
| 12 | Individual ACP Session | 1 | Community Request | ACP COMPLETED |
| March |  |  |  |  |
| 3 | Hospice SMJ Volunteer Training | 6 | Community Request |  |
| 6 | St. Francis Xavier Church Tilbury | 35 | Community Request |  |
| 22 | Heimathof Apartments | 6 | LLW |  |
| 28 | Hospice Wellness group | 5 | LLW |  |
| 29 | Kingsville Community Centre | 7 | LLW |  |
| April |  |  |  |  |
| 9 | Chartwell Oak Park Lasalle | 10 | LLW |  |
| 9 | Chartwell Royal Marquis Windsor | 25 | Community Request |  |
| 10 | Sacred Heart Church Lasalle | 19 | Community Request |  |
| 25 | Westgate Apartments | 5 | LLW |  |
| 25 | Ken Girard | 10 | LLW |  |
| 26 | Individual Session | 1 | Community Request | ACP COMPLETED Follow up from Hospice Wellness group |
| May |  |  |  |  |
| 8 | Adie Knox Community Centre | 19 | Community Request | Learn for Life Group |
| 9 | Hospice Wellness | 6 | LLW |  |
| 10 | Kingsville Community Centre | 7 | LLW |  |
| 15 | 2 Individual Sessions | 2 | Follow Up LLW |  |
| 17 | Chartwell Leamington | 13 | LLW |  |
| June |  |  |  |  |
| 4 | Elder College | 7 | LLW |  |
| 6 | Hospice Wellness Group | 5 | LLW |  |
| 6 | AMICA Retirement home | 10 | LLW |  |
| 15 | Individual Session (KM) | 1 | Community Request | Follow up form Amica talk |
| 19 | WECCC Orientation | 20 | WECCC |  |
| July |  |  |  |  |
| 11 | Faculty of Nursing: HMD Class  University of Windsor | 89Students  89 seniors | Community Request  178 ACPs completed | Students + seniors in the community |
| 12 | Kingsville Community Centre | 5 | LLW |  |
| 21 | Conference: World Congress of Sociologists Toronto | 25 | Community Request |  |
| 30 | Riverside Library | 10 | LLW |  |
| August |  |  |  |  |
| 10 | WEST.W5 | 23 | LLW |  |
| 22 | Hospice Wellness Group | 3 | LLW |  |
| Aug 29 | Sandwich Library | 6 | LLW |  |
| 30 | Kingsville Community Centre | 5 | LLW |  |
| Sept |  |  |  |  |
| 7 | Nursing Conference | 125 | Community Request |  |
| 18 | Student Orientation/Training | 15 | WECCC |  |
| 22 | SMJ Volunteer Training | 10 | WECCC |  |
| 25 | Learn for Life (Sacred Heart Ch-Lasalle) | 16 | Community Request |  |
| October |  |  |  |  |
| 10 | Victoria Apartments Amherstburg | 10 | LLW |  |
| 11 | Ouellette Manor | 12 | LLW |  |
| 29 | Dieppe Towers | 9 | LLW |  |
| 30 | Reaume Manor | 8 | LLW |  |
| 31 | YMCA New Canadians | 23 | Community Request |  |
| Nov |  |  |  |  |
| 8 | Central Library | 8 | LLW |  |
| 16 | Life After 50 East Side WFCU | 5 | LLW |  |
| 18 | Holy Names Sister | 2 | Community Request |  |
| 19 | Individual Session | 1 | Hospice Request |  |
| 19 | WECCC students | 10 | WECCC |  |
| 28 | WECCC Orientation/Training | 10 | WECCC |  |
| 29 | Kingsville Community Centre | 4 | LLW |  |
| 29 | Hospice Volunteer Training | 3 | Community Request |  |
| December |  |  |  |  |
| 5 | Life After 50 West Side | 8 | LLW |  |
| 6 | Individual Session | 1 | Community Request | ACP COMPLETED |
| 10 | Individual Sessions | 2 | Community Request | 2 ACP COMPLETED |
| 10 | Elder College Lasalle | 6 | LLW |  |
| **Totals for 2018** |  | 711  Participants | 51 presentations | 187 ACPs completed |

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| **2017 Stats** | | | | |
| **Group/Location** | **Participants** | **Requested by** | **Notes** |
| Living Your Best Life Healthy Aging Conference | 125 | Community Request |  |
| University of Windsor (Human Meaning of Death nursing class) | 95 students  95 seniors | Community Request | 190 ACPs Completed |
| Chartwell Royal Marquis | 25 | Community Request |  |
| Chartwell Oak Park Terrace | 20 | Community Request |  |
| Jewish Community Center | 15 | Community Request |  |
| Chartwell Oak Park Lasalle | 18 | Community Request |  |
| Hospice | 2 | LLW ( individual sessions) | 2 ACPs completed |
|  | 300 | 7 | 192 ACPs completed |