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**HOSPICE &
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TODAY**

June 3rd, 2024

Contents

- [1. Tech solutions for better patient care: How modern tools are transforming hospice management](#)
- [2. Apply now for AHA's 2025 Circle of Life Award recognizing end-of-life and hospice care providers](#)
- [3. BetterRX and Hospice Dynamix announce strategic partnership to reduce pharmacy costs for hospice agencies](#)
- [4. Providence Hospice-Community Healthcare of Texas and Ascension Providence Hospital collaborate to enhance inpatient hospice care](#)
- [5. Hospice \[of the Sacred Heart Inpatient Unit\] receives \\$5,000 donation](#)
- [6. Palliative care for cancer patients is found to be as effective given virtually as in person](#)
- [7. State Palliative Care Advisory Councils are advancing serious illness care](#)
- [8. ASCO updates Guidelines on Palliative Care](#)

9. Why and how to integrate early palliative care into cutting-edge personalized cancer care
10. NHPCO: CMS did not account for full burden of implementing HOPE Tool
11. They sacrificed to care for family and ended up on the street
12. How businesses should (and should not) use AI: A strategic blueprint
13. IntellaTriage and CommonSpirit Health at Home deepen partnership with Homecare Homebase integration
14. St. Vincent Hospital nurses and the MNA file fifth in series of complaints with state and federal agencies about dangerous patient care conditions that continue to compromise the care and safety of patients admitted to the Worcester-based facility
15. Today's Encouragement: I wonder ...

Hospice Provider News

Tech solutions for better patient care: How modern tools are transforming hospice management

NerdBot; by Nerd Voices; 5/30/24

Hospice care, fundamentally centered on providing comfort and support to terminally ill patients, has traditionally been a deeply personal and human-centric field. However, as technology advances, it is clear that modern tools can significantly enhance the quality of care. Integrating technology into hospice revenue management allows caregivers to streamline operations, reduce errors, and focus more on delivering compassionate care.

- Electronic Health Records (EHR) and Their Impact
- Telehealth: Bringing Care to the Patient
- Mobile Apps for Hospice Management
- Predictive Analytics: Anticipating Patient Needs
- Future Directions: AI and Machine Learning

Editor's Note: How have these changes affected your workforce? Likely, many of your older, experienced hospice professionals describe increased technology as hindering "compassionate care" instead of providing more "focus." While onboarding new employees requires extensive tech-training to specific EHR and other tech systems, have you sacrificed your all-important education for "delivering compassionate care," like communications, empathy, boundaries, grief care, family dynamics, self-care, and

more? Assess these dynamics and outcomes quantitatively through your data and qualitatively through dialogue/feedback. Seek balance. Examine your technology against your Mission and Vision Statements. Guide your employees to understand and value how both compassionate care and technology can work hand-in-hand.

Apply now for AHA's 2025 Circle of Life Award recognizing end-of-life and hospice care providers

American Hospital Association; 5/30/24

Applications are open through July 24 for AHA's 2025 Circle of Life Award, which recognizes hospitals and health systems that advance end-of-life and hospice care that is safe, timely, efficient, effective and equitable. There will be up to three recipients of the award, and Citations of Honor may also be presented to other noteworthy programs. The awards will be presented at the 2025 AHA Leadership Summit in Nashville, Tenn.

BetterRX and Hospice Dynamix announce strategic partnership to reduce pharmacy costs for hospice agencies

NBC News Channel 8, Salt Lake City, UT; by EIN Presswire; 5/31/24

BetterRX, a leading hospice pharmacy services and technology provider, and [Hospice Dynamix](#), a revolutionary time-on-service predictive analytics platform, today announced a strategic integration partnership. This collaboration will leverage Hospice Dynamix's proprietary Predicted Length of Stay (PLOS) technology to enhance BetterRX's proprietary medication ordering and management platform, enabling hospice providers to make ordering decisions based on the individual patient, creating immediate savings for the hospice.



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Providence Hospice-Community Healthcare of Texas and Ascension Providence Hospital collaborate to enhance inpatient hospice care

Community Healthcare of Texas; 5/28/24

Providence Hospice-Community Healthcare of Texas, the state's largest not-for-

profit hospice and palliative care provider since 1996, has partnered with Ascension Providence Hospital in Waco to provide inpatient hospice care for qualified patients. The new designated hospice wing will open on June 1 and feature five private rooms located on the fourth floor of Ascension Providence Hospital.

Hospice [of the Sacred Heart Inpatient Unit] receives \$5,000 donation

The Citizens' Voice; 5/30/24

Sherry Cross recently delivered a \$5,000 check to the Hospice of the Sacred Heart Inpatient Unit in Dunmore [PA]. The check represents proceeds from the 2nd annual 'Night to Remember' fundraiser in memory of Sherry's sister, Tracy Gototweski. ... "Please accept this donation of \$5,000 as a token of our gratitude for all you do. It is an honor to have the opportunity to give back to your wonderful organization. We hope that our efforts will support patients and their families and keep Tracy's star shining bright," Cross said.

