SEWSLINE

The quarterly membership publication of the National Hospice and Palliative Care Organization | Fall 2018

Hospice Standards of Practice

Updated NHPCO
Publication is a
Valuable Resource
to the Field.

INSIDE

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Volunteer Manager Webinar Series

Hospice Month 2018

Short Takes, Spotlight Sections and more...

National Hospice and Palliative Care
Organization



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NHPCO's Revised Publication Now Available

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Hospice Compliance Certificate

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Volunteer Manager Webinar Series

Registration is open for a special three-part Webinar series for Volunteer Managers and Volunteers taking place on October 3, 10, and 17.



Opioid Crisis from the States Perspective

Council of States member Don Pendley shares insight from recent COS's discussions about the Opioid crisis and activity at the state level.

Payers & Partners Matter

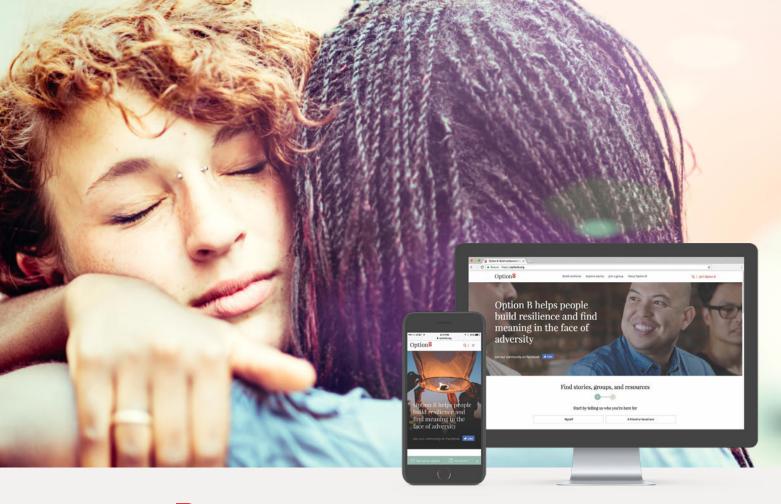
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Option **B**

Find free resources for the people you serve at optionb.org

Resilience is like a muscle.

We can help the families you serve build it.

OptionB.Org is a nonprofit initiative focused on helping people build resilience and find meaning while coping with grief and other types of adversity. At optionb.org, you'll find free resources for the families you serve, including:

- **Bereavement resources.** We offer <u>materials</u> from a broad range of experts, including advice on making sense of loss and supporting grieving children.
- **Personal resilience stories.** The families you serve can read <u>stories</u> from people who have been through similar experiences—and share their own—to help them heal.
- An online support community. Coming together around shared experiences as part of a support group can be a source of strength and hope for people experiencing loss.

Visit optionb.org to access these and other free resources for the families you serve.

Message From Edo

September 11, 2018

I can still remember vividly where I was when the world stopped turning on September 11, 2001. I was sitting on a second-hand futon in my Nashville apartment, eating a bowl of Cheerios, watching the morning news, and getting ready for my job as a judicial clerk. I was ready to head out the door when I saw the second plane hit the World Trade Center. In an instant, my world changed. I thought about my family in New York. My friends who worked in the towers (not all of whom made it out alive) and I thought about what was next. Also that morning a plane hit the Pentagon and Flight 93 was brought down in Pennsylvania. Eventually, I made my way to work, only to find that the federal building would soon be closing for security concerns.

As my world was changing, and people across the nation – and the globe – were paralyzed and gripped by fear, there were those thousands of Americans who rushed toward the danger despite their own fear. Everyone knows about the brave first responders – the firefighters, police officers, and emergency medical technicians who so heroically stepped forward in New York, Virginia, Pennsylvania, and across the nation on that day. However, we also know that spiritual counselors, therapists, social workers, nurses and others provided support to those first responders and countless individuals directly impacted by the horrors of 9/11. When I first went to work at the Visiting Nurse Service of New York (a proud NHPCO member), I was amazed by the stories about the heroic efforts of front line caregivers in the aftermath of 9/11.

Since then, I continue to be struck by the bravery and self-sacrifice of our community in the wake of wildfires, floods, shootings and other natural and man-made disasters. We (you) run toward the hurt, pain and fear and help people live their lives. It is what we do at the end of life, and also what we do throughout it. Through our My Hospice Campaign, we are publicizing the countless ways in which our community leans in to provide needed grief counseling and bereavement care (for some examples, check out Summer NewsLine). Through our Congressional advocacy work, we are assuring that Congress is aware of both our unique role in tending to our communities by delivering those services and their role in funding the services.

On the 17th anniversary of 9/11, I look back at the past with a sense of loss and sadness for what was, but also a sense of optimism about the future that we are helping to create. So much in our life is fragmented, including our health system, but I am proud to be part of a system that helps to put pieces back together.

With love and gratitude,

Edo

Edo Banach, JD, President and CEO



By Jennifer Kennedy, EdD, MA, BSN, RN, CHC and Kristi Dudash, MS

NHPCO's commitment to ensuring that our members have the tools that ultimately result in improving care of patients and their families is reflected in the updated NHPCO resource, <u>Standards of Practice for Hospice</u> <u>Programs</u>. The new 2018 version of <u>Standards of Practice</u> reflect the most current federal regulations and practice examples to help hospice providers implement the standards throughout their organization.

Hospice providers who choose to adopt the standards beyond compliance regulations will measurably demonstrate organizational excellence and improvement efforts across all areas of hospice operations. NHPCO's *Standards of Practice* support hospice providers in meeting the Quality Assessment Performance Improvement program requirements in the Medicare Hospice Conditions of Participation which raises quality care improvement for patients and families.



The Centers for Medicare and Medicaid is committed to ensuring quality care for its beneficiaries, evidenced through the implementation of the Hospice Quality Reporting Program in 2014. While HQRP captures specific patient level clinical data and caregiver satisfaction, it does not incorporate assessment and measurement of all areas of a hospice organization. The standards help providers with a broader assessment.

NHPCO's *Standards of Practice* encompass key components of quality that offer hospice providers a clear framework for a 360-degree surveillance of their entire operation, focusing on clinical and non-clinical areas such as human resources or billing.

The substantial value of the *Standards of Practice* is the effect they can have on the evolution and improvement of each organization's hospice services. Providers should actively use the standards as a practical tool for reference, self-evaluation, and continuous quality improvement activities.

The substantial value of the Standards of Practice is the effect they can have on the evolution and improvement of each organization's hospice services.



The Standards of Practice are organized around the following core components, which provide a framework for developing and implementing QAPI:

- Family/Caregiver-Centered
 Care: Providing care and services that are responsive to the needs and exceed the expectations of those we serve.
- Ethical Behavior and Consumer Rights: Upholding high standards of ethical conduct and advocating for the rights of patients and their family/caregivers.
- Clinical Excellence and Safety: Ensuring clinical excellence and promoting safety through standards of practice.
- Inclusion and Access:
 Promoting inclusiveness in our community by ensuring that

all people — regardless of race, ethnicity, color, religion, gender, disability, sexual orientation, age, disease or other characteristics — have access to our programs and services.

- Organizational Excellence:
 Building a culture of quality and accountability within our organization that values collaboration and communication and ensures ethical business practices.
 - Workforce Excellence:
 Fostering a collaborative,
 interdisciplinary environment
 that promotes inclusion,
 individual accountability, and
 workforce excellence through
 professional development,
 training, and support to all
 staff and volunteers.

- Compliance with Laws and Regulations: Ensuring compliance with applicable laws, regulations, and professional standards of practice, implementing systems and processes that prevent fraud and abuse.
- Stewardship and
 Accountability: Developing a
 qualified and diverse
 governance structure and
 senior leadership who share
 the responsibilities of fiscal
 and managerial oversight.
- Performance Measurement:
 Collecting, analyzing, and
 actively using performance
 measurement data to foster
 quality assessment and
 performance improvement in
 all areas of care and services.

