

Internet Explorer Users - Please Note:

Some of the links in NewsLine bring readers to member-only pages on the NHPCO website, requiring members to enter their email address and password to access the pages. If you find that your email address and password are not being accepted, please open NewsLine in a different browser, such as Google Chrome or Firefox.

This should correct the problem.



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- 76.8
- 40.5
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- 10.8
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HOSPICE CARE IN AMERICA 1863 4

A look at trending from our annual facts & figures over the past six years

National Hospice and Palliative Care Organization



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Hospice Care in America

A Look at the Past Six Years

NHPCO's annual report "Facts and Figures: Hospice Care in America" provides a snapshot of hospice care provision and utilization in the U.S. This article compares data over the past six years to offer some insight into trends or patterns in the field.

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LEADING THROUGH THE CURRENTS OF CHANGE



Opening Plenary: Todd Henry

Todd Henry is the founder and CEO of Accidental Creative, a company that helps creative people and teams develop practices and systems that lead to everyday brilliance.

SPECIAL WORKSHOP FOR EXECUTIVES: Building an Idea Culture



Plenary II: Reed V. Tuckson, MD, FACP

Dr. Tuckson is the Managing Director of Tuckson Health Connections, LLC, yet many recognize him from his long tenure as EVP and Chief of Medical Affairs for UnitedHealth Group.

PROGRAMS & PRECONFERENCE SEMINARS

April 19-20, 2016

MAIN CONFERENCE

April 21-23, 2016

NATIONAL HOSPICE FOUNDATION GALA

April 22, 2016

GAYLORD NATIONAL RESORT & CONVENTION CENTER

National Harbor, Maryland



Closing Plenary: Vicki Hess, RN, MS, CSP

Vicki Hess works with healthcare organizations and associations nationwide to mitigate the root causes of disengagement and offer transformational ideas.





www.nhpco.org/mlc2016

National Hospice and Palliative Care Organization



Message From Don

Another year is coming to a close and I am proud of the dedicated work I have seen in so many programs caring so well for patients and families. The commitment to quality and the compassion by which we deliver care are hallmarks of hospice – those have not changed over the years. However, there is a change that goes into place at the beginning of 2016. The new two-tiered payment methodology that was unveiled as part of the FY2016 Hospice Wage Index Final Rule goes into effect on January 1, 2016 for patient service date January 1, 2016 and going forward.

Notable points that I've been emphasizing throughout recent weeks include:

- The hospice two-tiered routine home care rate (RHC) is based on a beneficiary's length of stay, with a higher rate for the first 60 days of care and a lower rate starting on day 61 through the patient's death or discharge.
- A service intensity add-on (SIA) payment has been created for services provided by an RN or social worker in the last seven days of a hospice patient's life.

NHPCO has shared information with you to help you prepare and I want to remind you of the resources available in the Regulatory section of the NHPCO website that will help you adjust to this new methodology.

As the year comes to a close, I would like to thank each one of you who has done so much to support NHPCO throughout this busy year. You are a valued part of this organization and through your support and involvement you are an integral part of our nation's diverse hospice and palliative care community. To those who have already returned your membership renewal for 2016, a special thank you!

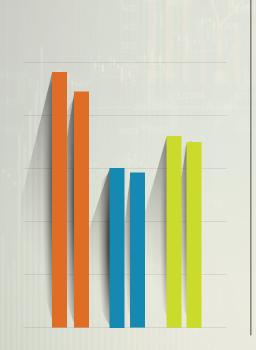
On behalf of the NHPCO board, our staff and our affiliate organizations, I wish you a peaceful holiday season and a happy New Year!

J. Donald Schumacher, PsyD President/CEO



HOSPICE CARE IN AMERICA: A LOOK AT THE PAST SIX YEARS

The 2015 edition of *NHPCO Facts* and Figures: Hospice Care in America provides a national-level snapshot of utilization, patient and provider demographics, and payor sources reflecting data from 2014.



According to data in this new edition, the hospice environment remains stable, with some increase in the number of patients served, a continued decrease in median length of service, and a patient mix not unlike the last few years.

In this article, *NewsLine* has compiled some of the data from the last six reports. This snapshot will help members see how hospice care continues to evolve.

Hospice Utilization

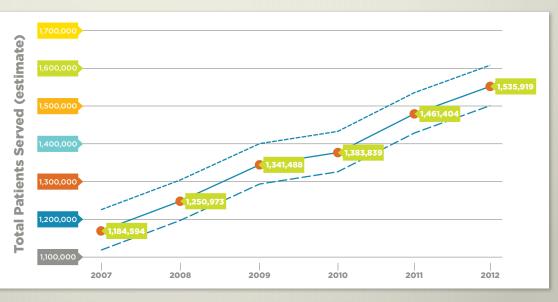
More Patients Being Served Every Year

NHPCO estimates that 1.6 to 1.7 million patients received hospice care in 2014.

Included in this estimate are patients who died; patients who remained on the hospice census since admission during the year before (i.e., carryovers); and patients who were discharged alive.

As shown in the figure below, this reflects a steady increase over the past six years.





It should be noted that in 2012 NHPCO used a new statistical model to determine these estimates, and believes it provides an accurate representation of the number of patients accessing hospice services.

Continued Decline in Median LOS

Median length of service (LOS) is considered to be the most meaningful measure for understanding the typical patient's experience because, unlike average LOS, median LOS is not influenced by extreme values.

As shown in Table 2, median LOS in 2014 was 17.4 days, a decrease from 18.5 days in 2013. This means that half of hospice patients received care for less than 17.4 days and half received care for more than 17.4 days. While late referrals are certainly a factor, disease course and access to care continue to be contributing factors.

Table 2: Median Length of Service (in days)	2009	2010	2011	2012	2013	2014
Median	21.1	19.7	19.1	18.7	18.5	17.4

Where Patients Received Their Final Care

As shown in Table 3, the settings in which patients received their final care have varied slightly from year to year between 2009 to 2013 with the percentage of patients dying in his or her place of residence dropping between 2013 and 2014 from 66.6 percent to 58.9 percent.

Table 3: Location of Patients at Death	2009	2010	2011	2012	2013	2014
Patient's Place of Residence	68.6%	66.7%	66.4%	66.0%	66.6%	58.9%
Private Residence	40.1%	41.1%	41.6%	41.5%	41.7%	35.7%
Nursing Home	18.9%	18.0%	18.3%	17.2%	17.9%	14.5%
Residential Facility	9.6%	7.3%	6.6%	7.3%	7.0%	8.7%
Hospice Inpatient Facility	21.2%	21.9%	26.1%	27.4%	26.4%	31.8%
Acute Care Hospital	10.1%	11.4%	7.4%	6.6%	7.0%	9.3%

...half of hospice patients received care for less than 17.4 days...

Patient Demographics

Tables 4 through 7 paint a picture of the patients being served by hospice. Of note:

Tables 4-7: Next Column

- More than half of patients are female
- More than 40 percent of patients are age 85 or older
- Whites/Caucasians still outpace other ethnicities in utilization of services.

Both dementia and heart disease continue to lead the list of noncancer diagnoses.

A Closer Look at Programs

Majority of Care Still
Provided by Freestanding
Hospices

As shown in **Table 8**, the proportion of hospices that are part of a nursing home held steady since jumping to 5.2 percent in 2011. Freestanding hospices continue to provide the majority of care.

Table 8: Opposite Page

Most Growth Seen Among Larger Programs

One measure of agency size is total admissions over the course of a year. As shown in **Table 9**, in 2014, 78.9 percent of hospices had 500 or fewer total admissions, consistent with the previous year.

