

Cordt Kassner

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Contents

1. [Saturday Newsletters](#)
2. [Health care contact days among older adults in Traditional Medicare](#)
3. [Healthcare contact days among older adults living with dementia](#)
4. [Cost and utilization implications of a health plan's home-based palliative care program](#)
5. [Specialist palliative care use and end-of-life care in patients with metastatic cancer](#)
6. [Family caregiver communication and perceptions of involvement in hospice care](#)
7. [Place of care in the last three years of life for Medicare beneficiaries](#)
8. [Coming to terms: Female veterans' experience of serious illness](#)
9. [A survey of state correctional health care providers on advance care planning: Opportunity for collaboration with corrections](#)
10. [Today's Encouragement](#)

Research News

Saturday Newsletters

Research literature is the focus of Saturday newsletters - enjoy!

Health care contact days among older adults in Traditional Medicare

Annals of Internal Medicine, by Ishani Ganguli, MD, MPH; Emma D. Chant, PhD; E. John Orav, PhD; Ateev Mehrotra, MD, MPH; Christine S. Ritchie, MD, MSPH; 1/23/24

Days spent obtaining health care outside the home can represent not only access to needed care but also substantial time, effort, and cost, especially for older adults and their care partners. Yet, these “health care contact days” have not been characterized. On average, older adults spent 3 weeks in the year getting care outside the home. These contact days were mostly ambulatory and varied widely not only by number of chronic conditions but also by sociodemographic factors, geography, and care-seeking behaviors.

Publisher's note: Also see Healthcare contact days among older adults living with dementia.

Healthcare contact days among older adults living with dementia

Journal of the American Geriatrics Society, by Emma D. Chant PhD; Christine S. Ritchie MD, MSPH; E. John Orav PhD; Ishani Ganguli MD, MPH; 1/23/24

For older adults with dementia and their care partners, accessing health care outside the home involves substantial time, direct and indirect costs, and other burdens. While prior studies have estimated days spent by these individuals in or out of hospitals and nursing homes, ambulatory care burdens are likely substantial yet poorly understood. Therefore, we characterized “health care contact days”—days spent receiving ambulatory or institutional care—in this population. Older adults with dementia spent 31 days a year accessing care which was mostly ambulatory.

Publisher's note: Also see Health care contact days among older adults in Traditional Medicare.



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Cost and utilization implications of a health plan's home-based palliative care program

Journal of Palliative Medicine, by Kimberly A. Bower, Jenelle Hallock, Xiaoli Li, Tyler Kent, Liane Wardlow; 1/25/24

A California-based health plan offered home-based palliative care (HBPC) to members who needed support at home but did not yet qualify for hospice. Although individuals in both groups were living with serious illnesses for which worsening health and increased acute care utilization are expected over time, both groups had reduced acute care utilization and costs during the study period compared with the prestudy period. Reduced utilization and costs were equivalent for both groups.

Specialist palliative care use and end-of-life care in patients with metastatic cancer

Journal of Pain and Symptom Management, by May Hua MD, MS; Ling Guo MS; Caleb Ing MD, MS; Deven Lackraj MPH; Shuang Wang PhD; R. Sean Morrison MD; 1/24/24

For patients with advanced cancer, high intensity treatment at the end of life is measured as a reflection of the quality of care. Use of specialist palliative care has been promoted to improve care quality, but whether its use is associated with decreased treatment intensity on a population-level is unknown. On a population-level, use of specialist palliative care was associated with improved metrics for quality end-of-life care for patients dying with metastatic cancer, underscoring the importance of its integration into cancer care.

Family caregiver communication and perceptions of involvement in hospice care

Journal of Palliative Medicine, by Archana Bharadwaj, Debra Parker Oliver, Karla T. Washington, Jacquelyn Benson, Kyle Pitzer, Patrick White, George Demiris; 1/24/24

The burden of caregiving for family members is significant and becomes particularly challenging at end of life, with negative effects on mental health, including anxiety and depression. Research has shown caregivers need better communication with their health care team. Caregiver-centered communication was positively associated with perceptions of involvement in care.



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Place of care in the last three years of life for Medicare beneficiaries

BMC Geriatrics, by Haiqun Lin, Irina B. Grafova, Anum Zafar, Soko Setoguchi, Jason Roy, Fred A. Kobylarz, Ethan A. Halm & Olga F. Jarrín; 1/25/24

Most older adults prefer aging in place; however, patients with advanced illness often need institutional care. Understanding place of care trajectory patterns may inform patient-centered care planning and health policy decisions. The purpose of this study was to characterize place of care trajectories during the last three years of life.

Coming to terms: Female veterans' experience of serious illness

Journal of Hospice & Palliative Nursing, by Varilek, Brandon M. PhD, RN, PCCN-K, CCTC, CNE, CHPN; Varilek, Brandon M. PhD, RN, PCCN-K, CCTC, CNE, CHPN; Isaacson, Mary J. PhD, RN, RHNC, CHPN, FPCN; 1/16/24

Female veteran populations are growing internationally and are more likely than men to develop certain serious illnesses, including some cancers. In the United States, fewer than 50% of eligible female veterans sought care at Veteran Affairs facilities. In addition, female veterans are not well represented within palliative care research, and little research exists that explores the female veteran experience of living with a serious illness. The purpose of this study was to explore female veterans' experiences of living with a serious illness.

A survey of state correctional health care providers on advance care planning: Opportunity for collaboration with corrections

American Journal of Hospice and Palliative Medicine, by Susan O'Conner-Von, PhD, RN-BC, CNE, FNAP; Rebecca Shlafer, PhD, MPH; Paul Galchutt, MPH, MDiv, BCC; Sara Kettering, MPH; Ali Bouterse, BA; Rebecca Freese, MS; and Patricia Berry, PhD, APRN, CNP, FAAN; 1/27/24

Prison populations are rapidly aging. Persons in prison age quicker and suffer more chronic illness and disability than their nonincarcerated peers, posing challenges to caring for prisoners who are chronically ill and dying. The goal of our study was to describe state prisons' practices and policies addressing persons in prison with advanced chronic and life limiting illness through a national web-based survey of state-level prison health care professionals.



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Today's Encouragement

Nobody trips over mountains. It is the small pebble that causes you to stumble. Pass all the pebbles in your path and you will find you have crossed the mountain.

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