The release of the revised Standards of Practice is timely as the Office of the Inspector General posted a report at the end of July 2018, "Vulnerabilities in the Medicare Hospice Program Affect Quality Care and Program Integrity," looking at vulnerabilities in the Medicare hospice benefit and specific deficits in hospice care. Application of the standards by a hospice provider raises compliance with federal hospice regulations and raises the expectation for higher quality patient and family care.

NHPCO's Performance Measures

Medicare-certified providers are required to implement and maintain a QAPI process/program for their organization which incorporates performance measurement.

A system of performance measurement is essential to quality improvement and needs to be a component of every hospice organization's quality strategy. NHPCO's performance measures can be utilized as part of a hospice's comprehensive quality and performance improvement program – and they are a benefit of NHPCO provider membership.

NHPCO provides online data submission, provider-level reporting, and comparative reporting for the following tools:

- Evaluation of Grief Support Services (EGSS) (formerly FEBS, the Family Evaluation of Bereavement Services) Redesigned and launched in 2018, the EGSS survey takes a comprehensive approach by including questions on a wide range of services,
- **Survey of Team Attitudes and Relationships** STAR is the only job satisfaction tool specific to the hospice field.
- National Data Set The NDS is an annual data collection effort. The National Summary of Hospice Care is a report of the results of the National Data Set.

Both STAR and the NDS are valuable organization and programmatic evaluation tools.

For the following tools, NHPCO provides data workbooks for automatic visual analysis and results of a hospice's data: Family Evaluation of Hospice Care (FEHC), Family Evaluation of Palliative Care (FEPC), and the Comfortable Dying Measure.

NHPCO offers support for implementation, data collection and submission, and report interpretation for all of the performance measures. Each performance measure's web page includes detailed information and guidelines for all aspects of the data collection and reporting process.

Using the Standards

The NHPCO *Standards of Practice* are written to exceed the requirements in the <u>Medicare Hospice Conditions of Participation</u> (CoPs) and teach hospice providers with useful practice examples. This version includes the most current federal regulations such as emergency preparedness requirements in the <u>Emergency Preparedness final rule</u> which were effective on November 15, 2017.

NHPCO's performance measures can be utilized as part of a hospice's comprehensive quality and performance improvement program.

Providers who adopt the standards will note a significant impact on their organization's hospice services if they use it as an active tool for self-evaluation and performance improvement.

NHPCO members may download the Standards of Practice for Hospice Programs free-of-charge from the NHPCO website. Nonmembers may purchase the standards in downloadable format from the NHPCO Marketplace.

Raise the bar in your organization by choosing to implement the NHPCO Standards of Practice for Hospice Programs today. Choose service excellence!

> Jennifer Kennedy, EdD, MA, BSN, RN, CHC, is NHPCO Senior Director, Regulatory and Quality.

Kristi Dudash, MS, is NHPCO Senior Manager, Research and Quality

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Additional Resources to Help with Compliance

Some new and updated resources have been created that provide helpful information on issues that our providers frequently ask about. Members are encouraged to download these helpful resources.



A Clinical Guide to Hospice General Inpatient *Care* is one of the newer resources developed by NHPCO that offers a clinically focused guide to the provision of general inpatient care for patients in hospice.



Referral & Admission Models Resource is designed to assist a hospice program in evaluating their referral and admission process for efficiency in operation and as a performance improvement opportunity.



Relatedness Process Flow has been updated and will help hospice providers determine whether a diagnosis or symptom is related to the terminal prognosis.



Determination of Medication Coverage has been developed to assist hospices in determining whether a medication is related to the terminal prognosis. Follow the decision tree in the document to determine relatedness and

discontinuation. Spearheaded by the National Council of Hospice and Palliative Professionals Pharmacist section, the new medication coverage flow chart has had great collaborative review from the NCHPP physician section and the NHPCO Regulatory Committee.

NATIONAL CONSENSUS PROJECT

Clinical Practice Guidelines for Quality Palliative Care

(4th Edition)

Revised to improve access to quality palliative care for all people with serious illness, regardless of setting diagnosis, prognosis, or age

Scheduled for publication Fall 2018

Learn more at: www.nationalcoalitionhpc.org/ncp





NHPCO Launches Hospice Compliance Certificate Program

First Offering will be November 3 – 4 in New Orleans

Successful hospice programs must have a thorough understanding of health care compliance issues, including developing a compliance program, compliance risk assessment, compliance policies and procedures, and anonymous reporting. To address the myriad of regulatory complexities and increased levels of scrutiny unique to the hospice provider community, the National Hospice and Palliative Care Organization has created the new Hospice Compliance Certificate Program a first for the field.

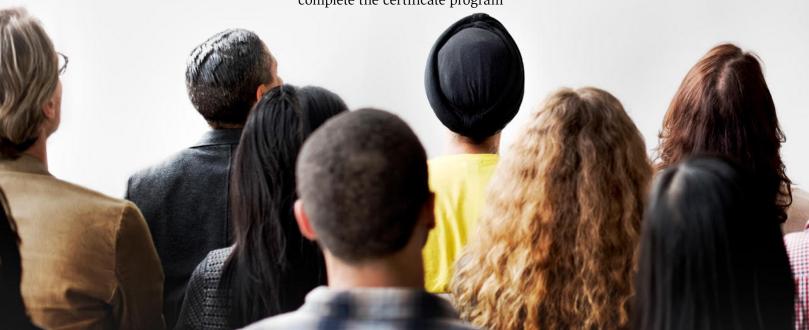
"Working in collaboration with the NHPCO Regulatory Committee, our skilled team has put together a program that not only helps established compliance officers stay abreast of the latest issues but will help those new to compliance develop a solid foundation that will serve them well," said NHPCO President and CEO Edo Banach.

In development over the past year, the inaugural offering of the two-day certificate program will be November 3 – 4, one of the preconference offerings that are part of the organization's 2018 Interdisciplinary Conference (the main conference is November 5 through 7 at the Hyatt Regency New Orleans).

Participants who successfully complete the certificate program

will benefit from a detailed review of the federal hospice regulations including conditions of payment, conducting an internal audit, looking at organizational ethics related to compliance, and audit scrutiny. The importance of the Stark law, the Yates memo, anti-kickback statutes, and inducements for referrals and incentives for marketing will also be covered.

"The two-day course is unlike other offerings, it's a must for all hospice professionals and offers hospice specific compliance content, up to the minute compliance updates, and clear application for their programs back home," said Judi Lund



Person, NHPCO Vice President, Regulatory and Compliance.

Learning Objectives of the Two-day Course:

- Identify the 27 risk areas for hospices identified by the OIG, along with tools to evaluate a hospice's compliance.
- Review components of organizational ethics related to compliance risk.
- List components and structure of an internal compliance audit, complete with topics and identified staff.
- **Identify strategies** for external auditors, including attorney-client privilege and how to prepare to respond.
- List risks for inducement for referrals and incentives for marketing.

• **Identify strategies** for attorneyclient privilege and how to use it in investigations and audits.

Continuing Education/Continuing Medical Education credit is available for compliance officers, nurses, physicians, and social workers.

Visit the NHPCO website to review the agenda of the Hospice Compliance Certificate Program and to register for the inaugural offering of the Hospice Compliance Certificate Program.

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...our skilled team has put together a program that not only helps established compliance officers stay abreast of the latest issues but will help those new to compliance develop a solid foundation...



VOLUNTEER MANAGER WEBINAR SERIES

THINKING OUTSIDE THE BOX TO CREATIVELY USE VOLUNTEERS

By Stacy Groff, MNM

Traditionalist volunteers are aging out of the volunteer "workforce." Incoming volunteers from the Baby Boomers, GenX, and Millennial generations have very different motivations, learning styles, and ideas about retention and recognition. It's important to adapt our volunteer programs to meet these needs and stay on top of trends in our communities. While it takes an effort to understand and adapt to new generations of volunteers, the payoff in engaging the skills of nurses, pharmacists, accounting professionals and more is great.

NHPCO has created a special three-part offering, *Volunteer Manager Webinar Series*, to address these concerns. The series takes place on three Wednesdays, October 3, 10 and 17, 2018, from 2:00 – 3:15 pm ET.



