

NHPCO Project ECHO 2023

Equity Where It Matters

Topic: Caring Through Interpersonal Conflict

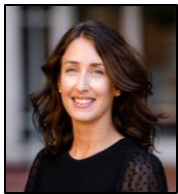
Date: April 6, 2023

NHPCO Project ECHO Team



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Disclosures

Disclosure

The planners and faculty disclose that they have no financial relationships with any commercial interest.

Data Collection

In order to support the growth of the ECHO® movement, Project ECHO® collects participation data for each ECHO® program. Data allows Project ECHO® to measure, analyze, and report on the movement's reach. Data is used in reports, on maps and visualizations, for research, for communications and surveys, for data quality assurance activities, and for decision-making related to new initiatives.

Evaluation

You will be receiving an email with a link to complete a short survey about this session. Please complete the survey within 48 hours. We ask all participants to take the survey as it will help us to improve future sessions.

Ground Rules and Video Teleconferencing Etiquette

- This is an all share-all learn format; judging is not appropriate
- Respect one another – it is ok to disagree but please do so respectfully
- Participants – introduce yourself prior to speaking
- One person speaks at a time
- Disregard rank/status
- Remain on mute unless speaking and eliminate or reduce environmental distractions to improve sound/video quality
- Use video whenever possible; make eye contact with the camera when you are speaking
- **Do not disclose protected health information (PHI) or personally identifiable information (PII)**

Today's Agenda

- Introduction of Faculty – NHPCO Team
- Didactic Presentation – Faculty
- Case Study Presentation – Faculty
- Discussion – Session Participants, Faculty, and NHPCO Team
- Key Takeaways – Faculty and NHPCO Team
- Closing Remarks – NHPCO Team

Session Faculty

Diane Deese, MCLSS-GB, CDEI-HC

VP of Community Affairs, Vitas, FL

Member, DAC, NHPCO

Nicole McCann-Davis, MSC

Chair of the Diversity Advisory Council, NHPCO

Communications Expert and Health Equity Advocate

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Caring Through Interpersonal Conflict

What is Stigma?

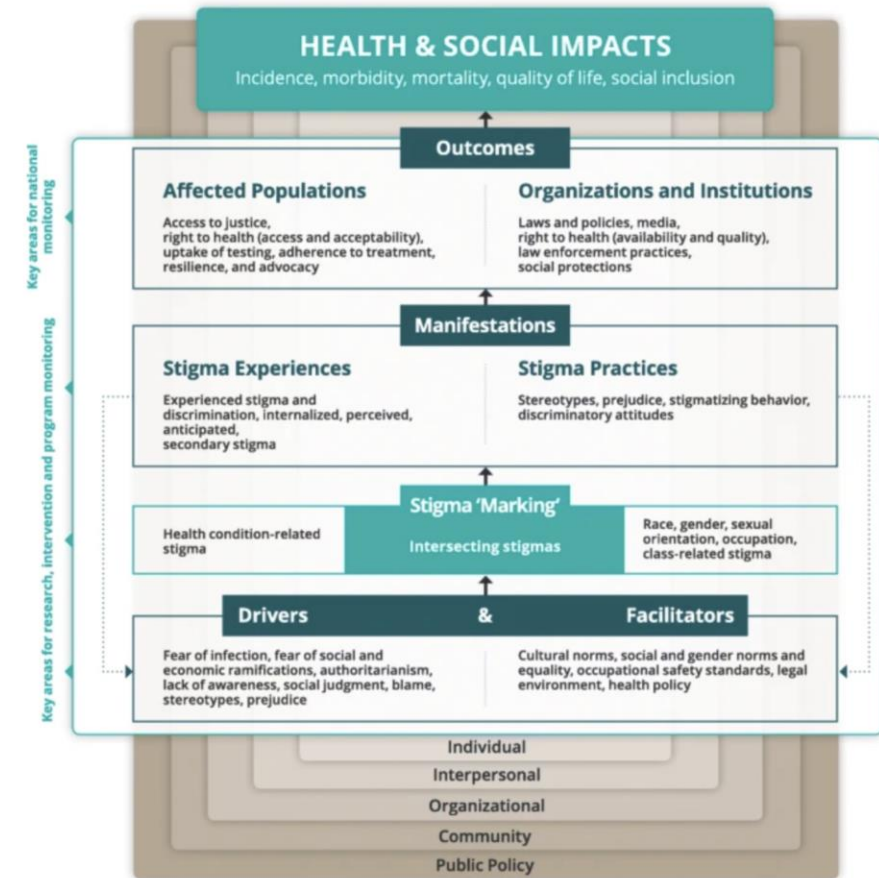
The American Psychological Association defines stigma as:

