BC Centre for
Palliative Care

Facilitating Equitable Access to Palliative and End-Of-Life Care for Underserved Populations in British Columbia: Knowledge Exchange Series (2025)

Insights Specific to:

People Living with
Organ Failure

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For More Information

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Knowledge Exchange Overview

In Spring 2025, the BC Centre for Palliative Care on behalf of the BC Palliative Care Research Collaborative hosted a three-part virtual **Knowledge Exchange Series** on *facilitating equitable access to palliative and end-of-life care for underserved populations in BC*.

Shaped by research, expert insights, and lived experiences, the series aimed to advance an equity-informed approach to palliative care by sharing stories, highlighting promising practices, strengthening connections between health and community systems, and identifying future directions for policy, practice, and research.

Discussions and activities focused on twelve underserved population groups with limited access to essential palliative and end-of life care services.

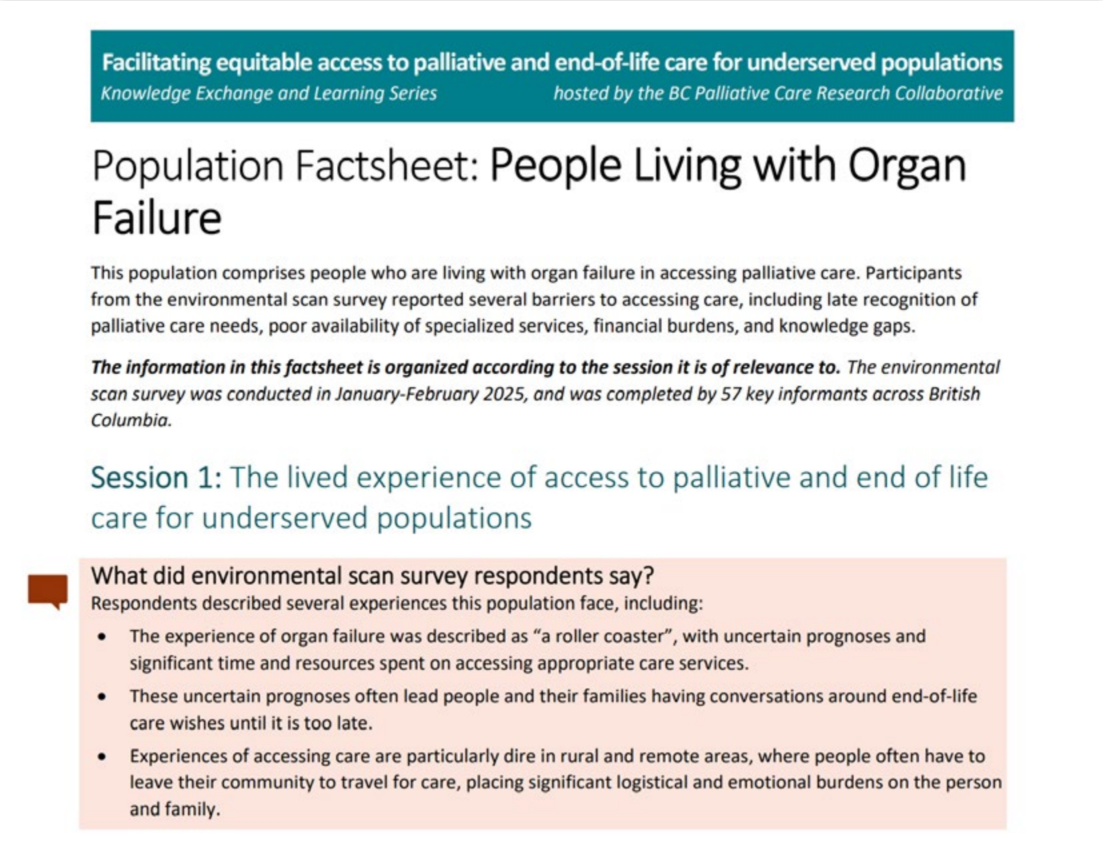
Read the full Summary Report here.

Insights Specific to People Living with Organ Failure

Insights from the Literature and Key Informants

To inform discussions about **people living with organ failure** during the Knowledge Exchange sessions, a population fact sheet was developed. The fact sheet summarizes key themes from a literature review and insights gathered from key informants through an online survey—highlighting experiences, opportunities, facilitators, and barriers to care.

View the population fact sheet here. A preview is shown below.



Facilitating equitable access to palliative and end-of-life care for underserved populations
Knowledge Exchange and Learning Series *hosted by the BC Palliative Care Research Collaborative*

Population Factsheet: People Living with Organ Failure

This population comprises people who are living with organ failure in accessing palliative care. Participants from the environmental scan survey reported several barriers to accessing care, including late recognition of palliative care needs, poor availability of specialized services, financial burdens, and knowledge gaps.