Table 9: Opposite Page

Table 4: Patients by Gender	2009	2010	2011	2012	2013	2014
Female	53.8%	56.1%	56.4%	56.4%	54.7%	53.7%
Male	46.2%	43.9%	43.6%	43.6%	45.3%	46.3%

Table 5: Patients by Age	2009	2010	2011	2012	2013	2014
34 and Younger	.8%	.13%	.8%	.8%	.8%	0.8%
35 to 64	16.3%	16.1%	16.0%	15.7%	15.3%	15.3%
65 to 74	16.3%	15.9%	16.3%	16.3%	16.6%	16.8%
75 to 84	28.7%	27.9%	27.6%	27.7%	26.1%	26.0%
85 and Older	38.0%	38.9%	39.3%	40.5%	41.2%	41.1%

Table 6: Patients by Race	2009	2010	2011	2012	2013	2014
White/Caucasian	80.5%	77.3%	82.8%	81.5%	80.9%	76.0%
Multiracial or Other Race	8.7%	11.0%	6.1%	6.7%	7.5%	13.1%
Black/African American	8.7%	8.9%	8.5%	8.6%	8.4%	7.6%
Asian, Hawaiian, Other Pacific Islander	1.9%	2.5%	2.4%	2.8%	2.9%	3.1%
American Indian or Alaskan Native	.2%	.3%	.2%	0.3%	0.3%	0.3%

Table 7: Admissions by Principal Diagnosis	2009	2010	2011	2012	2013	2014
Cancer	40.1%	35.6%	37.7%	36.9%	36.5%	36.6%
Non-cancer	59.9%	64.4%	62.3%	63.1%	63.5%	63.4%
Debility Unspecified*	13.1%	13.0%	13.9%	14.2%	5.4%	1.9%
Dementia	11.2%	13.0%	12.5%	12.8%	15.2%	14.8%
Heart	11.5%	14.3%	11.4%	11.2%	13.4%	14.7%
Lung	8.2%	8.3%	8.5%	8.2%	9.9%	9.3%
Other	4.5%	5.4%	4.8%	5.2%	6.9%	8.3%
Stroke or Coma	4.0%	4.2%	4.1%	4.3%	5.2%	6.4%
Kidney (ESRD)	3.8%	2.4%	2.7%	2.7%	3.0%	3.0%
Liver	1.8%	1.9%	2.1%	2.1%	2.1%	2.3%
Non-ALS Motor Neuron	1.9%	1.2%	1.6%	1.6%	1.8%	2.1%
ALS	.4%	.4%	.4%	0.4%	0.4%	0.4%
HIV/AIDS	.4%	.3%	.2%	0.2%	0.2%	0.2%

^{*}Debility unspecified or "failure to thrive" has been discontinued as principal diagnosis code per the FY2014 Hospice Wage Index.

Table 8: Agency Type	2009	2010	2011	2012	2013	2014
Freestanding/ Independent Hospice	57.7%	58.0%	57.5%	57.4%	58.3%	59.1%
Part of a Hospital System	21.4%	21.3%	20.3%	20.5%	19.8%	19.6%
Part of a Home Health Agency	19.5%	19.2%	16.8%	16.9%	16.7%	16.3%
Part of a Nursing Home	1.4%	1.4%	5.2%	5.2%	5.1%	5.0%

Table 9: Agency Size by Patient Admissions	2009	2010	2011	2012	2013	2014
1 to 49	17.1%	15.9%	15.4%	15.7%	16.1%	16.6%
50 to 150	29.4%	30.1%	29.3%	28.7%	29.5%	28.3%
151 to 500	32.9%	33.0%	34.2%	33.0%	33.1%	34.0%
501 to 1,500	16.1%	16.3%	16.7%	17.7%	16.4%	16.5%
More than 1,500	4.5%	4.6%	4.4%	4.9%	4.9%	4.7%

Paying for Care

The Medicare hospice benefit, enacted by Congress in 1982, is the predominate source of payment for hospice care as shown in **Table 10**.

Table 10: Patients Served by Payer	2009	2010	2011	2012	2013	2014
Medicare Hospice Benefit	83.4%	83.8%	84.0%	83.7%	87.2%	85.5%
Managed Care or Private Insurance	8.6%	7.9%	7.7%	7.6%	6.2%	6.9%
Medicaid Hospice Benefit	4.9%	4.9%	5.2%	5.5%	3.8%	5.0%
Uncompensated or Charity Care	1.6%	1.5%	1.3%	1.2%	0.9%	0.7%
Self-pay	.7%	1.1%	1.1%	0.9%	0.8%	0.8%
Other Payment Sources	.8%	.8%	.7%	1.2%	1.2%	1.2%

Levels of Care

There are four general levels of hospice care, and as **Table 11** demonstrates, Routine Home Care accounts for the overwhelming majority of care provided in the U.S.

Table 11: Level of Care	2009	2010	2011	2012	2013	2014
Routine Home Care	95.9%	95.7%	97.1%	96.5%	94.1%	93.8%
General Inpatient Care	2.9%	2.9%	2.2%	2.7%	4.8%	4.8%
Continuous Care	1.0%	1.2%	0.4%	0.5%	0.8%	1.0%
Respite Care	0.2%	0.2%	0.3%	0.3%	0.3%	0.4%

...in 2014, 78.9 percent of hospices had 500 or fewer total admissions...

Volunteer Service

NHPCO Facts and Figures also reports on volunteer service. According to the new edition, in 2014 an estimated 430,000 volunteers provided 19 million hours of service, which rose slightly over 2013.

Also of note in 2014:

- 60.8 percent of volunteers spent their time with patients and families.
- 20.2 percent provided clinical support (i.e., clerical or other support to patient care or clinical services).
- 19.1 percent provided general support (i.e., board service or help with fundraising).
- 5.2 percent of all clinical staff hours were provided by volunteers.

NHPCO Performance Measure Reports

NHPCO members also have access to national-level summary statistics for the following NHPCO performance measurement tools:

- 1. Patient Outcomes and Measures (POM)
- Pain relief within 48 hours of admission (NQF 0209)
- Avoiding unwanted hospitalization
- Avoiding unwanted CPR
- 2. Family Evaluation of Bereavement Services (FEBS)

- 3. Survey of Team Attitudes and Relationships (STAR)
- Job satisfaction (hospice-specific)
- Salary ranges
- Provider-level results

Learn more about NHPCO's performance measures online.

Download the 2015 edition **NHPCO** website.

A More In-depth **Report and How It Can Help You**

While NHPCO Facts and Figures provides a national-level snapshot for the benefit of a diverse audience, NHPCO produces another, more in-depth report that can be of more value to hospice care providers in the management of their programs: the National Summary of Hospice Care (National Summary).

The National Summary is also produced annually and is available to hospice provider members free of charge. Over the course of 20 plus pages, it provides more detailed estimates that can assist leaders and managers with their planning and budgeting, and in setting new goals and targets for future work.

Consider the important issue of referrals. National Summary findings on referral conversion rates can provide a national-level norm to help you assess the performance of your community education and outreach.

For example, according to data in the current edition, 74.4 percent of referrals were converted to admissions in 2013, with 47.3 percent coming from hospitals, 19.3 percent coming from physicians, and 12.4 percent coming from patients themselves (or their friends or family). How do these findings compare with those for your program?

Table 3 Referrals: Opposite Page

Other Ways It Can Help

Projecting Revenue and Expenses

Table 16 of the FY2013 National Summary includes average revenue and expenses for nonprofit organizations, broken out by hospice service; fundraising and contributions; and other revenue. Many programs find this data valuable when making budget projections for expenses and fundraising revenue.

Help the Field by Contributing Your Data

The National Summary of Hospice Care draws upon data from several sou

As a hospice provider, your participation in the NDS can greatly enrich Nat website provides information on NDS, including a copy of the survey and in

From Table 3: Referrals	2013 - Agency Mean
Referrals Converted to Admissions	74.4%
Referral Sources (% of Total):	
Physician	19.3%
Hospital	47.3%
Nursing Facility	13.3%
Self, Family or Friend	12.4%
Other	6.3%
Home Health Agency	1.5%

Setting Census Rates for Start-up Programs

New programs have also turned to the National Summary when making daily census and demographic projections for their first year of operation. Table 1 of the FY2013 National Summary provides extensive information on agency demographics, including additional services being offered.

Evaluating Volunteer Utilization

The National Summary also sheds light on how hospice programs are utilizing volunteers. Total volunteer service, total volunteer hours, and volunteer hours per volunteer are detailed in Table 12.

Providing Your Hospice Board with Industry Perspective

National Summary findings can be incorporated into your orientation for new board members or can be used during annual "state of the industry" discussions.

The National Summary also provides data on inpatient facility operations; paid staff distribution and turnover; palliative care services; payer mix; and more. Members may download the available National Summary reports on the NHPCO website.

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rces, but the primary source is the NHPCO National Data Set.

ional Summary findings—for the greater good of the entire field. The NHPCOnstructions for participation. Learn more now.

is also produced
annually and is available
to hospice provider
members free of charge.

As a Hospice Executive Are You Looking for Critical Competitive Data to Stay Ahead of the Curve?

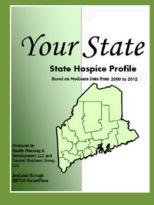
Look No Further... The 2015 State Hospice Profile™ contains comprehensive hospice care details for each county based on Medicare data from 2000-2013, providing the critical information needed to learn more about the competitive environment of your state.

Produced by Health Planning & Development, LLC & Summit Business Group, LLC and marketed exclusively through the NHPCO Marketplace, each 2015 State Hospice Profile™ provides vital countylevel information. Full-colored charts and graphs provide information from an analysis of the last eleven years of Medicare claims data.