n. the negative social attitude attached to a characteristic of an individual that may be regarded as a mental, physical, or social deficiency. A stigma implies social disapproval and can lead unfairly to discrimination against and exclusion of the individual.



Examples of Stigma in Health Care

- 42.4% of adults in the U.S. age 20+ are considered to be obese
- Prioritization of sexual health for LGBTQ+ patients
- Judgement of pregnant women who don't want to be pregnant
- Refusing treatment to someone perceived to be a drug user
- Bias or judgement based on race, language, gender identity, sexual orientation, age, body type, ethnicity, culture, religion/spirituality, physical/mental ability, and socio-economic status



Health Stigma and Discrimination Framework

“Because stigma creates barriers to some groups getting resources, it can be a tool for reinforcing authority and privilege and can be mobilized to maintain social order.”

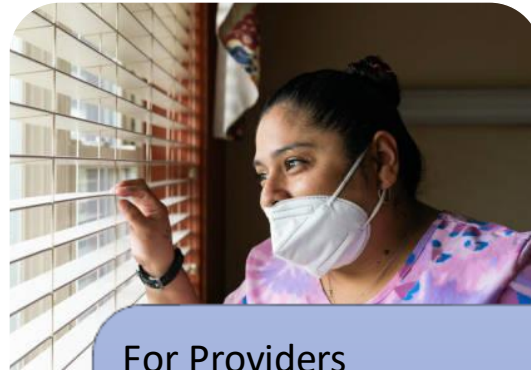
~Richard Parker and Peter Aggleton
Authors, *Social Science & Medicine*

Impact of Stigma in EOL Care



For Patients

- History of stigma changes people's health-seeking decision and narrows their trust in hospice and palliative care
- Being treated unfairly, and/or feeling low on the social hierarchy are physiologically stressful
- Time is of the essence/no time for setbacks in plan of care



For Providers

- Quality of care provided may not address the patient's cultural needs at the end-of-life
- Being treated unfairly, and/or feeling low on the social hierarchy are physiologically stressful
- Lack of people entering the workforce
- Pay inequities



In Policy

- Lack of insurance coverage
- Fewer educational opportunities
- Development of internal practices that perpetuate stigma

Importance of Removing the Stigma

- Support personal and professional development of clinicians
- Helps to build much needed trust between leadership and provider
- Improved quality of care
- Helps to build much needed trust between patient and provider
- Remove the US vs THEM mentality
- Demonstrates that you respect the patient and their values
- Each patient/family is an opportunity to **build or break** your relationship with the community

Didactic Presentation Q&A

Case Study Presentation

“I Just Want to Do My Job!”



Background

Situation

Patient is an 88-year-old woman suffering from advanced chronic obstructive pulmonary disease (COPD). Patient was recently admitted onto hospice services and her family has opted for her service to be provided at the home of her oldest son and daughter in-law.

Background

4 days into service, the patient receives her first social work visit. During the visit, the patient's son is dismissive and aggressively rude towards the social worker which caught her by surprise since previous notes in the EMR suggest that the patient's family were very hospitable towards the hospice team. Although the social worker was becoming uncomfortable with the son's behavior, she remained committed to completing her assessment, while also remaining calm, and professional.