Beth Steinhorn

On October 3, Beth Steinhorn from VQ Strategies will present the first of the three Webinars, "Raising the Bar: Engaging Volunteers for Greater Impact." Historically, hospices have had a list of volunteer opportunities that volunteer managers try to fit volunteers into. This session will empower the participants to focus on the skills of the individuals that want to volunteer for our agencies and how we can

creatively think outside of our traditional "boxes" to leverage their talents. The session will also help participants assess how generationally friendly their agencies are and where there may be room for improvement in terms of

Technology

• Recognition

Opportunities

• Organizational Volunteer Capacity

Hospice organizations are stretched for resources. Utilizing volunteers creatively can yield great benefits, especially in times when hiring more staff may not be an option. Volunteers with professional skills are out there, but cultivating relationships with them and carving out the right roles for them are key to being successful. Once those relationships are forged, the possibilities are endless. Creating new or expanded roles can also help extend your agencies 5% Requirement.

Beth Steinhorn will return on October 17 for another session as a part of this fantastic Volunteer Manager Webinar Series to specifically address "Beyond the 3 Rs: Rethinking Recruitment, Retention and Recognition for Greater Impact." Hospice organizations often struggle with onboarding and retaining volunteers. Beth will address how we need to think outside of the box, not just doing things as we always have, in order to successfully cultivate and engage these new groups of volunteers coming our way.

It's important to adapt our volunteer programs to meet these needs and stay on top of trends in our communities.

One size fits all is no longer the answer and gone are the days when "pins, plaques and parties" satisfied everyone's motivational needs. Specific examples from a hospice that has completely revamped their recognition program from one traditional luncheon to a myriad of activities throughout the year will also be given during this session.

Finally, volunteer managers constantly are in search of quality education for their volunteers. Volunteers are not often included in staff sessions, and often bringing in high caliber speakers is not affordable. On October 10 (right between Beth Steinhorn's sessions), Carla Cheatham will present "When the World Really Does Revolve Around Them: Listening and Presence with Patients and Families"- a session appropriate for all hospice volunteers as well as the volunteer managers.



Pack the room for a wonderful presentation on the art of presence and communication during difficult times. Often our volunteers are at a bedside at the time of death, when a distraught family member arrives, or during situations involving difficult

family dynamics. Arm them with tools to effectively communicate and remain a calm presence during these situations.

As a bonus, the sessions will be available to registrants as a MP4 recording afterwards. *The Hospice Volunteer Program Resource Manual* will also be available to registrants at a discount. This is another tool that each hospice volunteer program should have as a reference for regulatory requirements (such as the 5% requirement, training structure, job descriptions, and program development tools).

Organizations with multiple sites can register additional sites at a reduced cost. Visit the NHPCO website to register for this three part series.

Register today so that your volunteer program isn't left in the dust as things rapidly change!

Stacy Groff, MNM, is Director of Volunteer Services, Tidewell Hospice and the NCHPP Volunteer/Volunteer Management Section Leader for NHPCO.

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NHPCO Resources



HOSPICE VOLUNTEER PROGRAM RESOURCE MANUAL

Are you ready to take your program to the next level? Updated in 2015 to reflect current regulatory requirements and best practices.

The manual offers suggestions for developing the "ideal" volunteer program - that is, one that goes above and beyond the "5% requirement."

Member Price: *\$74.99*Non-Member Price: *\$89.99*



WHAT IS HOSPICE

nhpco BEST SELLER! This handy pamphlet is full of facts about hospice and includes a very effective "20 Commonly Asked Questions" section. Use it for patient/family education, public outreach, and volunteer recruitment!

Member Price: \$.78

Non-Member Price: \$1.48



NHPCO'S 2016 NATIONAL STAR REPORT (PDF ONLY)

The Survey of Team Attitudes and Relationships is the first and only job satisfaction survey designed specifically for the hospice field.

This annual report allows hospices to

compare their individual survey results to national level results for benchmarking. The report also includes hospice staff salary and demographic information that can be used for budget preparations and strategic planning.

Member Price: \$40.00

Non-Member Price: \$60.00



A GUIDE TO GRIEF

NEWLY UPDATED IN 2017! This pamphlet takes readers through the feelings and symptoms of grief: shock, denial, anger, guilt, sadness, acceptance, and growth.

Member Price: \$2.00

Non-Member Price: \$2.50

New Hospice Apparel

HOSPICE: PASSION & COMPASSION POLO

Show off your hospice support in these newly added Hospice: Passion & Compassion Fleece and Polo's. They are available in both unisex and women's sizes. Get yours today!

POLO'S Member Price: \$25.00 | Non-Member Price: \$32.00 | Non-Member Price: \$50.00 | Non-Member Price: \$50.00





NHPCO's $\underline{2018\ Interdisciplinary\ Conference}$ will offer

attendees the opportunity to enhance their professional skills, explore topics relevant to many members of the IDT, and engage with colleagues at a conference focused on learning and collaboration.

Join NHPCO and hundreds of colleagues from across the country on November 5 – 7 in New Orleans for an event designed to strengthen your organization through the development of the interdisciplinary team. Consider adding one of the preconference offerings on November 3 and 4 to

enhance your professional development experience.

DYNAMIC PLENARY LINE-UP

Rue D' Orleans

Since the summer issue of NewsLine was released, there have been some exciting additions to the IDC 2018 plenary line-up. We will open the conference with Kevin Carroll, internationally recognized for his presentation skills, enthusiasm, and creativity. Our closing plenary on Wednesday morning will address a topic that all providers have had to consider, the impact of the Opioid Crisis as it pertains to hospice providers. These memorable plenary presentations will be in addition to our Tuesday morning program where we are proud to have John A. Mulder, MD, FAAHPM, HMDC, present on The

Myth of Patient-Centered Care. We offer some additional information on the opening and closing plenaries.

OPENING PLENARY

Monday, November 5, 2018

KEVIN CARROLL

Author, Speaker and Agent for Social Change

Play@Work: Unleashing Growth through Creativity and Innovation

As children, our days were filled with productive play. What was entertaining was also instructive.

Games of tag were exercises in planning, teamwork, strategy, design, decision-making, creativity, interpersonal communication and risk-taking. Play was serious business in our youth – and it should be even more serious business in our professional lives if we hope to



unleash the creative genius that spurs professional growth. By cleverly drawing from childhood

lessons, Kevin Carroll reveals the relevance of play and how we must continue to tap into those lessons for our future success.

As an author, speaker and agent for social change (a.k.a. the Katalyst), it is Carroll's "job" to inspire businesses, organizations and individuals to embrace their spirit of play and creativity to maximize their human potential and sustain more meaningful business and personal growth.

With his consulting endeavors, Carroll has helped turn creative ideas into reality for organizations including the National Hockey League, ESPN, Nike, Starbucks (his words appeared on 17 million Grande cups), The National Basketball Association, Walt Disney Company, Mattel, Hasbro, Procter & Gamble, Discovery Channel, Capital One. (Kevin Carroll replaces Chade-Meng Tan as opening plenary presenter.)

CLOSING PLENARY

Wednesday, November 7, 2018

PATTI ANEWALT, PHD, LPC, FT
Bereavement Professional
SAM SNODGRASS, PHD
Addictions Expert
DIANE SNYDER COWAN, MA, MTBC, CHPCA

Bereavement Professional

Opioid-Related Deaths: Hospice Bereavement Programs Respond

More than 42,000 Americans died of opioid overdoses in 2016,*a 28% increase over 2015. In the US, life



expectancy at birth declined for the second consecutive year in 2016, fueled in part by the rise in deaths from

deaths from
drug overdoses,
according to
the Centers for
Disease Control
and Prevention.



In addition to providing expert care and support to hospice families after death, hospice

bereavement programs are expected to respond to community bereavement needs. Many programs have begun to include those grieving death by opioid overdose to their groups, commemorative events, bereavement camps and other programming as well as to offer specialized services. Collaborating with local service providers who understand addictive family systems, these hospices are responding to the needs of a growing population of bereaved family members of all ages.

The Closing Plenary of this year's IDC will highlight the innovative work being done to support this population and introduce opportunities for other programs to join their ranks.