Here are examples of the valuable information included in the 2015 State Hospice Profile™

- Estimated Medicare Cap usage
- Major hospice providers in the county
- Comparative hospice penetration data/market share trends
- Average Length of Stay
- Distribution of hospice census

State Hospice Profiles[™] are individually priced based upon the number of counties in each state. Please call 1-800-646-6460 for pricing details and to order. Profiles are available for all 50 States.



As an added bonus, each State Hospice Profile™ also contains a National and Statewide Profile of hospice cae based upon Medicare claims data going back to 2000.

National Hospice and Palliative Care Organization



Marketplace



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By Joan K. Harrold,

he need for enhanced physician involvement in **hospice care**, **compliance**, **and leadership** has been made abundantly clear by a variety of recent events. Are you doing everything that you can to demand and demonstrate the best from your physicians? If you are not yet supporting certification for your hospice medical directors and hospice physicians through the Hospice Medical Director Certification Board® (HMDCB), then you can do more for the health and well-being of your program!

Assessment of clinical knowledge and skills can be a formidable challenge in hospice and palliative medicine. Historically, many physicians have become hospice physicians after having their patients served by a local hospice. The advent of hospice and palliative medicine fellowship programs has brought more physicians to the field with formal clinical training. However, there will always be seasoned physicians who find that the experience of working with hospice leads to the desire to work more in the field of hospice and palliative

medicine. Understandably, it is not possible for most of these physicians to return to the life of physicians-in-training to achieve formal recognition of the expertise they develop. The **experiential pathway** towards Hospice Medical Director Certification gives your organization a way to assess and recognize the skills that these physicians bring to the care of your patients.

The role of the hospice physician in maintaining regulatory compliance has increased dramatically in the past few years. Since 2009, a **physician narrative** has been required to justify the six months or less prognosis necessary to certify and recertify patients' eligibility for coverage under the Medicare Hospice Benefit.¹ Anecdotally, it seems that most hospice programs have wisely opted to have their hospice physicians write these narratives (instead of community attendings). As of January 1, 2011, face-to-face **visits** have been required before certifying patient into third or later benefit periods of the Medicare Hospice Benefit.² And in 2014, the Centers for Medicare and Medicaid Services (CMS) proposed and adopted the rule that emphasized that certifying hospice physicians must determine and document the principal hospice diagnosis and the diagnoses related to the terminal condition for each certified patient.³ These heightened regulatory requirements make it

necessary for hospices to invest in ongoing training and education for their medical staff; Hospice Medical Director Certification gives programs a recognized and objective measure of physician knowledge and application of these important regulatory demands.

Leadership extends beyond our organizations. Our communities are increasingly educated and desirous of the best end-of-life care possible. The Institute of Medicine released its report, Dying in *America*⁴ and advocated that comprehensive care for those nearing the end-of-life be competently delivered by professionals with appropriate expertise and training. **Being** *Mortal*⁵ by Atul Gawande engaged both medical and lay audiences as a best-seller that explores "medicine and what matters in the end."6 And in 2015, CMS proposed that the two advance care planning codes established in FY2015 become "active," thereby allowing physicians to code and be reimbursed for advance care planning discussions with their patients.^{7,8} Hospice Medical Director Certification gives your organization a meaningful measure of physician competence that differentiates you from competitors and increases your credibility in your community by demonstrating that you have the most skilled and experienced hospice and palliative medicine professionals. "In the current

...Certification gives
your organization a way
to assess and recognize
the skills that these
physicians bring...

regulatory climate, having hospice physicians who are skilled and knowledgeable is more important than ever", states Dave Fielding, President and CEO of TrustBridge in West Palm Beach, FL. "TrustBridge supports HMDCB certification and covers examination expenses for our HMDC-certified physicians."

Hospice Medical Director
Certification also gives your
program a unique way to reward
physicians who do more for your
programs. You can enhance both
accountability and reward by
adding a premium to
compensation for achievement of
certification. Highlight your very
high expectations and attract
committed physicians by
reimbursing them for the costs of
obtaining and maintaining
certification as well.

Your medical directors and hospice physicians need to bring their best to the clinical, regulatory, and leadership tasks that only they can perform for your organization. Your support for certification through the Hospice Medical Director Certification Board® allows you to assess the knowledge, skills,

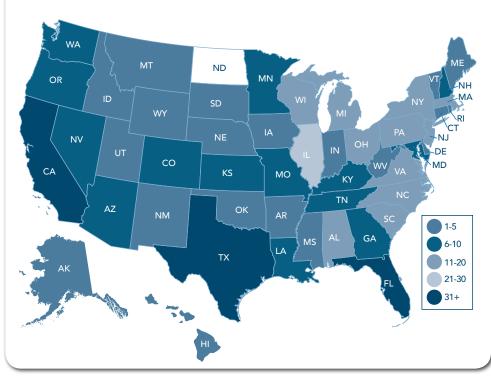
and competence that your organization expects while highlighting the expertise that you deliver to patients, families, and communities.

For more information on HMDCB's certification, visit www.hmdcb.org or call 847-375-6740.

Joan K. Harrold is the Vice President/Medical Director for Hospice and Community Care, based in Lancaster, PA, as well as a representative on the NHPCO Board of Directors and Relatedness Committee. She earned her HMDC® credential from HMDCB in 2015, is also board certified in internal medicine and hospice and palliative medicine, and is a Fellow of the American Academy of Hospice and Palliative Medicine. Dr. Harrold presents frequently at state and national conferences.

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More than 500 physicians from 49 states became Hospice Medical Director Certified® (HMDC®) in the first two years. Are yours among them?



- "Medicare Program; Hospice Wage Index for Fiscal Year 2010," 74 Federal Register 150 (6 August 2009), pp.39398-400.
- 2. http://www.gpo.gov/fdsys/pkg/CFR-2011-title42-vol3/pdf/CFR-2011-title42-vol3-part418-subpartB.pdf. Accessed September 21, 2015.
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- 5. Gawande, A., 2014, Being Mortal, Metropolitan Books/Henry Holt & Company, New York.
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- 7. "Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2016," 80 Federal Register 135 (15 July 2015), p.41773.
- http://www.nhpco.org/press-room/pressreleases/proposed-rule-would-reimbursephysicians-acp-0. Accessed September 21, 2015.





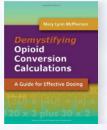
NEW RESOURCE! Hospice Volunteer Program Resource Manual

This "must have" manual gives you the tools to create a state of the art volunteer program. Updated in 2015 to reflect current regulatory requirements and best practices. The manual includes competency checklists, surveys, training outlines, job descriptions and sample

forms you can adapt to your program's needs. In addition, it offers ideas on recruitment and retention, training, and program development.

Are you ready to take your program to the next level? 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



Demystifying Opioid Conversion Calculations

Every patient you see has a different situation, especially when medication for moderate to severe pain is involved. Demystifying Opioid Conversion Calculations gives you confidence that your dosage formulation calculations are safe and effective. This comprehensive yet

practical guidebook is a must-read for health professionals involved in pain management, hospice and palliative care. This book offers a five-step approach for performing opioid conversion calculations, no matter how difficult they are. It has easy-to-understand charts and tables, patient scenarios you see often and real-life practice problems to demonstrate methods for opioid conversions.

Member Price: \$30.00 Non-Member Price: \$30.00

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from A to Z, 12 Ways to Care for Yourself and a Thank-you verse in the back.

Member Price: \$2.50 Non-Member Price: \$4.50



Ornament

This ornament includes a tag with planting instructions and is tied with seasonal raffia ribbon. Plant in 1/4\"- 1/2\" soil, keep moist and watch it bloom. Personalization is available for a \$15 fee with a minimum of 50 Trees ordered by calling our Solutions Center at 800-646-6460. Minimum order of 12 pieces-

can be assorted. Please note that we also offer ornaments in the shapes of a heart, bell, butterfly, flower, angel, tree, and butterfly through our website.

Member Price: \$2.50 Non-Member Price: \$3.50



Paper Heart Memorial Card

Sold in packages of 100. If you would like your to be personalized for a \$15 fee please contact NHPCO at 800/646-6460 to order.

Member Price: \$35.00 Non-Member Price: \$70.00 (10+ bags)
Member Price: \$40.00 Non-Member Price: \$80.00 (5-9 bags)
Member Price: \$50.00 Non-Member Price: \$100.00 (1-4 bags)



Hospice Nurse, Volunteer or Social Work Tote Packages

Each Discipline's tote bag contains: Note Pad, Lunch Bag, Photo Frame, Keylight, Travel Mug and Teddy Bear!