The information in this factsheet is organized according to the session it is of relevance to. *The environmental scan survey was conducted in January-February 2025, and was completed by 57 key informants across British Columbia.*

Session 1: The lived experience of access to palliative and end of life care for underserved populations

What did environmental scan survey respondents say?
Respondents described several experiences this population face, including:

- The experience of organ failure was described as "a roller coaster", with uncertain prognoses and significant time and resources spent on accessing appropriate care services.
- These uncertain prognoses often lead people and their families having conversations around end-of-life care wishes until it is too late.
- Experiences of accessing care are particularly dire in rural and remote areas, where people often have to leave their community to travel for care, placing significant logistical and emotional burdens on the person and family.

Insights from the Knowledge Exchange Series

Due to limited capacity and participants' focus on other populations, the experiences of this group in accessing palliative care were not discussed during Session 2 of the Knowledge Exchange Series. As a result, no insights were gathered regarding key challenges, potential solutions, or recommended actions.

After the Knowledge Exchange Series, participants completed a survey to prioritize the most important research questions and promising solutions for each underserved population.

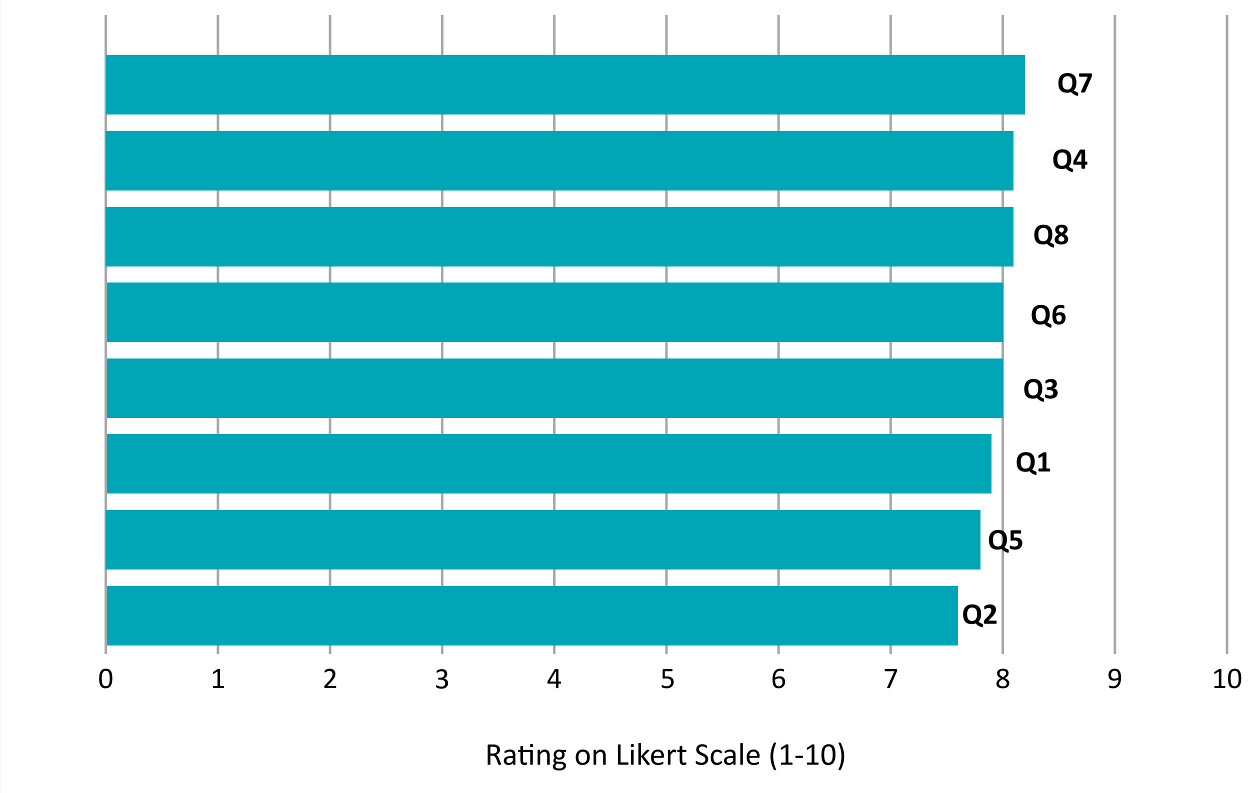
Top three rated research questions and promising solutions for *people living with organ failure.*