CONCURRENT SESSIONS

Focus on the needs and interests of hospice and palliative care professionals with the goal of strengthening the interdisciplinary organization through professional Consider adding one
of the preconference
offerings on November
3 and 4 to enhance your
professional development
experience.

For full descriptions & learning objectives:

NHPCO.ORG/IDC2018

development.

Expert
faculty and timely topics will challenge you as you explore the

diverse session

offerings most requested by professionals in the field. You can align your own educational experience to reflect your personal learning objectives. Concurrent session blocks will cover:
Community-Based Palliative Care, Interdisciplinary Team Leadership, Medical Care, Quality and Regulatory Compliance, Strategic Innovation, Supportive Care, and Pediatric Care.

PRECONFERENCE OFFERINGS

Kick off your 2018 Interdisciplinary Conference with a preconference offering. Dive deep into topics to improve organizational excellence and the delivery of high-quality care. Topics include: the Hospice Manager Development Program's Foundational Course, Interdisciplinary Care for the Developing Pediatric Team, Team-Based Approaches to Effective Symptom Management, Spiritual Assessment, Medication Management, Community-Based Palliative Care, and the inaugural offering of NHPCO's Hospice Compliance Certificate Program.

EXCITEMENT IN THE IDC EXPO HALL

"Laissez faire le bon temp..." Let the Good Times Roll within this year's IDC Expo Hall. Networking opportunities, special prizes, swag, and more make this year's IDC Expo Hall an exciting place to meet colleagues, exhibitors, and other attendees in an atmosphere that is fun, exciting, and speaks to the culture of New Orleans. The IDC Expo Hall is a showcase of new innovations, products, and services to help the members of the interdisciplinary team increase efficiency, quality, and productivity - take advantage of this conference highlight. View the 2018 IDC Floorplan to see what programs and organizations will be exhibiting this year (as of 08/08/18).

CONNECTIVITY CAFÉ WITH MIXTROZ

New this year, we've set aside a special area of the Expo Hall called the Connectivity Café where you'll have the opportunity to meet other attendees and network in a new way using Mixtroz, the ultimate networking tool that drives attendees from their phone to face-to-face meetings.

HOSPICE ON THE RIVER

On Tuesday evening, November 6 at 6:00pm join attendees and supporters in Mandeville Shed Crescent Park, a unique public space along the river that provides breathtaking views of New Orleans. The event will include music, food, drinks, and fun as we raise support for the National Hospice Foundation's Disaster Relief Fund and the Louisiana-Mississippi Hospice and Palliative Care Organization's Prison Support Project and Alliance.

THE ANGOLA EXPERIENCE: END-OF-LIFE CARE IN MAXIMUM SECURITY PRISON

On Wednesday, November 7, NHPCO in collaboration with LMHPCO and the Louisiana State Penitentiary will offer a rare and inspiring opportunity for a limited number of IDC attendees to travel to the maximum security correctional facility at Angola to explore end-of-life care. Hear from prison officials and inmates involved in Angola's award-winning hospice program and learn how it is changing life for the inmate population and corrections staff. This offering, available to IDC participants, requires special registration and an additional fee; breakfast and lunch are included on this all-day tour (7:30am to 6:00pm).

REGISTER ONLINE

Visit the NHPCO website for more information or online registration for the 2018 Interdisciplinary Conference.

THE NATIONAL HOSPICE FOUNDATION AND LOUISIANA MISSISSIPPI HOSPICE AND PALLIATIVE CARE ORGANIZATION INVITE YOU TO

HOSPICE ON THE RIVER

A Celebration and Benefit to Support NHF's Disaster Relief Fund & LMHPCO's Prison Support Project and Alliance

TUESDAY, NOVEMBER 6, 2018
6 PM – 10 PM (Rain or Shine)

Mandeville Shed \ Crescent Park \ New Orleans, LA

Food, wine and beer, entertainment, and raffle to entertain you at this fun event on the New Orleans riverfront. Election returns will be broadcast at event.

Conference Attendee: \$55

Non-Conference Attendee: \$75

Patron: \$125 (includes recognition at the event)

Tickets and sponsorship opportunities can be purchased at hospiceontheriver2018.eventbrite.com





SPECIAL THANKS TO OUR SPONSORS

YOU COULD BE LISTED HERE!

Contact Emily Van Etten at evanetten@nhpco.org, 703-647-5165 for more information.

NHPCO Partners with BMA

Organizations look forward to identifying research gaps, policy questions and areas of agreement

NHPCO is working in partnership with Better Medicare Alliance to engage in a mutual collaboration addressing the challenges and opportunities associated with possible policy changes that would "carve-in" hospice under the Medicare Advantage (MA) program.

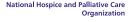
"NHPCO sees a great deal of value in this partnership with BMA. Hospice and palliative care play an important role in helping families, individuals and payers manage serious illness. This dialogue is an important step in assuring that we protect these patients and families," said Edo Banach, NHPCO president and CEO. "Whether hospice continues to be 'carved out' of Medicare Advantage or is thoughtfully and responsibly 'carved-in,' our paramount concern is for patients and families receiving hospice care."

Through ongoing dialog and a series of convening meetings, NHPCO and BMA will gather input from hospice and palliative care leadership and providers, health plan leaders, policy experts, sponsors and other stakeholders to ultimately chart a course for policy development that will meet the needs of patients, families, providers and payers.

The first, invitation-only convening will be held in October in Washington, DC. Information will be made available to the membership as it becomes available.

BMA is nonprofit advocacy coalition of more than 100 ally organizations including providers, professional associations, aging services organizations, health plans and more than 400,000 senior advocates focused on strengthening Medicare Advantage.

Read <u>NHPCO's press release</u> announcing the partnership.







NHPCO Salutes Programs Bringing Innovation to Palliative and End-of-Life Care

Six Programs Recognized in 2018 Awards and Citations of Honor

National Hospice and Palliative Care Organization and National Hospice Foundation salute the 2018 honorees of the Circle of Life Award™: Celebrating Innovation in Palliative and End-of-Life Care. The awards were presented at the American Hospital Association's annual assembly on July 27 in San Diego.

The Circle of Life Award™ celebrates programs across the nation that have made great strides in palliative and end-of-life care. Three programs that are expanding the reach of palliative and hospice care have been honored with the prestigious Circle of Life Award:

- Hospice of the Valley, Arizona Palliative Home Care Program, Phoenix, AZ
- Penn Wissahickon Hospice and Caring Way, Penn Medicine, Philadelphia, PA
- Western Connecticut Health Network, Palliative Care, Danbury, CT

"This year's honorees demonstrate that the needs of patients and their families can be met at home and in other community settings to ensure that the best possible care is provided across the care spectrum," said AHA President and CEO Rick Pollack.

"These innovative programs address critical needs that help patients best manage their health care needs."

Citations of Honor were awarded to these three organizations:

- Rainbow Kids, Intermountain Primary Children's Hospital,
 Salt Lake City, UT
- Department of Supportive Care Medicine, Moffitt Cancer Center, Tampa, FL
- Hand in Hand Palliative Care, Children's Hospital & Medical Center, Omaha, NE

"In celebrating the accomplishments of these outstanding programs, we also share lessons learned and examples of successful models of care delivery that can benefit all organizations who are dedicated to providing the highest quality of care for all people facing serious and life-limiting illness," said Edo Banach, NHPCO president and CEO. "All of us at NHPCO and the National Hospice Foundation salute this year's recipients."

The 2018 awards are supported, in part, by grants from the California Health Care Foundation, and the Cambia Health Foundation. Major sponsors of the 2018 awards are NHPCO and NHF, the American Hospital Association, and the Catholic Health Association. The awards are cosponsored by the American Academy of Hospice and Palliative Medicine, the Center to Advance Palliative Care, the Hospice and Palliative Nurses Association & the Hospice and Palliative Credentialing Center & the Hospice and Palliative Nurses Foundation, and the National Association of Social Workers. The Circle of Life Award® program is administered by the Health Research & Educational Trust.

For more information on the Circle of Life Award, visit <u>aha.org/circleoflife</u>.



This year's honorees
demonstrate that the
needs of patients and their
families can be met at home
and in other community
settings...

