NHPCO Project ECHO 2023

Equity Where It Matters

Topic: Policy and Advocacy: Addressing Discrimination at the Bedside

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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. Completion of this evaluation is required for Quality Connections credit. We ask all participants to take the survey as it will help us to improve future clinic 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
Nikkie Preston
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- Ambassador, Hospice Action Network Nevada State
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The What…

“Advocacy is defined as any action that speaks in favor of, recommends, argues for a cause, supports or defends, or pleads on behalf of others.” Merriam Webster Dictionary

“Policy is a course or principle of action adopted or proposed by a government, party, business, or individual” Merriam Webster Dictionary

“Discrimination is defined as the unjust or prejudicial treatment of different categories of people, especially on the grounds of race, ethnicity, age, sex, sexual orientation or disability” Oxford Languages
The Why…

- Each one of our organizations must address discrimination, including at the bedside.
- If we don’t address it, what outcomes can we expect…
- Every person that we serve should receive care in a safe and welcoming environment.
- Our staff members should be able to provide care in a safe environment free from discrimination.
- NHPCO and its members have a responsibility to advocate for policy that promotes the principles and values of diversity, equity and inclusion.
How....
Advocating at the Bedside

• Not making assumptions about the patient
• Engaging the patient and decision maker with goals of care
• Seeking to understand their story and life experiences
• Communicating with the IDG team that is going to be providing care
• Having open and fluid communication – internal and external
• Evaluating and reviewing the data, segments and groups
Supporting our Team Members

I see you~ I hear you~ I support you

Colleague/Staff Support Statement
Advocating for Staff at the Bedside

• A support statement can foster safety, belonging and set processes
• It can include the following:
  ~The organization’s commitment to DEI
  ~Acknowledge that the organization has diverse staff members
  ~Affirm that the organization doesn’t tolerate any forms of discrimination or harassment of their staff

Time for a Poll
Today’s Case Themes
In an IDG, the RN Case Manager is describing unmanaged pain symptoms of an 89 y/o Latina female. The patient has pancreatic cancer and it is in stage 4 that has metastasized to her liver. The patient is being recertified for her second benefit period.

When the patient is awake she states, that she is experiencing pain throughout her body. She is bed bound and has a catheter, the family has noticed that she is sleeping for longer periods of time. The family is asking for more interventions to assist with pain management.

The physician is new to the hospice organization, although she has 15 years as a hospice physician. This is her second time attending IDG with this organization. The Physician states, “I don’t prescribe medications or discuss pain management to those people. They always want use to traditional/herbal pain medications.”
Discussion and Recommendations
Recommendations / Discussion

- What would be an effective response from the IDG Team to advocate for the patient?
- What would be the appropriate follow up for the physician to understand how their bias and discrimination could have a negative impact on the patient plan of care?

Recommendations:
- During the meeting, IDG leader states that we can’t make assumptions about the care plan for patients based on past experiences with patients that identify with a particular demographic or our personal beliefs
- Have a conversation with the Chief Medical Officer/ supervising physician to discuss the comment in order to make them aware for them to follow up with the physician
- Ask the Chief Medical Officer to affirm with their team the importance of inclusive practices and commitment to DEI principles
- Ask the Professional Development team to provide educational resources regarding bias and discrimination for the physician to complete
During a visit to a hospice patient’s home, a RN that identifies as African-American is checking in with the patient. The patient has congestive heart failure and is experiencing edema in their lower extremities. The patient has been on service for five months. The patient has made comments to the RN in the past, regarding his political views and views on race relations. The RN has noticed that the comments are becoming more frequent during her visits.

The patient states that he no longer watches channel XYZ because they have too many stories about Black people. He goes on to state that he is tired of hearing about Black people, because “those people” just constantly complain. He then explains that “in the good old days” he would not have had this problem, because there were laws and lynching that kept them in their place.

The nurse does not respond to the comments of the patient; she completes her visit and leaves.

*The patient diagnosis/disease progression did not cause any cognitive impairment or dementia*
Discussion and Recommendations
Recommendations / Discussion

- Is there an incident reporting process for the nurse?
- Do managers/supervisors know how to support their colleagues that experience discriminatory, harassing, or abusive comments/behaviors?

**Recommendations:**
- Seek Support from HR professionals
- Consider a policy/reporting process
- Listen to the colleague’s experience
- Avoid stating "I know how you feel" instead “I am sorry that you experienced that type of behavior"
- Be prepared that the colleague may express deep emotions when explaining/reliving the incident, do not judge but seek to understand
- Check in with the colleague several days after the incident to determine any other necessary interventions
- Avoid making excuses for the person that displayed the inappropriate behavior
Key Takeaways

- Advocacy at the bedside should happen for the patient and staff, to ensure a safe and inclusive care experience.
- Consider having a statement or policy for your organization that states the organization’s commitment to supporting a workplace that is free of discrimination and harassing behaviors.
- Understand the key factors of advocating to our legislative and governing bodies.
- Seek to understand how discrimination can negatively impact cultivating a diverse and equitable organization.
- Poll Questions…Does your organization have a policy or statement to support your staff and how can you advocate for the creation of a policy or statement.
Resources

• Transcend Data - https://nhpco-netforum.informz.net/nhpco-netforum/pages/Hospice_Through_the_DEI_Lens_NM

• Access and Inclusion - https://www.nhpco.org/resources/access-and-inclusion/

• Hospice Action Network - https://www.hospiceactionnetwork.org/take-action/#

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: May 4
Topic: Mental Health Implications in Hospice & Palliative Care

Date: May 18
Topic: Supporting Chinese Patients in serious illness and at end of life
Additional Information

NHPCO Project ECHO webpage:
https://www.nhpco.org/regulatory-and-quality/quality/projectecho/

NHPCO Project ECHO session recordings and Key Takeaways:
https://www.nhpco.org/regulatory-and-quality/quality/projectecho/2023-project-echo-session-recordings/

NHPCO Project ECHO Registration Link:
https://nhpco.zoom.us/meeting/register/tZEsfu-trz4oGtQeKFW41UEIYNwjSli8QCBF

For more information:
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