To Whom It May Concern:

My name is Christopher Russell, University of Ottawa MD Class of 2018, and I am the corresponding author. My phone number is (905) – 941 – 1850, and email is [cruss029@uottawa.ca](mailto:cruss029@uottawa.ca). The objectives of this commentary were to explore the changing landscape of how palliative care is being delivered, and analyze how communities can use these ideas to improve end-of-life care for their members. Given the individualized nature of dying, and the unique grieving process that one would experience, this new model of care focuses on adapting to meet individual needs, and as such I feel would fit in well with the topic of this journal issue. The emerging thoughts in the Palliative Care community are that we need to shift away from the current approach to palliative care, which is that of the classic service delivery model found elsewhere in medicine. Empowering communities to take responsibility to care for one another can more appropriately address the needs of the dying and their caregivers than if handled by the healthcare system. I also explore some examples of where this model has been used in Ontario thus far. I was the only author on this commentary, and I confirm that it has not been submitted elsewhere for publication. I have no conflicts of interest to disclose, as this was simply a review of emerging thoughts in the literature.

If you have any questions please contact me.

Thank you,

Christopher Russell