The Future of Healthcare Plenary Presentation

Free Webcast for Members

Michael Burcham, MBA, DHA of Narus Health delivered a provocative and well received plenary session at NHPCO's 2018 Management and Leadership Conference. NHPCO is happy to make a recording of his presentation, The Future of Healthcare, available to our members at no cost via our E-OL online learning portal.

As Burcham explains, innovative companies are creating new opportunities designed to disrupt and invade the health care venture space; they are nibbling at the edges of the traditional health care ecosystem, bringing new designs from technology, retail and hospitality business models that engage the consumer directly and leverage the workforce.

Hospice and palliative care providers cannot operate on the periphery of this new momentum,



Michael Burcham onstage at MLC 2018.

but must be part of it. According to Burcham, "At this time in healthcare, we are challenged by one of two choices: accept and entrench ourselves in the status quo or help lead the change." Take advantage of Michael's expertise and insight regarding change and the future.

Changes in the 2019 Webinar Series

Studies continue to show the impact committing to and investing in professional development has on staff satisfaction and untimely, retention. There are many ways programs can make minor investments that can have a major impact on both of these important staffing issues.

Online learning opportunities continue to be one of the most popular ways organizations take advantage and offer continuing education credit to their staff for a much lower price than in person conferences and learning events. Bringing together multiple members of your team for one price is not the only benefit of online learning. The opportunity for teams to interact and engage over what they are learning also has many residual benefits.

NHPCO is expanding its Webinar content in 2019 by including topics in six different tracks:

- Clinical
- Innovation in Access and Community-Based Palliative Care
- Interdisciplinary Team

- Management and Leadership
- Quality & Regulatory
- Supportive Care

Working with more than 100 members from our various committees and councils (Professional Education, Physician Education Subcommittee, Quality & Standards, Regulatory, Diversity, Community-based Palliative Care, and ChiPPS) the 2019 content has been tailored to the most relevant topics for our field.

Offered on the second Thursday and fourth Tuesday of the month (in most cases, check exact dates below), NHPCO webinars are a great and convenient way to plan for your 2019 educational calendar.

As you plan for your 2019 budgets, purchasing a webinar package allows you to save over \$450 on packages of 24. Packages of 12 and 6 also

available at a discounted price. Purchase before the end of the year to receive the most savings.

Date:	Track:	Title:	
February 26	Quality & Regulatory	Building a Culture of Accountability	
March 14	Management and Leadership	Aligning Business and Clinical Practices	
March 26	Clinical	End-Stage Alzheimer's/Dementia Management	
April 11	Supportive Care	Life Review and Closure	
April 23	Interdisciplinary Team	Challenges in Establishing and Maintaining Professional Boundaries	
May 9	Innovation in Access and Community-Based Palliative Care	Using Data to Inform and Improve	
May 28	Quality & Regulatory	Visits at the End of Life	
June 13	Management and Leadership	Orientation and Onboarding	
June 25	Clinical	Clinical Assessment and Documentation	
July 11	Supportive Care	Caregivers: A Key Focus of Care	
July 23	Interdisciplinary Team	Improving IDT Practice though Patient/ Family Inclusion	
August 8	Innovation in Access and Community-Based Palliative Care	The Palliative Care Value Equation for ACOs and MCOs	
August 27	Quality & Regulatory	Quality and Regulatory Hot Topics	
September 12	Management and Leadership	Revenue Cycle Management	
September 24	Clinical	Integrative Therapies	
October 10	Supportive Care	Providing Culturally Sensitive Care	
October 22	Interdisciplinary Team	Staff Competencies	
November 14	Innovation in Access and Community-Based Palliative Care	Target Populations for Growth and Expansion	
November 21*	Quality & Regulatory	Comprehensive Assessment and Plan of Care	
December 12	Management and Leadership	Personnel, Performance and Productivity	
December 19*	Clinical	Advanced Pain Management	

Information will soon
be available on the
NHPCO website offering
more details and online
registration. Visit www.
nhpco.org/webinars.

National Hospice and Palliative Care Month:

Outreach Materials for November...and all year long



My Hospice. A Program that Works. A Benefit that

Matters. The theme for November's National Hospice and Palliative Care Month 2018 was designed to complement the My Hospice Campaign launched earlier this year. Whether you're creating advertisements, newsletter pieces, website graphics, or social media, we hope the materials we've created for our members will be useful to promote awareness in the community – during November or any time during the year.

Members are encouraged to use the theme and tagline in other aspects of their outreach. Doing so helps promote unified messaging in communities across the country.



Materials include four different ads, social media graphics and more. We encourage providers to be as creative as possible in using these materials that are linked in the Outreach Tools section of the website, www.nhpco.org/outreach.

The displays ads are available online as

full-page and half-page horizontal high-resolution PDFs. Versions of the ads are available without reference to National Hospice and Palliative Care Month, so they can be used in November and thereafter.

Additional resources available online include: an introduction to outreach, document templates, an article collection of pieces that can be used throughout the year, PowerPoint presentations, and links to archives of past outreach materials.

Social Media Outreach Day -November 2

The first Friday in November has become our traditional day of coordinated <u>social media action</u>. So, on November 2, we want the hospice and palliative care community to flood social media with images that promote awareness building on the theme "My Hospice."

Social media posts on November 2 might feature photos, graphics, or short videos provided by hospice and palliative care organizations/professionals or individuals that capture hospice and/or palliative care at its best – the specific post we leave up to you! One suggestion is to take a selfie with the "My Hospice" hand-held banner - then add a message showing your hospice spirit. Download the PDF banner. Additionally, a collection of "evergreen" social media graphics is available from NHPCO.

Share Your Story on My Hospice

Visit the My Hospice Campaign website to read <u>some of</u> the blogs shared by our members. Then, <u>share your story</u> with us for consideration as a blog post or social media post.

Answers to Common Questions

Do I need permission to personalize the ads—or use the photos or copy in other materials?

No, current NHPCO members do not need permission to utilize these ads in any way that helps them promote their organization and services. In fact, NHPCO encourages members to maximize the use of these materials to advance the hospice and palliative care message!

How do I personalize the ads and insert my organization logo?

The ads are provided as high-resolution PDFs that can be opened and easily manipulated in Adobe Acrobat Professional or Adobe Illustrator.

Where can I find the "Member of NHPCO" logo if I also want to insert that? Various versions of the "Member of NHPCO" logo are also available online. Members can use the logo in these display ads, on other materials, or even on their website to visually communicate their commitment to quality.

Through your direct outreach efforts, you shine a powerful light about what you are doing in your community and raising awareness about hospice, palliative care, and advance care planning – all of which are essential components of high-quality care for people coping with serious and life-limiting illness.

If you have questions about your outreach efforts, please feel free to contact the Communications Team at communications@nhpco.org. Good luck!





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we've created for our
members will be useful
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during the year.

Opioid Crisis from the States Perspective

Council of States Hosts Roundtable Exploration of the Critical Issue

By Don Pendley, MA, CAE, CFRE, APRDirector of Hospice & Palliative Care
Home Care & Hospice Association of New Jersey

While almost everyone agrees hospice is a blessing to the terminally ill and their families, the industry nonetheless occasionally gets affected by societal controversy. Our current controversy concerns the opioid crisis.

"Crisis" is somehow too mild a word. According to the Centers for Disease Control, drug overdoses killed 63,632 Americans in 2016 – more Americans than died throughout the 20-year Vietnam War. Nearly two-thirds of these deaths (66%) involved a prescription or illicit opioid. Recognizing that negative publicity about narcotics often reflects on hospice – despite our adherence to high standards of practice – NHPCO's Council of States organized three roundtables about opioid abuse as part of its spring meeting, which provided much of the content for this article.

The states have addressed the issue with different approaches, different degrees of severity and sometimes with a flood of legislation. Here in New Jersey, for example, legislators in the 2016-17 session year proposed 37 different bills addressing opioid prescription, enforcement, education, access to treatment and availability of overdose medication. We were successful in every relevant case at avoiding any negative impact from the bills on hospice.