	Top 3 Questions to Answer	Top 3 Solutions to Consider
1	**System/Program Planning** How can we proactively identify what resources or supports are needed before a crisis occurs?	**System/Program Planning** Fund more outpatient clinics focusing on advance care planning and symptom management to avoid hospitalizations and deaths.
2	**System/Program Planning** How can long-term care settings shift towards robust, individualized goals of care planning for residents with organ failure?	**Policy** Increase funding for social workers or support staff that could alleviate the pressure of competing responsibilities on nurses.
3	**System/Program Planning** How can we create a single, consistent contact to help individuals and caregivers anticipate disease progression and ensure supports are in place ahead of time?	**Research** Increase funding for cross-discipline palliative care research in organ failure.

The average importance rating for each priority research question related to *people living with organ failure.*

Priority Research Questions: What do you want to know or solve? *(Session 3 Breakout 1)*

	Question	Average Rating
1	Research: Why do individuals with non-malignant diseases—such as organ failure or hematologic conditions—receive less access to palliative care, often receive it too late, and more frequently die in acute care settings, despite these illnesses accounting for a significant proportion of deaths?	**7.9**
2	Policy: How can we rebrand palliative care through patient education to better reflect its relevance for those living with organ failure?	**7.6**
3	Education/training: How can medical education be improved to ensure that students are adequately trained in providing palliative care for patients with organ failure?	**8.0**
4	System/program planning: How can long-term care (LTC) settings shift toward robust, individualized goals-of-care planning for residents with organ failure—moving beyond default DNR M3 orders—to reduce avoidable ER visits and hospitalizations through more meaningful, proactive conversations?	**8.1**
5	Practice/care: What does a comprehensive continuum of care look like for patients with organ failure once a terminal diagnosis is made?	**7.8**
6	Education/training: What are the future implications for caregivers who support individuals with organ failure, particularly as they face increasing care needs and diminished capacity, and how can systems be improved to reduce complexity and better support caregiver well-being?	**8.0**
7	System/program planning: How can we proactively identify what resources or supports are needed before a crisis occurs? *(Highest Rated)*	**8.2**
8	System/program planning: How can we create a single, consistent point of contact to help individuals and caregivers anticipate the next phase of a disease—like organ failure—and ensure the right supports are in place ahead of time?	**8.1**


Q7
Q4
Q8
Q6
Q3
Q1
Q5
Q2
0
1
2
3
4
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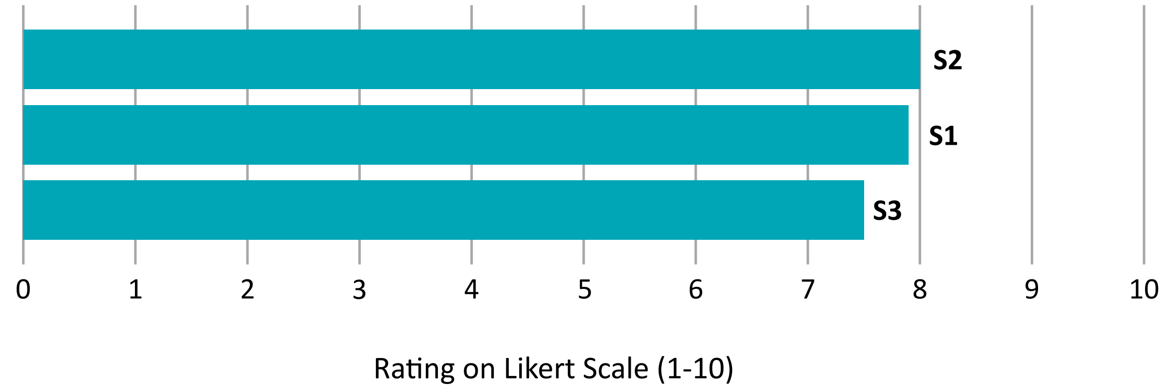
7
8
9
10
Rating on Likert Scale (1-10)

The average importance rating for each priority promising solution related to *people living with organ failure.*

Priority Research Solutions: What can be done right now and by who? *(Session 3 Breakout 2)*

	Solution	Average Rating
1	Policy: Increase funding for social workers or support staff that could alleviate the pressure of competing responsibilities on nurses.	**7.9**
2	System/program planning: Fund more outpatient clinics focusing on advance care planning and symptom management to avoid hospitalizations and deaths. *(Highest Rated)*	**8.0**
3	Research: Increase funding for cross-discipline palliative care research in organ failure.	**7.6**



For similar insights on other underserved populations, visit the BC Centre for Palliative Care website here.

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