Member Price: \$18.00 Non-Member Price: \$28.00

For all NHPCO resources, visit www.NHPCO.org/marketplace.

Helping You With Your Professional Development Needs in 20 16

Member Education Needs Assessment Summary

MLC 2016: Highlights & AAHPM precon

2016 Webinars

Other Offerings

To stay abreast of all the changes and innovations within the field of hospice and palliative care requires ongoing dedication and commitment. NHPCO strives to offer educational programs and development opportunities that will help professionals stay up-to-date on practices, trends, and innovations occurring within the field. Many offerings provide CE/CME credit. NHPCO's goal is to ensure that all educational participants are better informed and have a renewed sense of commitment to delivering quality end-of-life care to their patients and families.

In order to ensure that our offerings address the topics and issues you want to learn about, NHPCO works very carefully with the bi-annual Education Needs Assessment as well as conference and educational program evaluations. Additionally, NHPCO's Professional Education Committee contributes a significant amount of time and insight into planning educational offerings.

With the new year ahead, here's a preview to help you plan for staff training in 2016.

Your Feedback from NHPCO's Bi-Annual Education Needs Assessment

Earlier in 2015, NHPCO's Education Team, in collaboration with NHPCO's Research Team, invited hospice and palliative care professionals across the country to complete its bi-annual Education Needs Assessment survey.

Findings from the survey provide valuable insight into the specific educational needs of each discipline and support NHPCO in the development of future educational activities and products such as Webinars, conference offerings, and new online education activities. As a leader in end-of-life care education, NHPCO has received recognition from its continuing education accrediting bodies for its robust efforts in determining the educational needs of the field.

About the Surveys

To prepare for such an undertaking, NHPCO relied on the expertise and guidance of our Professional Education Committee and Research Team. After months of development, NHPCO launched the survey to the professional community.

The survey sought information on education format preferences, educational needs related to specific topics, and the identification of professional practice gaps.

Feedback from Over 1,600 Professionals

The surveys were completed over the course of a few weeks and, within that time, more than 1,600 professionals participated.

Approximately 30 percent of the respondents were nurses, however, all disciplines working in hospice participated and were represented. On average, survey respondents have worked in hospice and palliative care for eleven years.

Here's a brief recap of top responses in key content areas of the survey.

Top Priorities for Program Management and Leadership:

- 1. Building Collaborative Relationships in Your Community
- 2. Leadership Development with Skills Building
- 3. Building a Culture of Accountability
- 4. Developing Roles and Skills of Hospice Managers
- 5. Mentoring Staff

Important Topics for Team Development and Function:

- 1. Facilitating a Healthy Work/Life Balance for Staff
- 2. Effective Team Meetings
- 3. Demonstrating Regulatory Compliance
- 4. Fostering Clinical Excellence: Individual and Team Learning/ Growth
- 5. Interdisciplinary Team Building

Findings from the survey provide valuable insight into the specific educational needs of each discipline...

Top Five Areas of Need for Clinical Care Training:

- 1. Advanced Pain Management
- 2. Treating Terminal Restlessness
- 3. Anxiety and Agitation
- 4. Complementary Therapies
- 5. Pain Management for Patients with Addictions

Highest Priorities for Supportive and Therapeutic Care:

- 1. Managing Mental Illness at the End of Life
- 2. Advanced Grief and Bereavement
- 3. End-of-life Spiritual Care for the Non-Religious
- 4. Assessing and Responding to Family Caregivers' Needs
- 5. Caregiver Support and Education

"It's incredibly valuable for us to receive input from so many professionals across all disciplines" said Barbara Bouton, NHPCO's vice president of professional development. "Our thanks to all the members who took time to participate."

MLC Plenary Speakers will Spark Your Creativity

The Education Needs Assessment is one of the important sources of information that contribute to the content development of each of our professional development offerings. This includes our onsite conferences.

NHPCO's 31st Annual Management and Leadership Conference will explore how hospice and palliative care leaders navigate change and the creativity, innovations, and successes that may result during times of significant change.

We introduce you to our distinguished line-up of plenary speakers who will challenge and inspire you.

Todd Henry



The opening plenary speaker, Todd Henry, is the founder and CEO of Accidental Creative, a company that helps creative people and teams generate brilliant ideas. He regularly speaks and consults with companies, both large and small. Todd's work has been featured by *Fast Company, Fortune, Forbes*, HBR.org, *US News & World Report* and many other

major media outlets. Passionate, practical, and powerful, Todd will help you do more and do it better, starting right now.

Todd also will offer a special workshop for executives that is scheduled for April 21 and requires separate registration (space is limited).

Reed V. Tuckson, MD, FACP



Dr. Tuckson is the Managing Director of Tuckson Health Connections, LLC, a health and medical care consulting business that brings people and ideas together to promote optimal health outcomes and value through innovation and integration. Previously, Dr. Tuckson enjoyed a long tenure as EVP and Chief of Medical Affairs for UnitedHealth Group.

Throughout his career, he has served as a leading voice in healthcare issues.

Vicki Hess, RN, MS, CSP



Vicki Hess works with healthcare organizations and associations nationwide to mitigate the root causes of disengagement. Her unique views on patient and employee engagement are evidence-based, relatable, and real world. Vicki inspires by sharing high impact, easy to implement ideas that transform the way people work. As a cancer

survivor and victim of a surgical mistake, she also brings the voice of the patient into her programs.

Intensive for CEOs and CMOs

In conjunction with the MLC, NHPCO and AAHPM are collaborating on a special intensive, "Building an Exceptional Physician/Executive Leadership Team," on April 20 from 8:30am to 5:00pm. This intensive will strengthen the important relationship between CEOs and CMOs and realize benefits across your entire organization. All CEOs and CMOs are encouraged to register for this special offering that will help you take your leadership skills to the next level.

31st Annual Management and Leadership Conference

Education Programs and Preconference Seminars

April 19 - 20, 2016

Main Conference

April 21 - 23, 2016

National Hospice Foundation Gala April 22, 2016

Registration is Open

The conference will be held at the Gaylord National Resort & Convention Center in National Harbor, Maryland. Online registration is now open!

Mark Your Calendar for the 2016 Fall Conference

Another event in the year ahead that's not to be missed will be our fall conference that will be a new and re-imagined offering hosted in October along the Atlantic coast in beautiful Hollywood, Florida.

2016 Webinars Preview

Webinars

NHPCO Webinars bring you and your staff expert guidance from nationally recognized authorities on important topics of the day — at rates as low as \$47 per Webinar if you take advantage of the early-bird package pricing (you must order by 12/31/15). They also offer CE/CME credit, depending on the topic.

Two Webinars are offered each month — with one focusing on an interdisciplinary topic and the other on a quality or regulatory topic.

Dates and Time

New for 2016, the Webinars have been adjusted to one hour in length, making it a little easier to integrate into your work schedules. The Interdisciplinary Webinar falls on the second Thursday of the month, while the Quality and Regulatory Webinar falls on the fourth Tuesday. The dates may vary, however, depending on holidays and conflicts with NHPCO national conferences and other events — so be sure to check the 2016 schedule posted online.

All Webinars are held from 2:00 to 3:00 p.m., ET—with the option of purchasing MP4 recordings for future reference.

Affordable Training for Multiple Staff

The Webinar rates shown are for access from a single computer. But from that computer, you can invite as

This intensive will strengthen the important relationship between CEOs and CMOs...

many staff, volunteers and community partners as you want to view the Webinar—so it's an affordable way to train large groups.

For Webinar details or to register, visit www.nhpco.org/webinar.

Additional Resources

2016 Virtual Conference — NHPCO will host another one of its successful Virtual Conferences on August 9–11, 2016. The specific topic will be announced soon but the beauty of this conference is that it brings you all the benefits of an onsite conference directly to your work place or education hosting site via the Internet. Look for news early in 2016!

NHPCO's End-of-Life Online or

"E-OL" offers online courses that are convenient, efficient learning modules covering the latest clinical, regulatory, and management trainings. They are available on-demand wherever you have an Internet connection.

Hospice Manager Development
Program or the Hospice MDP is
the only comprehensive
management training program
that provides hospice-specific
information and helps managers
develop the skills they need to
succeed. The Foundational Course
that sets the stage for additional
training is offered in conjunction
with NHPCO's onsite conferences.

Hospice MDP Online Learning Modules are a convenient way to build your leadership skills. Each module of the Hospice MDP involves active learning and focuses on how to integrate new

module of the Hospice MDP involves active learning and focuses on how to integrate new content into existing practice. Information on available courses is available in the Education section of NHPCO's website.