New York State has passed an Opioid Stewardship Act to generate revenues for opioid treatment and prevention (which heretofore had been funded exclusively through general funds). Manufacturers, distributors and importers of controlled substances pay into the fund. Industry experts say the law could increase costs of drugs 45% or more, and these pass-through costs may pose considerable burden to hospices, which are ready facing increased drug prices.

In Minnesota, a penny-per-pill tax on drug makers to generate funds for opioid treatment and prevention was withdrawn from a comprehensive legislative proposal.

Wisconsin expanded its effort to combat the heroin and opioid epidemic by creating a behavioral health review committee proposing substance abuse counseling and modified administrative rules related to substance abuse counseling. It qualifies physician assistants and advanced practice nurses to provide maintenance and detoxification treatment. The act also requires school boards to provide instruction about drug abuse awareness and prevention, extends graduate training of psychiatric nurses and created education materials for social workers handling substance abuse cases.

In Nebraska, the Palliative Care Advisory Council is drafting a response to the opioid crisis "to ensure that patients who need their medications are able to…receive it. There has been a 'chilling effect' according to a hospice medical director."

The Virginia Association for Hospices and Palliative Care has developed (and is revising) its excellent <u>Risk Evaluation & Mitigation Tool Kit: Strategies to Promote the Safe Use of Opioids</u> (PDF), which is available online.

State hospice associations need to watch all proposed bills very closely. We need to examine virtually all opioid-related bills introduced into our state legislatures to be sure they include a "hospice exemption" to rules that limit prescribing ability or require warnings to patients. Once the oversight is brought to the attention of legislators, they are usually quick to include our suggested exemptions in their bill – they merely didn't consider the impact of their initial draft on hospice. They further see that patients in hospice care with six months to live have little likelihood of addiction. Often, they need to be educated that adequate pain management for hospice patients often requires volumes of pain medication that healthy patients could never tolerate. Frequently, the "hospice exemption" is extended to include any patient with cancer.

The states have
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Council of States Spotlight

Expanding the "hospice exemption" to palliative care patients – while desirable – is sometimes complicated: well-intentioned pain management specialists may use "palliative care" to describe their services and may over-prescribe narcotic pain medications for patients with short-term post-surgical needs.

Another troubling matter is that some bills require the physician to explain the dangers of addiction to the patient, which only adds fuel to many families' resistance to narcotics. Some states have proposed labeling to provide that warning. Other states have proposed severe limits to the length of a narcotic prescription – as short as three to five days, which presents a significant burden to hospice.

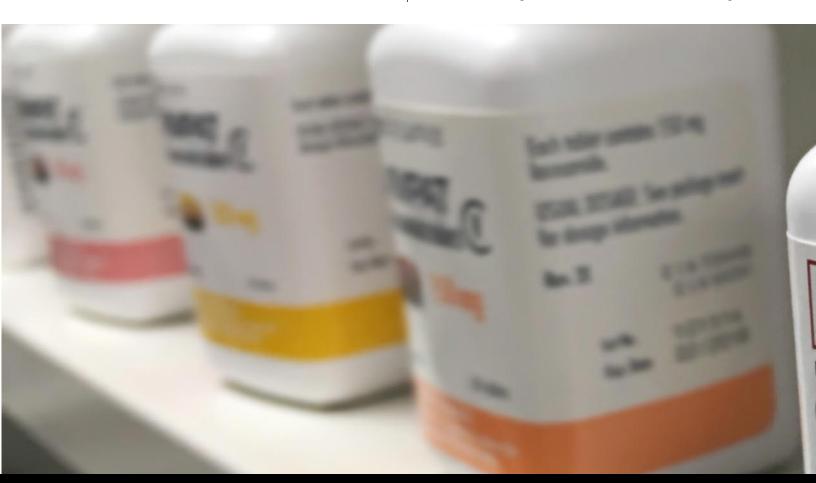
Addressing many sides of the issue, NHPCO President and CEO Edo Banach's February 16 letter to Sens. Orrin Hatch and Ron Wyden of the Senate Committee on Finance, advised Congress to make sure "we do

not unintentionally impair the ability of hospice and palliative care providers to appropriately manage their patients' pain" as government drafts legislation to combat opioid abuse.

Other questions in the controversy remain unresolved, such as opioids being used for selfmedication by family members. What responsibilities does hospice have to them and their families?

And yet another issue -- as attending physicians become more and more gun-shy about prescribing opioids, are hospice medical directors increasingly the prescriber of all the patients' narcotics, placing their own licenses at risk? Are oncologists deferring prescribing of opioids to pain management specialists?

One aspect of the opioid crisis that seems to be resolving itself is disposal of opioids. For years, hospice teams followed the guidance of the federal government and mixed drugs with clean cat litter (even though



families sometimes tell IDT members this was "disrespectful" or "wasteful"). The DEA's rule about opioids remaining the property of the patient's estate caused problems, too, when drug-seekers broke into people's homes during patients' funerals.

To address the disposal issue, recently the U.S. House of Representatives unanimously passed the Safe Disposal of Unused Medications Act (H.R. 5041), which would allow hospice personnel to assist in the disposal of unused medication following a patient's death. At the urging of the Home Care & Hospice Association of New Jersey, a similar bill was signed into law by Gov. Chris Christie last year, with the additional provision that both the hospice and patient/family agree that the hospice would dispose of medications in the home. Ohio, Delaware and South Carolinas have already passed laws allowing hospices to dispose of medications in the home.

Many have called for better education of families about disposal, but that doesn't always solve the problem. Joel Bauman, medical director of VNA Care Hospice and Palliative Care, was quoted in The Washington Post as saying that families don't have to comply – "Our experience is maybe only half do. We don't know what happens to these medications. And we have no right, really, to further inquire."

Attention Dispenser: Accompanying the patient upon dispensing.

OxyContine

OxyContine

OxyContine

Edo Banach's February 16
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palliative care providers to
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patients' pain."

Council of States Spotlight

Especially disconcerting is the too-frequent drug diversion by family members, private duty nurses and aides and even hospice team members. Some practitioners have taken to conducting urine drug screening tests, partly to see if the patients are taking drugs other than what the physician/hospice prescribed, but also to see if the prescribed drug is not being taken, which could indicate the possibility of diversion.

Some signs of possible diversion are easy to spot. Many hospices have begun evaluating families' history of drug addiction as part of the patient/family assessment. Or, a patient's complaint that they "can't find the pills" or "I dropped them down the sink" might be a clue to possible diversion. Do patients or family members ask for refills early? Or ask for refills when another doctor is substituting for the patient's attending physician? Proper utilization of the state prescription drug monitoring program can identify multiple prescriptions to single patients and frequent drug counting can help as well. Two recent studies, referenced in The Washington Post, suggest that hospice doctors and social workers "are not prepared to screen patients and families for drug abuse, nor to address the theft of pain medication." Hospices could sponsor such training.

Certainly, hospices are doing their part to help reduce opioid abuse. Many are exploring nonopioid pain relief whenever possible -- music, spiritual support, humor or distraction, exercise and hot or cold packs are widely used for their palliative effects, as are acupuncture, mindfulness meditation, pet therapy, aromatherapy, biofeedback, guided imagery and other complementary techniques. Others are following NHPCO's best practice guidelines for opioid prescription and management. Many hospices offer grief and bereavement counseling to those who have lost loved ones to drug overdoses.

Is your state or hospice making special efforts to help stem the tide of opioid abuse? If so, let NHPCO know about it by emailing Hope Fost at hfost@nhpco.org.

Don Pendley, MA, CAE, CFRE, APR, has led hospice advocacy in New Jersey for 25 years. He is a past chair of the NHPCO Council of States.

Hospice Action Network Opioid Toolkit

In response to this crisis, the Hospice Action Network team worked with legislators to ensure that hospices could help prevent illegal use and diversion by supporting legislation like the Safe Disposal of Unused Medication Act, which passed in the House of Representatives with a unanimous vote.

Providers are encouraged to utilize the online Opioid Toolkit, developed by Fullbright Fellow, Lenka Vanova, along with other hospice and palliative care leaders and advocates. **This toolkit provides the following:**

- Statistics about the scope of the issue
- Legislative limitations, restrictions, and taxes in related to opioids
- Fact sheets
- Talking points
- A list of stakeholders

Find the <u>Opioid Toolkit</u>, an online resource, on the HAN website.