- Upon conclusion of the social work visit, the patient's son walked to the door and expressed that he was offended and disgusted that the hospice organization would send someone like this to care for his mother.
- The patient's son then called the hospice executive director and used derogatory language when communicating his opposition towards transgender individuals. He then threatened to “fire” the hospice organization if he saw the social worker or anyone like that again.

Assessment

- How did the patient's son conclude that the social worker is transgender?
- What kind of communication did the organization have in place for staff education and training? E.g., DEI
- What work was done by the ED when this situation came in play? E.g., Policies, trainings and support for the staff, debriefing the family and the affected family?
- What is the organizational approach to address discrimination from the family?

Discussion and Recommendations

Discussion and Recommendations

- Discussion Questions:
 - What ethical implications should be considered related to patient care?
 - How can the leadership team support the employee being discriminated against?
 - Should formal policies be in place to address discrimination at the bedside (whether directed towards pt./employee)?
 - On the flip side, what if there is hesitation to care for patients based on their neighborhood? How should that be addressed?
- Recommendations
 - Educate yourselves and others (self-awareness)
 - Communicate and be conscious of language
 - Show compassion and empathy
 - Develop a consistent response/action plan
 - Communicate your commitment to supporting a healthy and psychologically safe workplace
 - Train organization leaders so they are empowered to respond promptly and appropriately
 - Correcting negative language that can cause stigma by sharing accurate information
 - Be inclusive in organizational decision-making

Key Takeaways

- Faculty and NHPCO Team to summarize Key Takeaways of the session, including:
 - Key Points
 - Actionable Steps
 - Conversation Starters/Questions to Consider
- Discussion generated will be summarized and sent to participants following the session

References

- <https://dictionary.apa.org/stigma>
- <https://bmcmedicine.biomedcentral.com/articles/10.1186/s12916-019-1271-3>
- <https://www.qualityhealth.org/wpsc/2020/08/17/stigma-bias-in-healthcare-the-obstacles-consequences-and-changes-needed/>
- <https://www.cdc.gov/mentalhealth/stress-coping/reduce-stigma/index.html>
- <https://providecare.org/how-does-stigma-show-up-health-care-social-service-delivery/>

Session Evaluation and Certificate of Completion

- Your feedback is valuable as we plan upcoming sessions!
 - Please complete the [Project ECHO Session Evaluation](#)
- Project ECHO sessions are not accredited for continuing education, but we are able to offer a confirmation of completion for each session. To receive confirmation of completion, please complete the following within 10 days of each session using the links found on the Project ECHO webpage.
 - *Project ECHO Session Evaluation*
 - *Project ECHO Post-Session Knowledge Check*

NHPCO Health Equity Certificate

- Would you like to demonstrate your commitment to delivering culturally competent care across the continuum of serious illness in an equitable, inclusive, and person-centered manner?
 - NHPCO is pleased to offer a Health Equity Certificate for individuals who participate in at least 17 sessions in the *Equity Where It Matters* series
- To receive participate in the Health Equity Certificate, please complete the following within 10 days of each session using the links found on the Project ECHO webpage.
 - *Project ECHO Session Evaluation*
 - *Project ECHO Post-Session Knowledge Check*

Upcoming Sessions

Date: April 20, 2023

Topic: Policy and Advocacy: Addressing Discrimination at the Bedside

Date: May 4, 2023

Topic: Mental Health Implications in Hospice & Palliative Care

Additional Information

NHPCO Project ECHO webpage:

<https://www.nhpc.org/regulatory-and-quality/quality/projectecho/>

NHPCO Project ECHO session recordings and Key Takeaways:

<https://www.nhpc.org/regulatory-and-quality/quality/projectecho/2023-project-echo-session-recordings/>

NHPCO Project ECHO Registration Link:

<https://nhpc.zoom.us/meeting/register/tZEsfu-trz4oGtQeKFw41UEIYNwjSli8QCBF>

For more information:

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