PRINT-FRIENDLY PDF





Great Investment

M Leading-Edge

M Engaging

M Timely & Relevant

M CE/CME credit

NHPCO'S WEBINAR PACKAGES **SAVE YOU MONEY!***

Early Bird Prices good through 12/31/15

20% off 24 webinars 15% off 12 webinars 10% off 6 webinars

* Compared to individual webinar pricing

National Hospice and Palliative Care
Organization



2016 Webinar Schedule for Hospice and Palliative Care Professionals

ariu i allial	tive Care Professionals
INTERDISCIPLIN	ARY TOPICS (2nd Thursday; 2:00 – 3:00 ET)
January 14	LGBT Elders: Implications for Hospice and Palliative Care Providers
February 11	Is Your Team Culturally Competent? Are You?
March 10	Advances in Pain and Symptom Management
April 14	Facilitating Meaningful Life Review
May 12	Comprehensive Assessment and Plan of Care: Best Team Practices
June 9	"I Dunno" – Helping Teens Cope with Grief
July 14	Do the Right Thing: Resolving Ethical Challenges
August 11	Is It Spiritual Suffering? How to Know; What to Do
September 8	Anxiety, Agitation and Restlessness: Oh My!
October 13	On the Edge of a Cliff? Coping with Stress and Compassion Fatigue
November 10	Painting a Clear Picture: Excellent Documentation Practices
December 8	Is Yours a Good Team? Going from Good to Great
QUALITY AND R	REGULATORY TOPICS (4th Tuesday; 2:00 – 3:00 ET)
January 26	Eligibility, Prognosis and Relatedness: Ensuring Compliant Practice
February 23	"Hot" Topics: Burning Issues for the Field
March 22	HIS: Unlock Data and Open the Door to
	Performance Improvement
April 26	
April 26 May 24	Performance Improvement Continuum of Care: Understanding the Regulatory
•	Performance Improvement Continuum of Care: Understanding the Regulatory Requirements Hospice Care in the Nursing Home:
May 24	Performance Improvement Continuum of Care: Understanding the Regulatory Requirements Hospice Care in the Nursing Home: Are You Compliant?
May 24 June 28	Performance Improvement Continuum of Care: Understanding the Regulatory Requirements Hospice Care in the Nursing Home: Are You Compliant? Beyond Measuring: Improving through PIPs Everything You Wanted to Know about Elections, Terminations and Revocations But Were Afraid to
May 24 June 28 July 26	Performance Improvement Continuum of Care: Understanding the Regulatory Requirements Hospice Care in the Nursing Home: Are You Compliant? Beyond Measuring: Improving through PIPs Everything You Wanted to Know about Elections, Terminations and Revocations But Were Afraid to Ask
May 24 June 28 July 26 August 23	Performance Improvement Continuum of Care: Understanding the Regulatory Requirements Hospice Care in the Nursing Home: Are You Compliant? Beyond Measuring: Improving through PIPs Everything You Wanted to Know about Elections, Terminations and Revocations But Were Afraid to Ask "Hot" Topics: Sizzling News for the Field Tackling Adverse Events: Don't Let Them Take You
May 24 June 28 July 26 August 23 September 27	Performance Improvement Continuum of Care: Understanding the Regulatory Requirements Hospice Care in the Nursing Home: Are You Compliant? Beyond Measuring: Improving through PIPs Everything You Wanted to Know about Elections, Terminations and Revocations But Were Afraid to Ask "Hot" Topics: Sizzling News for the Field Tackling Adverse Events: Don't Let Them Take You Down Audits, Fraud and Abuse: Steering Clear of the

^{**}Denotes change from regular schedule to avoid conflicts

REGISTER ONLINE AT: www.nhpco.org/webinars



We Honor Veterans

Celebrates 5th Year Anniversary, New Report and New VA Contract

Five years ago, NHPCO in collaboration with the Department of Veteran Affairs launched We Honor Veterans to address the growing need for Veteran-centered care as our servicemen and servicewomen age and need access to hospice and palliative care. Today, more than 3,800 hospice and community-based healthcare organizations across the United States are committed to understanding and addressing the unique needs of Veterans with advanced illness as WHV partners.

Recent WHV accomplishments include:

To celebrate We Honor Veterans
 5th year anniversary, NHPCO

awarded the WHV
Award of Excellence to
Gentiva Hospice
Evansville/Jasper
during a special
celebratory event held
at NHPCO's 16th
Clinical Team
Conference and
Pediatric Intensive in
Grapevine, Texas.

- WHV 5th Year Anniversary Report was published and is available online.
- NHPCO has been awarded a two-year contract with the VA to further develop and expand the WHV program.

WHV provides education, resources, and technical assistance to educate hospice and other health care organizations caring for veterans whose military service, combat



experience, or other traumatic events may resurface or play a pivotal role in their end-of-life experience. To learn more about *We Honor Veterans*, join as a Partner and/or support this important work via a secure online donation, please visit www.wehonorveterans.org.

WHV Wins ASAE Power of A Summit Award

In addition to the activity surrounding the fifth anniversary of *We Honor Veterans* and the accomplishments noted in this edition of NewsLine, the program received the highest honor from the American Society of Association Executives. *We Honor Veterans* was awarded the ASAE Power of A Summit Award.



The WHV Team from Gentiva Hospice Evansville/Jasper at the awards event.

"Congratulations to NHPCO for helping to make the world a better place," said Hugh "Mac" Cannon, MPA, CAE, the 2015 chair of ASAE's Power of A Awards Judging Committee. "Their story exemplifies how associations make a difference every day – not just to the industry or profession they represent, but to society at large."

NHPCO is one of only six associations to receive the award this year, which recognizes outstanding efforts of associations to enrich lives, create a competitive workforce, prepare society for the future, drive innovation and make a better world.

Briefing on Capitol Hill Sharing the Work of *We Honor Veterans*.

To advance efforts to recognize and affirm the contributions of our nation's dying Veterans, the Hospice Action Network hosted a Congressional briefing on the *We Honor Veterans* program on Thursday, October 22, 2015 in the Senate Visitors Center at the U.S. Capitol. The briefing shared the significant impact and success of *We Honor Veterans* with nearly 100 Congressional staff members.

"It is an honor to work closely with the VA and our partners to ensure that the men and women who have given so selflessly receive the support and compassionate care they deserve," said J. Donald Schumacher, NHPCO president and CEO.

The briefing featured Thomas Edes from the U.S. Department of Veterans Affairs, David Benhoff, an Operation Iraqi/Enduring Freedom Veteran who serves Veterans through the *We Honor Veterans* initiative at Heartland Hospice in Virginia, and Jonathan Keyserling, senior vice president for health policy at NHPCO.

In addition to the Congressional briefing, HAN is partnering with several members of Congress to hold Honor Ceremonies and Ceremonies of Remembrance for the Veterans



receiving hospice care. These powerful ceremonies allow hospice providers, policymakers and community leaders to thank Veterans for their service, and have provided much-deserved recognition and honor to Veterans in their final days.

More information about the *We Honor Veterans* program is available online; additional information about the Congressional briefing is available on the Hospice Action Network website.



Briefing panelists (L to R) David Benhoff, an Operation Iraqi/Enduring Freedom Veteran who serves Veterans through WHV, Dr. Thomas Edes from the Department of Veterans Affairs, and NHPCO's Jonathan Keyserling.

NHPCO Leadership through Comment Letters

NHPCO, as the leading voice recognized by regulators, administrators, and legislators strongly believes that our organization has a responsibility to submit official comment letters on proposed regulatory rules when they are released by the federal government.

Comment letters, which become an important part of a project's public record, are an important source of information regarding constituents' views on and experiences related to proposed regulatory issues.

Comment letters involve not only extensive staff time to research, collect information, and compose, but NHPCO's Health Policy Team collaborates with many professionals in the field as well as counsel and industry experts to craft comments that are constructive and clearly delineate the hospice and palliative care community's point of view.