Interested in starting a pet care program for your patients?

Pet Peace of Mind offers a turnkey program for nonprofit hospices that covers all aspects of pet care for your patients. Visit www.petpeaceofmind.org.





Providing Comfort. Celebrating Love. Remembering Life.



The Heartland Hospice Memorial Fund is a non-profit organization whose primary purpose is to assist those who are coping with terminal illness, death, and the process of grief and bereavement.

HeartlandHospiceFund.org

Palliative Care Does Not Have To Be a Loss Leader

Payers & Partners Matter

By Christopher Acevedo

For the better part of two decades I have been assisting various healthcare entities from small hospices to large comprehensive health systems create and sustain palliative care programs throughout the country. It still amazes me however, that most initial planning and/or operational discussions begin with the provider stating something along the lines of "I know this program will always lose money, but..."

There are numerous factors that come into play – from the initial commitment in an internal infrastructure to payer mix to community partners. And while palliative care may not be one of the more lucrative specialties, it should not be a given that developing a palliative care program will result in a new loss leader for your entity. For the purposes of this article we will explore payer mix & community partners and the significance they play in the long-term sustainability of your palliative care "program."

Traditional Medicare and Medicaid beneficiaries may represent the bulk of your patient population, but without a focus on commercial payers and the growing number of Advantage plans convoluting the payersphere, you program will suffer from routine write-off syndrome. And, since quality palliative care programs will result in direct cost savings to these payers, it is only fair that you negotiate payment rates

that reflect the work your clinicians are doing to offset total medical expenses (TME). Whether it is more beneficial for your program to accept a permember-per-month (PMPM) rate or fee-for-service (FFS) rates for the care provided is generally based on the specific population demographic and geography served. Which rate(s) you accept can have profound impact on financial solvency.

Community partners from 200+ bed nursing facilities to solo physician practices will also play a pivotal role in your success.

Given that palliative care has ambiguity surrounding the nature of care being provided to patients, it is essential that your program outline its differentiators - what symptoms will your clinicians be treating that the referral source cannot/may not be addressing and why. Provide clear guidance supporting the clinical indications under which you expect to receive a referral in the first place so that your clinicians do not show up to the bedside of a frail, unresponsive, cachectic patient - with no caregiver present - staring at a referral that simply states Palliative Order to Eval/Treat containing no indications or reason for the visit. You must be prepared to outline a detailed plan and define how your program will benefit their patients, ease the burden of post-acute transitions and specifically outline what your program will do to improve clinical outcomes and positively influence their bottom line.

While the attention given to developing a solid internal infrastructure is imperative (it is not a mistake that I ended the last paragraph with

quotations around the word program), the longevity of the program will be determined by its ability to find the right partners from a payer, facility and provider perspective. Far too often palliative providers are ill prepared to negotiate creative payment options with commercial and managed care payers and fail to express more than an idea to their potential community partners. Providing substantive details that outline the benefits to these partners in care should ease the flight pattern of unneeded operational, clinical and financial turbulence and help ensure the financial wellness of your palliative care program.

Christopher Acevedo is the Chief Operating Officer at Acevedo Consulting. He has more than 15 years of health care experience including a particular expertise in chart audits, compliance and education relative to hospice and palliative physician documentation and coding. Chris is a frequently sought after speaker.

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ChiPPS Pediatric Spotlight



Whether you work with children intermittently or you are a pediatric palliative care professional, NHPCO's 2018 Interdisciplinary Conference will provide an environment for you to grow and build on your knowledge of caring for pediatric patients of all ages and their families.

Sunday, November 4, will bring a full day (8 hours) of pediatric content at the Expert Interdisciplinary Care for the Developing Pediatric Team preconference seminar. Join us for an interactive day of education led by expert interdisciplinary pediatric hospice and palliative care faculty. This preconference seminar is designed for all members of the interdisciplinary team– nurses, physicians, social workers, spiritual care professionals, bereavement professionals, child life workers, music therapists, and related disciplines – who are seeking to further their knowledge of caring for children and their families.

The major topics that will be covered in the seminar are:

- Regulatory issues
- Advance care planning
- Siblings

- Communication techniques
- Developmental milestones
- Cognitive understanding
- Spirituality
- Grieving
- · Legacy building
- Assessment Tool

But that's not all! Throughout the week you can expect in-depth educational sessions on:

- Using methadone safely and effectively for hospice pain management for adult and pediatric patients.
- Managing pediatric seizures at end of life.
- The use of music therapy in a pediatric hospice and palliative care program.
- The vital use of child life in palliative and hospice care.
- An innovative approach to defining the pediatric needs state-wide.

As you build your competencies there will also be ample opportunities for networking with others interested in pediatric hospice and palliative care. Members of NHPCO's ChiPPS (Children's Project on Palliative/Hospice Services) pediatric advisory council will be at the conference ready to answer questions and provide additional resources. Come join us in strengthening and enhancing pediatric palliative and hospice skills with the goal of increasing access to pediatric care services across the country and beyond!

"What I am most looking forward to is networking with colleagues in the field of pediatrics. It is such a wonderful opportunity to collaborate and learn from one another. I always leave NHPCO IDC trainings full of excitement and takeaways for my own organization."

-Holly O. Davis, MS, APRN, Co-chair, ChiPPS Leadership Advisory Council

New Issue Pediatric E-Journal Focuses on Diversity

Issue #52 (August 2018) of our ChiPPS E-Journal explores topics related to caring for diverse populations. Professionals and volunteers who work in pediatric palliative/hospice care often are presented with children and families whose religious, cultural, and ethnic backgrounds are different from their own. This issue seeks to provide at least a beginning in discussing these matters.

Download this collection of articles (PDF) free of charge.

Visit the ChiPPS E-journal archive page to find all available issues.



ChiPPS E-Journal

Children's Project on Palliative/Hospice Services

Children's Project on Palliative Care Organization

Refeased in collaboration with the National Hospice and Palliative Care Organization

National Hospice and Palliative Care Organization

1731 King Stimet, Alexandria, Virginia 22314

WWW.NHPCO.org/pediatrics

Come join us in
strengthening and
enhancing pediatric
palliative and hospice skills
with the goal of increasing
access to pediatric care
services...

NHPCO Contributes to Univision Campaign

Earlier in spring, Univision launched the Una Vida Mas Saludable campaign as part of its commitment to informing, entertaining, and empowering Latino communities to live healthy lives. As part of the campaign, Univision designated June 18 through July 14 as health season. During health season, Univision cast a spotlight on various health issues impacting the Latino community which included healthy aging for seniors during the final week of the campaign.

NHPCO was a partner in the Una Vida Mas Saludable campaign and resources from <u>CaringInfo.org</u> were

shared with Univision. Additionally, Diane Deese, a member of NHPCO's Diversity Advisory Council, wrote an op-ed for the campaign offering some basic information about hospice care.

We share the English version of this op-ed below – and offer a <u>PDF version in Spanish</u> that providers are invited to share with the Spanish-speaking members of their communities. Thanks to Diane and to Univision for letting NHPCO be a part of this valuable public education effort.

You Have the Right to End-of-Life Care

The basics—and magic—of hospice services

By Diane Deese, MCLSS-GB, CACPFI, EMT,

Vice President of Community Affairs, VITAS Healthcare NHPCO Diversity Council

In more than 20 years as a hospice professional, I have watched families, and particularly minority families, cope with death and dying. I have watched those people learn to think in new ways about death and dying, thanks in large part to hospice and the organizations—from churches and community groups to national professional organizations—that support hospice and its goals. For over five years, I have been serving on the Diversity Council of the National Hospice and Palliative Care Organization, a Council that works hard to provide outlets for all people to become more aware of hospice services and the value it provides to patients and their families.

As vice president of community affairs for VITAS Healthcare, I am proud of the role VITAS has played in the American hospice movement. In 1979, we passed the first hospice licensing law, defining what a hospice is. In 1982, we influenced the passage of the Medicare hospice benefit, ensuring that end-of-life care is the right of every American. In 2018, we celebrate 40 years of influence, as a pioneer and industry leader.

