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### **Headlines**

#### Frontline burnout in healthcare: A growing crisis demands action

MedCity News, by Russ Richmond; 4/4/24

... The healthcare industry faces a critical challenge: rampant burnout among its workforce. Recent data paints a concerning picture: 46% of healthcare workers report feeling burned out (CDC), and 41% of nurses in direct patient care roles are considering leaving their roles (McKinsey). These numbers – significantly higher than pre-pandemic levels – point towards systemic issues demanding immediate attention. ... [Health systems] need multifacted strategies:

- Investing in leadership ...
- Elevating employee voice ...
- Investing in team members ...
- Empowering frontline leaders: Enabling meaningful engagement ...
- Elevating employee voice: Listening and taking action ...
- Investing in team members: making work more than just a paycheck ...
  - o Professional development ...
  - Celebrating success ...
  - Mental health support ...
- Investing in our healthcare workforce: A shareed responsibility ...

## **Hospice Provider News**

### Navigating new requirements in the 2025 proposed Hospice Rule

Hospice News, by Jim Parker; 3/5/24

If the U.S. Centers for Medicare and Medicaid Services' (CMS) proposed 2025 hospice rule is finalized as written, hospices may encounter some hurdles implementing some of the new requirements. MS late last month issued its proposed hospice rule for 2025. The proposal called for a 2.6% increase in hospice per diem base rates, a number that many stakeholders say is insufficient in today's economic climate.

## A day in the life: Hospice nurse

Daily Nurse - The Pulse of Nursing; blog by Renee Hewitt; 4/8/24
Supporting someone with a life-limiting diagnosis or talking about death can be difficult for many people, but not for a hospice nurse. What's it like to care for patients and their families in the end-of-life process? Maryette Williamson, RN, BSN, knows firsthand from working as a BAYADA Hospice Nurse in Fayetteville, North Carolina. We asked her about her work. What follows is our interview ...
[From Maryette] ... "There was a learning curve from long-term care to hospice. The most significant difference in hospice is our focus on quality of life rather than a cu re. That was the most important change for me."

Editor's Note: Consider linking to this resource with your nurse recruitment tools. Hospice executives, read this nurse's big change from long-term care to hospice care. Ensure solid orientation-onboarding-precepting training, time, resources, support, and accountability for new hospice employees. See another article in our newsletter today, "Improved onboarding process could boost worker retention."



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## Dane County Board approves funding for hospice care program for homeless individuals

ABC TV 27 WKOW, Madison, WI; by Chloe Morrissey; 4/6/24

Multiple organizations aiming to combat homelessness received approval for funding after Thursday night's Dane County Board meeting. One organization, Solace Friends, will be receiving \$100,000 for the creation of Solace Home. It's a hospice program for housing insecure individuals given less than 6 months to live. The home can serve up to four people at one time who are currently living on the street, in a shelter or an unstable housing situation.

## World Hospice & Palliative Care Day: October 12, 2024

The Worldwide Hospice and Palliative Care Alliance; 4/6/2024 World Hospice and Palliative Care Day [WHPCD] has been marked every year since 2005. Join us on Saturday 12 October 2024 to advocate for better hospice and palliative care services around the world. The WHPCD theme for 2024 is "Ten Year's since the Resolution: How are we doing?" ... Download a wealth of resources, including last year's toolkit ...

### **Palliative Care Provider News**

#### Medicaid expansion and palliative care for advanced-stage liver cancer

Journal of Gastrointestinal Surgery; by Henrique A Lima, Parit Mavani, Muhammad Musaab Munir, Yutaka Endo, Selamawit Woldesenbet, Muhammad Muntazir Mehdi Khan, Karol Rawicz-Pruszyński, Usama Waqar, Erryk Katayama, Vivian Resende, Mujtaba Khalil, Timothy M Pawlik; dated 4/24/28 (for print)

Conclusion: The implementation of ME [Medicaid expansion] contributed to increased rates of palliative treatment for patients residing in ME states after expansion. However, racial disparities persist even after ME, resulting in inequitable access to palliative care.



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## **Clinical News**

### Medicine—Both a Science (Care) and an Art (CARE)

JAMA Network - Viewpoint; by Theodore J. Strange, MD and Mario R. Castellanos, MD; 4/3/24

In the current era, health care is increasingly characterized by the integration of

big data, predictive analytics, medical devices, and artificial intelligence. These technological advancements have undoubtedly transformed the landscape of medical care, offering unprecedented precision and efficiency in diagnosis and treatment. Yet, amidst this surge of scientific innovation, the timeless art of medicine (compassion and caring) remains a foundational aspect of patient-centered health care ... The acronym CARE (compassion, assistance, respect, and empathy) encapsulates these enduring values. ... In a world increasingly driven by data and algorithms, these qualities foster a trusting and supportive relationship between health care professionals and patients, thereby enhancing the healing process and enriching the overall health care experience.