In 2015 alone, NHPCO's Health Policy Team submitted seven comment letters on a number of issues that are significant to our provider community. Few other national organizations contributed the same amount of feedback and suggestions to the government agencies. Here is a list of NHPCO's comment letters submitted in 2015:

- 1. FY2016 Hospice Wage Index (Submitted June 29, 2015)
 - a. Two tiered payment system
 - b. SIA payments
 - c. All diagnoses on the claim form
- 2. Medicaid Managed Care (Submitted July 27, 2015)
 - a. Statutory requirements for hospice in Medicaid
 - b. Challenges from providers
 - c. Request that CMS address hospice inclusion in Medicaid managed care as well as room and board payments when a nursing home resident elects hospice.
- 3. Physician Fee Schedule (Submitted September 8, 2015)
 - a. Advance care planning codes
 - b. Case management
 - c. Support for separate code for collaborative care
 - d. Physicians employed by rural health clinics and federally qualified health centers
- 4. Comprehensive Care for Joint Replacement Bundled Payment (Submitted September 8, 2015)
 - a. Hospice included in bundle for 90 days post-surgery
 - b. Definition of relatedness to the bundled payment, could be used as a model definition for other bundled payments

- 5. CDC Draft Guidelines on Prescribing Opioids for Chronic Pain (Submitted September 18, 2015)
 - a. Commented on lack of transparency in the development process
 - b. Commented on the addition of language if the patient is not competent for discussions about prescribing.
- 6. ICD-10 (Submitted October 7, 2015)
 - a. Request for leniency for Part A providers, as is provided for Part B providers through the AMA-CMS joint announcement
- 7. Nursing Home Reform (October 14, 2015)
 - a. Hospice specific issues no extra charges for hospice services and information provided when patient is transferring
 - b. Psychotropic medications and why they should be allowed for hospice and palliative care patients
 - c. Role of the nursing home pharmacist and conflict with hospice Conditions of Participation regarding drugs and pharmacy review

Learning Collaborative to Relieve Caregiver Fatigue and Improve Quality of Care Enrolling Now

Samueli Institute and NHPCO are launching a nine-month learning collaborative in which participants will learn and share innovative strategies and best practices to improve quality of life for patients and their caregivers, relieve caregiver burden and fatigue, and reduce ER admissions due to pain, anxiety, or respiratory distress. Participants will join industry-leading organizations from across the nation and will be led by a team of experts through a change model perfected by the Institute for Healthcare Improvement (IHI). This innovative effort to drive impactful change and prepare hospice and palliative care organizations for the future will begin in early 2016 and is actively enrolling participants now.

The collaborative, entitled "Optimal Healing Environments," is focused on holistic, comprehensive hospice and palliative care delivered in the home environment and is geared toward preparing health care organizations for the potential spike in demand for services created by the aging baby boomer generation, who comprise more than 40 percent of the U.S. adult population.

Participating organizations will be at the forefront of change as they collectively implement best practices in the home environment, such as specific pain relief measures that can be deployed by anyone. Additional improvements include addressing caregiver fatigue and burnout, reduction of pain, anxiety, dyspnea and helplessness; reducing ER admissions and associated costs; and pay-for-performance challenges.

"In essence, from attending the collaborative, hospices can return their attention back to the roots of healing from which they began," explained NHPCO senior director of access and faculty/chair of the Samueli Institute collaborative Gwynn Sullivan, RN, MSN.

The "Optimal Healing
Environments" learning collaborative
builds on more than a decade of
Samueli Institute research into whole
systems approaches to health,
healing and well-being.

"Making small changes can be challenging; achieving breakthroughs even more so, but there are factors that can lead to success," explained Samueli Institute President and CEO Wayne B. Jonas, MD. "Our

The learning collaborative provides an incredible opportunity for hospice organizations to focus on how to implement practices that create optimal healing environments for the patients and their families they serve.

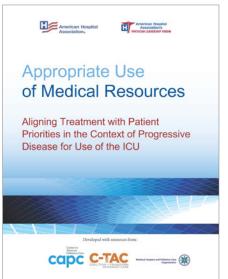
Short Takes

breakthrough collaborative offers technical expertise, intensive coaching, and peer engagement to improve outcomes and prepare for the future of the industry."

Samueli Institute and NHPCO are currently accepting a limited number of applications to join the learning collaborative.

Participating organizations will be asked to pay a fee and cover travel costs to in-person meetings in Alexandria, Virginia. A limited number of scholarships may be available. For more information, and to download a free brochure, visit www.SamueliInstitute.org/collaboratives.

Appropriate Use of Medical Resources ICU Toolkit from AHA



The most appropriate use of the ICU can improve outcomes, improve the care experience, and lower costs. To support hospitals' efforts in the appropriate use of medical resources, the American Hospital Association's Physician Leadership Forum is producing toolkits on five areas where hospitals, in partnership with their clinical staff and patients, should look to reduce non-beneficial care. The latest toolkit addresses aligning medical treatment with patient priorities in the context of progressive disease in the intensive care unit (ICU).

The AHA collaborated with NHPCO along with the following organizations to develop this toolkit: Center to Advance Palliative Care, Coalition to Transform Advanced Care, Education in Palliative and End-of-life Care, and the Society of Critical Care Medicine.

Download resources from the AHA's Physician Leadership forum online.



Volunteers Honored at CTC

Four outstanding volunteers were honored at the 16th Clinical Team Conference held in Grapevine, Texas, with the presentation of the Volunteers are the Foundation of Hospice Awards.

These volunteer awards, in four categories, were created and are administered by NHPCO's National Council of Hospice and Palliative Professionals. Presenting

the awards at the Friday morning plenary on October 16 were NCHPP Chair Rex Allen and Vice-Chair Sandra Huster.

NHPCO salutes these distinguished volunteers and pays tribute to the more than 430,000 trained hospice volunteers who contribute an estimated 19 million hours of service to hospice organizations across the country each year.

Patient and Family Service Award:

Kay Aaker, Hospice of the East Bay, Pleasant Hill, California.

As a volunteer with 31 years of service, Kay Aaker has generously supported patients in every possible capacity at the end of their lives. In 2014, Kay devoted 1,550 hours as a patient support, vigil and administrative volunteer. Her greatest impact though is not in numbers but in how she has touched the hearts of the many patients through her presence at the bedside.



Volunteer Award honorees (from L to R)
Timothy Lee, Kay Aaker, Christopher
Carswell and Bronx. and Bonnie Hunt.

Specialized Service Award:

Bonnie Hunt, Hospice of Lubbock,

Lubbock, Texas.

Lubbock native Bonnie Hunt attended Hospice of Lubbock's first volunteer class in 1987 and set out to find a unique way to support those receiving hospice care and began creating festive care baskets – filled with homemade cookies, treats and decorations – to be delivered to hospice families. Bonnie has donated over 5,040 care baskets throughout the past 28 years among her contributions.

Organizational Support Award:

Timothy Lee, *Penn Wissahickon Hospice, Bala Cynwyd, Pennsylvania.*Timothy, a mural artist and photographer, was instrumental in the interdisciplinary revitalization of an underutilized children's room at Penn Hospice at Rittenhouse in Philadelphia. The project created a safe and creative space for children whose families were receiving hospice care and is a reminder of the healing power of the creative spirit.

Young Leader Award:

Christopher Carswell, *Hospice of the Golden Isles, Brunswick, Georgia.*At just 16 years old and despite medical challenges of his own, Christopher lives by setting a powerful, yet simple example – he puts others first. Along with his service dog, Bronx, he has volunteered at Hospice of the Golden Isles for almost two years bringing comfort and friendship to hospice patients. Championing multiple community outreach projects, Christopher is an inspiration to many.

...NHPCO salutes
these distinguished
volunteers...

Meet Sharon Pearce

NHPCO is pleased to introduce Sharon Scribner Pearce, our new vice president, health policy who joined the team at the end of September.

Sharon has been working in the health policy arena for almost twenty years. She comes to NHPCO following three years as VP of advocacy for the National PACE Association, a trade association representing more than 100 Programs of All Inclusive Care for the Elderly. In that role, she advanced NPA's federal policy agenda, including advancement of the PACE Innovation Act, congressional and federal advocacy in support of NPA's regulatory agenda, delivery of major grant initiatives, and leading NPA's annual Spring Policy Forum. Sharon also served as director of public policy at Girl Scouts of the USA, senior managing director at Sonnenschein Nath & Rosenthal, a prominent K Street law and lobbying firm, and legislative director for Rep. Gene Green (D-TX).



Sharon joined NHPCO in September 2015.

Attendees at the recent Clinical Team Conference might have met Sharon behind the registration or mobile app desk, attending some of the sessions, or even helping out at Marketplace.

A Review of Available Palliative Care Resources

As part of NHPCO's Leadership Development Program, J. Donald Schumacher, president and CEO, and Judith Skretny, director of palliative care hosted a live online discussion about palliative care and Judith offered a valuable tour of resources NHPCO makes available online.

All NHPCO members have access to these palliative care resources available online.



Active Year for NHPCO Edge

Thank you for helping NHPCO Edge enjoy a banner year in its first full year of operation. Our client work has really taken off and we've been privileged to assist hospice and palliative care providers from Alaska to Florida and everywhere in between.

Our projects have included strategic planning engagements throughout the nation. We've provided analysis on local market and referral opportunities to multiple clients, and recently assisted a large medical center with developing both inpatient and outpatient palliative care services. Palliative care has been an area of great interest for many clients, and the experienced consultants at NHPCO

Edge are helping our clients develop strategies for partnership with ACOs, hospitals, and payers.