Still, there are families who don't know the facts, who are unlikely to take advantage of a benefit they have earned. That's why I am happy to explain the basics of hospice whenever I get the chance.

What is hospice care?

Considered a model of quality and compassionate care for the last months and weeks of a person's life,

care for terminally ill patients—hospice—comprises specialized healthcare, pain treatment and spiritual/emotional help provided by a team of professionals and specifically adapted to the patient's needs and wishes.

The concept of hospice is that everyone has the right to die with dignity and without suffering, and that families deserve to receive the support necessary to help them care for a loved one who is terminally ill.

Palliative care concentrates on caring, not curing. In most cases, the care is provided in a patient's home. Services for terminally ill patients are also offered in independent residences, hospitals, retirement homes and other long term care centers. The services are offered to patients of any age, religion, race and illness.

How do these services work?

Generally, a relative, the "primary caregiver," oversees basic care and helps to make decisions about the plan of care along with the patient and the hospice team. Members of the hospice team make routine visits to evaluate the patient's condition, support and educate the caregiver and provide additional services. And because in hospice we learn to expect the unexpected, the hospice team is available 24 hours a day, 7 days a week.

The hospice team is an "interdisciplinary group" of healthcare professionals that understands death, dying and how to meet the patient's physical, spiritual and emotional needs. Generally, the team consists of:

- Patient's primary physician
- Hospice physician
- Nurse
- Hospice aids
- Social worker

- Chaplain
- Volunteer
- Integrative therapy specialists as needed: speech therapist, physiotherapist, occupational therapist, music therapist, etc.

The plan of care also includes home medical equipment, supplies and medications related to the terminal illness. The hospice team determines what equipment, exams, procedures, medications and treatments are necessary to provide high-quality services. That's the basics of hospice.

There is also a magic to hospice that is harder to define: the bonds that are created, the breakthroughs when a family begins to share its concerns, the life left to live once symptoms are relieved. Now that you understand the basics, get more answers at <u>CaringInfo.org</u>.

NHPCO was a partner
in the Una Vida Mas
Saludable campaign and
resources from CaringInfo
were shared with
Univision.

News From We Honor Veterans

Vet-to-Vet Café Gives Veterans a Place to Socialize and Share Stories

By Katherine Kemp, Veterans Services Manager, NHPCO



The Vet-to-Vet Café allows Veterans to share stories and socialize.

We Honor Veterans partners know the importance of community involvement, and there is no shortage of creative ways to serve patients through hosting events. I was

thrilled to receive an invitation to Level 5 Pilot
Program Partner Beacon Hospice, an Amedisys
Company in Hyannis, Massachusetts. Each month,
Cynthia Robotham and Judy Hunter coordinate a
Vet-to-Vet Café as a way for Veterans to get together
and socialize. I was fortunate enough to attend a
café in August and experience the comradery and
effect that a simple gathering over coffee can have.
Cindy and Judy explained that it is open to everyone
and the invitation is sent with no expectations –
Veterans can share stories, mingle with each other or
just sit back and listen while enjoying a baked good.
Some are hesitant, but soon find comfort in a muchneeded outlet and often return as they are able.

I made my way around the room, greeting Veterans, thanking them for their service, and attending to the pressing matter of refilling empty cups and the need for another pastry. At one point the distinct call of a South Boston accent came across the room, "She came all the way from D.C., she better give us a speech!" *Read more...*



NHPCO Welcomes Robert Wilkie as Secretary of Department of Veterans Affairs

The National Hospice and Palliative Care
Organization (NHPCO) congratulates Robert
Wilkie on his Senate confirmation as United States
Secretary of the Department of Veterans Affairs.
Secretary Wilkie's confirmation took place in July.

NHPCO looks forward to introducing Secretary Wilkie to the innovative We Honor Veterans program and working collaboratively with the Secretary and his staff to ensure that all Veterans have access to person-centered, family-oriented, interdisciplinary care – and that they are recognized and honored for their service to our nation, particularly at the end of life. *Read more...*

MJHS Surprises Patient with Special Gift and Honor

By Audrey Waters, MJHS Health System

U.S. Army Sgt.
David Barris
proudly served in
the Korean War
and still tears up
when he hears the



U.S. Army Sgt. David Barris (seated) surrounded by his family and members of his hospice care team.

National Anthem. As a teenager in his native Puerto Rico, Mr. Barris sold candy in movie theatres. Ever the patriot and with his mother's blessing, he enlisted in the Army. After being honorably discharged from the military in 1952, someone stole his dog tags and although devastated, Mr. Barris moved forward and spent the next 38 years working for ADP Security Systems. *Read more...*



MyHospice

Campaign Update

Vital Signs



5,075,428

Impressions of the #MyHospice hashtag



\$444,520.91

Equivalent Advertising Value of Earned Media



665,205

My Hospice video views

Media Highlights

Date	Outlet	Headline	Reach
Aug. 25, 2018	Charleston Gazette-Mail	Sen. Capito leads multiple effort to improve care for WV aging	108,771
Aug. 3, 2018	Medium	Hospice Caregivers are "Helpers" Committed to Coordinated Care	42,791,399
July 31, 2018	Kaiser Health News	KHN Morning Briefing	147,008
July 26, 2018	Arkansas Democrat Gazette	A difficult journey: Hospice helps navigate end of life	47,444
July 24, 2018	Home Health Care News	House Passes Bipartisan Hospice Bill Strengthening Physician Training, Patient Outreach	14,674
July 23, 2018	The Hill	Congress: Support access to palliative care for aging Americans	1,463,486
July 13, 2018	Florida Today	Hospice one of few examples of health care that works	221,983
June 22, 2018	Wichita Eagle	Rural Hospice Caregivers Do the Right Thing - Even When It's Hard - So Let's Make it Easier	1,076,086
June 15, 2018	Danvers Wicked Local	He was a beloved father. I was the nurse who helped him live on his terms until his death.	3,477
June 4, 2018	The Hill	Reform burdensome Medicare regulations to improve end-of-life care	1,956,545
May 8, 2018	Bloomberg BNA	Groups Seek Medicare Pre-Hospice Benefit for Seriously III	127,940
April 24, 2018	Morning Consult	Coordinated Care Is More Than a Buzzword for Hospice Providers	190,678

Who Is Listening

■ SENATOR SHELLEY MOORE CAPITO

Shared a photo with My Hospice advocates on Twitter

■ SENATOR CLAIRE MCCASKILL

Tweeted about the Rural Access to Hospice Act

■ CONGRESSMAN TOM REED

Liked a My Hospice thank you ad on Twitter

CONGRESSMAN DANIEL WEBSTER

Liked a My Hopsice post by NHPCO on Twitter

CONGRESSMAN GENE GREEN

Liked a thank you post about PCHETA on Twitter

CONGRESSMAN ELIOT ENGEL

Liked a thank you post about PCHETA on Twitter

■ CONGRESSMAN BRIAN MAST

Shared an article quoting NHPCO on Twitter

■ CONGRESSWOMAN LYNN JENKINS

Shared rural Kansas op-ed on Twitter

■ CONGRESSMAN ROGER MARSHALL

Liked a post sharing the rural Kansas op-ed on Twitter

■ FLORIDA TODAY

Shared a My Hospice op-ed on Twitter

MORNING CONSULT

Shared a My Hospice op-ed on Twitter



Links to Some Helpful Online Resources

Quality and Regulatory

- Quality Reporting Requirements
- QAPI Resources
- Regulatory Center
 Home Page
- Fraud and Abuse
- Past Regulatory Alerts and Roundups
- Staffing Guidelines
- Standards of Practice
- State-specific Resources
- Survey Readiness

Professional Education

- Education Home Page
- Webinar Schedule
- Upcoming Conferences
- End-of-Life Online
- Pediatric Palliative Care
- Palliative Care Resources

Outreach

- Outreach Materials
- Social Media Resources
- NHPCO's CaringInfo

Publications

- Weekly NewsBriefs
- NewsLine
- ChiPPS E-Journal

Affiliate Publications

Giving Matters



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