### [Psychology Today] Facing Mortality Honestly

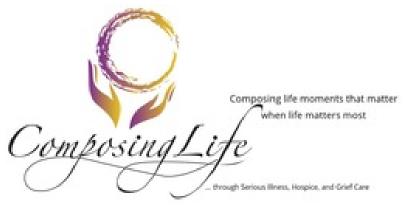
Psychology today, by Patricia Prijatel; 4/6/24

Personal Perspective: *Being Mortal*, by Atul Gawander, explores end-of-life-care. I read *Being Mortal* by Atul Gawande when it was first published in 2014 and haven't stopped talking about it. It shot to the top of my list as one of the most important books I've ever read. After 10 years, I read it again to see if it held up. It did. I was as entranced the second time as the first—even more so because, as it happens, I am also now 10 years older.

# The HAP Foundation, CLHPN partner to address unmet pediatric hospice needs

Hospice News, by Holly Vossel; 4/5/24

The HAP Foundation is partnering with the Child Life Hospice and Palliative Network (CLHPN) to improve awareness of and access to child life services among seriously ill youths and their families. The HAP Foundation helps support research and education in hospice and palliative care. Through the partnership, the organization will help fuel CLHPN's efforts to expand understanding and utilization of child life specialist services and their benefits for families facing terminal and chronic illness. Child life specialists can help address a rang e of unmet psychosocial, emotional and spiritual family needs, according to Alyssa Friedberg, CLHPN co-founder.



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## I work with dying Trump supporters. It's ... confusing

Daily Kos, by Scott Janssen; 4/6/24

I'm driving down a gravel road in rural North Carolina, looking at mailbox numbers. A hospice social worker, I'm headed to meet Petey, a patient dying of metastatic cancer. ... A few homes down I see a ranch style house with a Trump flag hanging limp from what looks like a homemade flagpole. ...

Publisher's Note: In our advocacy, we often say "death and hospice are bipartisan." This (inflamatory) opinion piece challenges us to ethically wrestle with our biases (political or otherwise) to professionally provide excellent end-of-life care to all the people we have the privilege to serve.

Editor's Note: In day-to-day care--no matter political, religious, or other beliefs--what **can** you support, within the appropriate scope of your professional role? What is untenable; you cannot support? Examine the term "moral distress."

## **Public Policy News**

## New safeguards added to New York's proposed Medical Aid in Dying Act

Spectrum News 1, by Luke Parsnow; 4/5/24

The two architects behind New York's Medical Aid in Dying Act have amended added additional safeguards to the legislation in the hope it can soon become law. The act would allow terminally ill, mentally capable adults who have been given six months or less to live to take their own lives with a cocktail of pharmaceutical drugs.

The changes include:

- Making even more explicit a prohibition that a health insurance company cannot deny coverage for care because a person requests, or fails to request the procedure
- Expanding the list of people who cannot serve as a witness to a dying
  patient who requests the procedure to include the patient's domestic
  partner, health care proxy, or anyone who has power of attorney for the
  patient.
- Extending immunity from adverse action for those who refuse to participate in the procedure by adding a new section explicitly providing immunity from "employment, credentialing, or contractual liability or penalty for any reasonable good-faith action or refusing to act under" the law.

#### **Post-Acute Care News**

## Hospitals cash in on a private equity-backed trend: Concierge physician care

KFF Health News, by Phil Galewitz; 4/1/24

Nonprofit hospitals created largely to serve the poor are adding concierge physician practices, charging patients annual membership fees of \$2,000 or more for easier access to their doctors. It's a trend that began decades ago with physician practices. Thousands of doctors have shifted to the concierge model, in which they can increase their income while decreasing their patient load. ...



TURNING DATA INTO INFORMATION — TO IMPROVE PATIENT CARE

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## **Technology / Innovations News**

**Providence spins off patient portal company** 

Modern Healthcare, by Brock E.W. Turner; 4/2/24

Providence is spinning off a patient portal company from its incubator program, the health system said Tuesday. The Renton, Washington-based Catholic health system Providence is spinning out consumer engagement technology company Praia Health. Praia also received a \$20 million Series A funding round as part of the spinoff.

#### Northwell, Memorial Hermann and others join Aegis consortium

Modern Healthcare, by Gabriel Perna; 4/2/24

Nine health systems, including Northwell Health and Memorial Hermann Health, System joined a digital consortium led by startup studio Aegis Ventures. Aegis, which creates, invests and operates digital health companies, said Tuesday the consortium will develop, invest in and deploy digital health solutions.

## **Ethics**

# 'We're the telescope looking forward': Medical ethicists ask tough questions as part of \$66 million research project

CU Department of Medicine, by Mark Harden; 4/5/24

In the original "Jurassic Park" movie, after the process of bringing dinosaurs back to life is explained to a team of consultants, one of them voices a warning: "Your scientists were so preoccupied with whether or not they *could*, they didn't stop to think if they *should*." University of Colorado Department of Medicine faculty members will be asking the "should" question years before there's an answer to "could.&rdqu o; They've joined in a nationwide study of whether tiny, battery-powered electric devices and genetic material, swallowed in capsule form, could one day replace surgery or injections as treatments for metabolic diseases such as diabetes and obesity.