As you plan your 2016 budgets and calendars, please keep us in mind. NHPCO Edge can help with everything from board education to strategy and market development. We are the hospice experts, and our consultants have decades of real-world experience in hospice and palliative care management.



NHPCO Edge can
help with everything
from board education
to strategy and market
development.

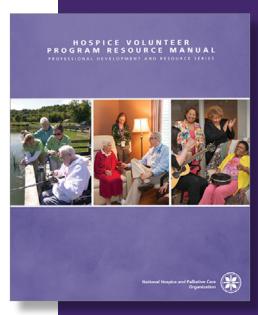
Newly Revised Volunteer Program Resource Manual

After a major revision, the *Hospice Volunteer Program Resource Manual* has been updated to reflect current regulatory requirements and best practices. The manual includes competency checklists, surveys, training outlines, job descriptions, and sample forms you can adapt to your program's needs. In addition, it offers ideas on recruitment and retention, training, and program development.

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

Are you ready to take your program to the next level? This is the manual to add to your professional library to get the information and tools you need.

<u>Available from Marketplace</u>, order your copy of the new *Hospice Volunteer Program Resource Manual* today. The Member price is \$74.99; the non-member price is \$89.99, making this an affordable yet invaluable resource.



2015 Creative Arts Contest

NHPCO is proud to showcase the winning photographs and articles from the 2015 Creative Arts Contest. Each entry is a true testament to the talent and creativity of our many members across the country.

The theme for this year's contest, "Take a Moment: Make a Moment!" reflects the special life moments or memories made possible by hospice and palliative care teams across the country. For more photos, articles and videos, please visit the website for NHPCO's public engagement campaign, *Moments of Life: Made Possible by Hospice*, at MomentsofLife.org.

Photography: Adult Category



First Place
Hospice at a Wedding
by Angelia Neumann



Sharon S. Richardson Community Hospice, Sheboygan Falls, WI

Second Place *One More Ride*by Kandice Dickinson



Heart'n Home Hospice and Palliative Care, LLC, Fruitland, ID

Honorable Mention

It's Never Too Late to Say Thank You! by Margaret B. Dudley



Homestead Hospice of Central Georgia, Warner Robins, GA

Honorable Mention
Wedding in a Hospice
by Audrey Waters



MJHS Hospice and Palliative Care, New York, NY

Photography: Children's Category



First Place *Jordan's Journey*by Jean Graham



CareDimensions, Danvers, MA

Second PlaceSeeing Snow for the First Time Deborah McCabe



HPH Hospice, Hudson, FL

Honorable Mention *First Child First Love*by Sue Sturgess



Hospice Care Network, Woodbury, NY

Honorable Mention

For the First Time Touching the Sand and Feeling the Ocean by Audrey Waters



MJHS Hospice and Palliative Care, New York, NY

Photography: Nature Category



First Place *Reflections*by Ruth Walker



Hospice of Marshall County, Albertville, AL

Second Place *Beauty Around the Corner*by Wanda Chiles



Hospice of the Bluegrass, Lexington, KY

Honorable Mention

Cocoon to Butterfly by Kris Linner



Fairview Home Care and Hospice, Minneapolis, MN

Articles and Blog Essays



First Place *Nourished Spirit*by Susan Randall

Montgomery Hospice, Rockville, MD

Second Place

Queen for a Day by Lynne Christiano Hospice at Home, St. Joseph, MI

Honorable Mention

Here and Present in the Moment by Angela Murrell StateServ Medical, Tempe, AZ



Download the full PDF to enjoy this year's creative arts contest winning entries.

HopeWest Honored As Top Healthcare Company in the Nation



HopeWest serves Mesa, Delta, Montrose, Ouray and Rio Blanco counties in Colorado.

HopeWest has been recognized as one of Modern Healthcare's Top 100 Best Places to Work in Healthcare for 2015 nationwide, ranked number 30 among more than 400 national organizations. HopeWest is based in Grand Junction, Colorado.

Of the criteria used to determine rank in *Modern's* Healthcare's Best Places to Work in Healthcare assessment, 75 percent is the result of employee surveys.

Hospice Buffalo Receives \$2 Million Gift



The Ralph C. Wilson, Jr. Foundation announced a \$2 million gift to The Center for Hospice & Palliative Care as part of their 2015 Transitional Legacy Grant program. The grant will provide \$1.5 million to establish the Hospice Caregivers Mary Wilson pictured with her late husband Ralph C. Wilson Jr. Enrichment Endowment Fund,

which will support the recruitment, training, and education of Hospice Buffalo's home health aides, certified nursing assistants and other direct caregiving staff. The grant will also provide an additional \$500,000 to Hospice's Mary & Ralph C. Wilson, Jr. Endowment Fund which supports the provision of innovative programs and services to Hospice Buffalo's patients and their family members.



ADEC Meets in Alexandria

NHPCO was proud to host a meeting of members of the Association for Death Education and Counseling's Body of Knowledge Committee at our offices on October 28 and 29. For those not familiar with ADEC, the organization is an international, professional organization dedicated to promoting excellence and recognizing diversity in death education, care of the dying, grief counseling, and research in thanatology. Based on quality research, theory, and practice, the association provides information, support, and resources to its international, multicultural, multidisciplinary membership and to the public.

Pictured from L to R: Barbara Bouton. Amy Chow, Jane Moore, Phyllis Kominsky, Kathy Gilbert and Helen Chapple.

Avow Welcomes New Chief Officers

The Board of Directors at Avow, which serves Florida's Collier County and Naples, recently appointed two new chief officers. Jaysen F. Roa is president and CEO. He brings over 10 years of hospice leadership experience, most recently serving as executive director at Good Shepherd Hospice, Inc. an affiliate of Chapters Health System, Inc. Phyllis Hall has been appointed as chief financial officer. She brings 32 years of finance and operations experience, most recently serving as vice president and executive director of University Hospitals Management Services Organizations, University Hospitals Medical Group and University Hospital Practices based in Cleveland, Ohio.







Phyllis Hall, CFO

CONTINUING EDUCATION FOR NURSING ASSISTANTS



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"This resource is a must-have for all hospice and palliative care managers and care providers."

J. Donald Schumacher, President and CEO, NHPCO





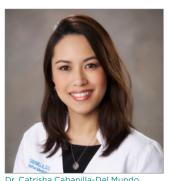








Nathan Adelson Hospice Welcomes New Medical Director



Dr. Catrisha Cabanilla-Del Mundo has joined Nathan Adelson Hospice as a medical director following the completion of her 2015 Fellowship in the hospice's Osteopathic Hospice and Palliative Medicine Program. She is a member

of the Nevada Osteopathic Medical Association, American College of Osteopathic Family Physicians, and American Osteopathic Association.

Covenant Care Announces Chief Growth Officer



Ron Fried joins the team at Covenant Care.

Covenant Care, based in Pensacola, Florida, is pleased to announce that Ron Fried has joined the organization as its new senior vice president and chief growth officer. Fried comes to Covenant Care from VITAS Healthcare in Miami, where he served as EVP of development and

public affairs. Additionally, he is a past-chair of NHPCO's board of directors, a member of the Hospice Action Network board, and serves as the vice president for the Board of Directors of the Florida Hospices and Palliative Care Association.

HopeHealth Receives \$1 Million and Launches Hope Academy

HopeHealth, which serves eastern Massachusetts, has received a \$1 million gift from the Elizabeth M. Arnold Stevens trust to establish The Elizabeth M. Arnold Stevens Alzheimer's & Hospice Caregiver Endowed Fund. This is HopeHealth's largest single gift and its first endowment. The earnings from the fund will generate annual support for HopeHealth's caregiver programs. It will allow HopeHealth to continue to educate, guide, and support those individuals in the community who are caring for someone with dementia or a terminal illness.

Additionally, in September, HopeHealth announced the launch of Hope Academy, its newly branded professional and community education and training offering. The program is designed expressly to enhance understanding, knowledge, and skills pertinent to the care of people with serious illness and includes a rich continuing education curriculum for healthcare professionals.



THANKSTO OUR SUPPORTERS



NHPCO acknowledges the generous support of these companies and their commitment to the success of the 16th Clinical Team Conference and Pediatric Intensive.

SILVER



BRONZE









PEWTER





News From National Hospice Foundation

Horses for Hospice

Hooves Across America Raises Money for National Hospice Foundation



On September 26, 2015, The Cheshire Horse Council, located in Cheshire, Connecticut, held a fundraising horse ride to benefit the National Hospice Foundation. The group created Hooves Across America to fundraise for hospices and other worthy causes nationwide. In 2014 the council held a fundraising event to benefit VITAS of Waterbury, Connecticut. The hospice had cared for the council president's brother.