# Ethical issues abound in adoption of Artificial Intelligence in cancer care Oncology Nurse Advisor; 4/4/24

There may be ethical barriers to the adoption of artificial intelligence (AI) into cancer care, according to a study published online March 28 in *JAMA Network Open*. Andrew Hantel, M.D., from the Dana-Farber Cancer Institute in Boston, and colleagues evaluated oncologists' views on the ethical domains of the use of AI in clinical care. The analysis included 204 survey responses from 37 states.

... "These findings suggest that the implementation of AI in oncology must

include rigor ous assessments of its effect on care decisions as well as decisional responsibility when problems related to AI use arise," the authors write.

## **General News**

## How therapy dogs are bringing comfort to hospice patients in Metro Detroit

The Detroit News, by Anne Snabes; 4/7/24

For over two months, hospice patient Virginia Favero has been getting occasional visits from Sam the beagle-mix, providing her with a canine companion. Sam isn't her dog, but he's there to bring her comfort. Sam's owner, Rachel Marshall, typically has the dog sit on a black folding chair, so Favero can reach him from her recliner chair in the Pomeroy Living community in Northville. ... "It really warms her heart when he comes," said Lynn Favero, Virginia Favero's daughter.

#### **Education**

#### Improved onboarding process could boost worker retention

McKnights Senior Living, by Kathleen Steel Gaivin; 4/8/24

As long-term care providers navigate post-pandemic workforce challenges, they also need to improve the onboarding process, according to the results of a new survey by Viventium. ... The study detailed in the company's 2024 Caregiver Onboarding Experience Report solicited responses from 175 administrators and caregivers in skilled nursing, assisted living, independent living, home health, home care and hospice care in November and December. The survey, Viventium said, found a "shockingly low bar for what passes as a 'good' onboarding experience, with strong indications that raising that bar could correlate to higher retention rates."

Editor's Note: See the article in today's newsletter, "A day in the life: Hospice nurse" for the importance of onboarding hospice nurses to differences between long-term care and hospice care.

## South Dakota State University Nursing School: Hitting the mark where it matters

South Dakota State University, "A Message from Dean Krogh," by Mary Anne Krogh; 4/2/24

As we welcome the blooming of spring (and the melting of snow), it brings me

great joy to reflect on the remarkable achievements and growth within the SDSU College of Nursing. ... One area that fills me with pride is the remarkable expansion we have experienced in the areas of palliative care, rural health and simulation research. These vital areas not only represent the forefront of nursing innovation but also reflect our dedication to addressing critical health care needs in diverse communities.

Editor's Note: Congratulations to So uth Dakota State University School and Dean Krogh! You are hitting the mark for several crucial, timely issues that continue to emerge in the news feeds we receive and distribute to our readers.

## **Non-print News**

#### How to talk about death

Maine Public Radio, by Jennifer Rooks and Cindy Han; 4/5/24

Talking about death is not easy. We'll discuss why stigma and discomfort can impede end-of-life conversations, for the person who may be nearing death as well as for friends and family members. We'll find out how to address the emotional and spiritual aspects of dying. And we'll discuss the more practical legal, financial and medical matters to handle before and after someone has died.

Panelists: Julie Weiss, social worker, Hospice of Southern Maine; Dr. Paul Segal, nephrologist, assistant professor of medicine; helped create curriculum for end-of-life doula students, University of New En gland; Dr. Fernando Moreno, palliative care specialist; medical director, Hospice of Southern Maine

### **International News**

## Thinking outside the box: eco concerns prompt greener funeral options

Positive.News, by Alison McClintock; 4/5/24

Keeping a lid on your carbon footprint doesn't stop with your last breath. Your choice of funeral can have a significant environmental impact. In a recent report by the US-based National Funeral Directors Association, 60.5% of those surveyed expressed their interest in greener options including resomation (water cremation) human composting and natural burials. And while the UK's funeral preferences are currently split 80:20 between cremations and burials, YouGov

research finds that almost a third (29%) of people in the UK would choose alternative committal methods if available.

## Translation and validation of the Chinese version of Palliative Care Self-Efficacy Scale

Palliative & Supportive Care; by Junchen Guo, Yongyi Chen, Boyong Shen, Wei Peng , Lianjun Wang, Yunyun Dai; 4/8/24

[This] study aimed to translate, adapt, and validate the Palliative Care Self-Efficacy Scale (PCSS) among Chinese palliative care professionals. ...

Significance of results: The findings from this study affirmed good validity and reliability of the C-PCSS [Chinese-PCSS]. It can be emerged as a valuable and reliable instrument for assessing the self-efficacy levels of palliative care professionals in China.

## **Today's Encouragement**

# Champions play as they practice. Create a consistency of excellence in all your habits. – Mike Krzyzewski

Editor's Note: Dedicated to our many hospice and palliative care champions who consistently practice excellence!

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