"The Cheshire Horse Council was proud to support The National Hospice Foundation in our first national Hooves Across America fundraiser," says council representative, Jennifer A. Anderson. "At our home base in Connecticut, 26 horse and rider teams and dozens of volunteers joined the effort, and riders in other states pledged their support by



participating locally and spreading the word. The Cheshire Horse Council is pleased and proud to have contributed to the NHF and to unite the horse community to ride together for this important cause."

READ MORE...

Learn more at www.nationalhospicefoundation.org.

Lighthouse of Hope-Letter of Gratitude

The following letter was submitted by Hospice Austin, a recipient of a Lighthouse of Hope grant

To the National Hospice Foundation:

I cannot thank your organization enough for the opportunity you have given to one of our clients at Hospice Austin. Ms. Cahue grew up in Mexico City and often visited the beaches at Acapulco when she was young. Ms. Cahue's daughter has been trying to bring her mother to the ocean for years, but has been unable to due to financial and time constraints. This was an important goal, as Ms. Cahue's daughter felt that not taking her mother on this trip would be her only regret. READ MORE...

The NHF Gift Catalog - Gifts of Impact

How does it work?

- You remember your grandfather, whose love of cycling was his favorite topic of discussion at every holiday. You donate a bicycle in his memory.
- Your mother receives a special card from you describing the unique and generous gift you made in memory of her father. You receive satisfaction of giving a gift of compassion, dignity, and hope. LEARN MORE...





More From Moments of Life

An Award-Winning Year

Launched just over a year ago, NHPCO's engagement campaign *Moments of Life: Made Possible by Hospice* has reached millions of people with its affirming messages about hospice and palliative care. To top off this successful year, *Moments of Life* has been recognized with three national awards for excellence.

- Joining the likes of cause marketing campaigns from Exxon/Mobil, Toyota, Pizza Hut, and the ALS Ice Bucket Challenge, *Moments of Life* was chosen as a finalist in the PRNews 2015 Digital PR Awards, recognized for its outstanding efforts to educate and inform the public.
- It was awarded the Bulldog Reporter Gold Award for Best Non-profit Campaign (from an organization with an annual budget under \$20 million).

• The eHealthcare Leadership Awards gave Moments the Gold Award for Best Use of Rich Media, highlighting the high quality and overall excellence of the videos that are integral to the campaign.

If you haven't visited the *Moments of Life* website recently, we encourage you to visit. The entire site has been redesigned to be more engaging and more dynamic. To all those who have contributed to *Moments of Life*, NHPCO extends its deepest appreciation!



more joy. more love. more moments.

Moments of Life: Made Possible by Hospice is showing the world that hospice is about more than care for the dying. The hospice message comes through with style in the vintage cut short-sleeve t-shirt that's sure to make an impression. All proceeds will go towards helping NHPCO raise awareness of hospice and palliative care.

NHPCO's Hospice Ambassador Torrey DeVitto is wearing this special t-shirt that celebrates the spirit of hospice and reminds people that hospice is all about more joy, love and special moments.

#moremoments

At only \$18.95 for NHPCO members and \$21.95 for non-members, this t-shirt makes a great gift that will support awareness. Order your t-shirt from NHPCO's Marketplace by calling 1-800-646-6460 or visit www.nhpco.org/marketplace.





News From Global Partners in Care

India Partner Visits the U.S.

Staff from Narikeldaha Prayas Make Their First Trip to Visit U.S. Partner



Caption- Pictured at the "A Night at the Taj Mahal" event is Diane Hill Taylor, Aditya Manna, Dr. Shyamal Sarkar, and Rachel Zajicek.

Despite being thousands of miles apart, Narikeldaha Prayas of West Bengal, and Hospice of Kankakee Valley(HKV) located in Illinois, share a common mission

and deal with similar challenges. In October, Dr. Shyamal Sarkar and Aditya Manna traveled from India to visit HKV to learn more about HKV's operation and share their own information. The two organizations quickly learned that they are working towards the same goal-provide compassionate, comfort care at the end-of-life.

"The need is the same, the culture and the environment is different (but) the medicine is more or less the same," says Dr. Sarkar.

The two organizations developed a partnership through Global Partners in Care in 2014 and have been communicating through email at least twice a month. The October trip was the first in-person meeting. *Read more...*

New Partnership Announced!

Global Partners in Care is pleased to announce a new partnership between Hospice of the North Coast of Carlsbad, California and Nkhoma Hospital of Nkhoma, Malawi. The U.S. partner will work with their international partner to expand access to palliative care. *Read more...*

"A Night at the Taj Mahal" Event Raises Funds for Global Partners in Care





The National Hospice and Palliative Care Organization's 16th Clinical Team Conference was held in mid-October in Grapevine, Texas. One of the highlights of the conference was the event "A Night at the Taj Mahal"- a fundraiser

for Global Partners in Care. Festive decorations, traditional Indian dance, assorted activities, and plenty of celebration contributed to a great evening and successful event.

Throughout the night, attendees had the opportunity to browse the silent auction and learn more about the Global Partners in Care and the African Palliative Care Association's palliative care education scholarships (for nurses and social workers in Africa) that was promoted throughout the conference. Funds raised benefited Global Partners in Care and the scholarship program. *Read more...*

Pay It Forward!

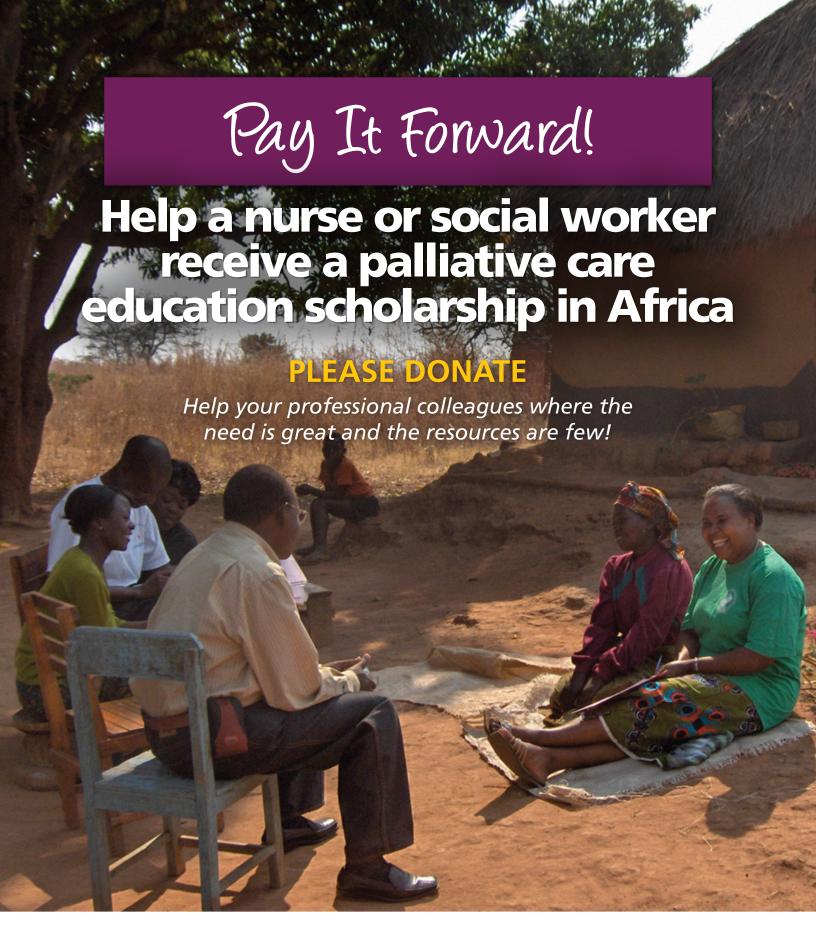
Support a Nurse or Social Worker to Receive a Palliative Care Education Scholarship in Africa

Please Donate. Help Your Professional Colleagues where the need is great and the resources are few.

To learn more, visit <u>GlobalPartnersInCare.org/</u> <u>scholarships</u>.

Learn more at www.globalpartnersincare.org.





To learn more, visit
GlobalPartnersInCare.org/scholarships or
AfricanPalliativeCare.org





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For more information visit: careers.nhpco.org



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

Outreach

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

Publications

- Weekly NewsBriefs
- NewsLine
- ChiPPS E-Journal

Affiliate Publications

- Giving Matters
- Focus on Compassion



National Hospice and Palliative Care Organization



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