Palliative Care Provider News

Palliative care for cancer patients is found to be as effective given virtually as in person

STAT; by Angus Chen; 6/2/24

Comfort can be delivered to patients with advanced cancer virtually just as well as in person, according to a [new study](#) presented on Sunday at the American Society of Clinical Oncology annual meeting in Chicago. That's welcome news to palliative care experts who have, in many cases, preferred the convenience and efficacy of telehealth sessions for both themselves and their patients since the Covid-19 pandemic forced virtual visits. ... Palliative care experts are also looking at other ways to help more patients get seen. In another abstract presented at ASCO in Chicago and published in [JAMA](#) by MGH's Temel, she showed the frequency of palliative care visits could be stepped down for patients with fewer physical or emotional symptoms — also without any loss in palliative care efficacy.



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State Palliative Care Advisory Councils are advancing serious illness care

National Academy for State Health Policy; by Ella Taggart; 5/30/24

Twenty-four states have a palliative care advisory council, coalition, or task force created through state legislation or regulation to guide work to support and expand care for those with serious illness. We talked to leaders of active and longstanding councils in Maine, Maryland, and Texas to learn about their creation, impact, and lessons learned for states looking to do the same. ... Learn more about the states that have councils, including their establishment and activity, on NASHP's Palliative Care Advisory Task Forces Tracker [link provided with the source article].

Clinical News

ASCO updates Guidelines on Palliative Care

Hematology Advisor; by Jen Smith; 5/30/24

The American Society of Clinical Oncology (ASCO) has released an update to its guidelines on palliative care for cancer patients. The guidelines and related information were published in the Journal of Clinical Oncology and JCO Oncology Practice. To develop updated recommendations for integrating palliative care into cancer care, an expert panel reviewed randomized controlled trials, systematic reviews, and meta-analyses published during 2015-2023. Based on their findings, the experts recommend that patients with advanced cancer be referred to specialized interdisciplinary palliative care teams soon after diagnosis, while the patients are still receiving active cancer treatment.

Why and how to integrate early palliative care into cutting-edge personalized cancer care

American Society of Clinical Oncology Educational Book; Laura A Petrillo, Katie Fitzgerald Jones, Areej El-Jawahri, Justin Sanders, Joseph A Greer, Jennifer S Temel; 6/24

Although ASCO and others recommend early palliative care for all patients with advanced cancer, widespread implementation of early palliative care has not been realized because of barriers such as insufficient reimbursement and a palliative care workforce shortage. Investigators have recently tested several implementation strategies to overcome these barriers, including triggers for palliative care consultations, telehealth delivery, navigator-delivered interventions, and primary palliative care interventions. ... The strengths of early palliative care in supporting patients' and caregivers' coping and centering decisions on their goals and values remain valuable in the care of patients receiving cutting-edge personalized cancer care.



Regulatory News

NHPCO: CMS did not account for full burden of implementing HOPE Tool

Hospice News; by Jim Parker; 5/29/24

The U.S. Centers for Medicare & Medicaid Services (CMS) may not have accounted for the financial and administrative burdens associated with its implementation of the Hospice Outcomes and Patient Evaluation (HOPE) Tool. In comments on the 2025 proposed hospice rule, the National Hospice and Palliative Care Organization (NHPCO) voiced concerns that the agency's regulatory impact assessment may not have taken all the details into account,

including the need for staffing and technology investments. “Clinical and administrative cost calculations do not align with the reality of the true costs of implementation,” NHPCO indicated in a letter to CMS. “In the proposed rule, CMS significantly underestimated the burden and costs hospices will incur to comply with HOPE requirements. The agency’s estimated cost burden of approximately \$185 million across all hospices fails to account for several important factors.”

Post-Acute Care News

They sacrificed to care for family and ended up on the street

Wisconsin Public Radio; by Kat McGowan; 5/29/24

... A son or sibling or niece gives up their own apartment or full-time job to look after a relative who needs help. They share expenses, maybe living off of a benefits check. But when that family member passes away or moves to a nursing home, the social security or housing subsidy stops coming. The caregiver is in mourning, out of a job and out of a place to live. “These were folks who had left behind something to go care for mom, and then the bottom falls out,” says Margot Kushel, a homelessness researcher and professor of medicine at University of California, San Francisco. Her team documented this pattern in their intensive surveys and in-depth interviews of older homeless Californians.

... Kushel envisions one brighter possibility. Given the extreme shortage of capable home caregivers, both in California and nationwide, people who have played that role for family could be recruited to do the same job for others, helping to build this essential workforce. “If you’re caregiving for 15 months for your mom, for instance you probably have transferrable skills,” she says.

Editor's Note: Pair this with recent articles we posted on 5/30/24, "[The real cost of cancer: 49% of patients carry \\$5K+ in medical debt](#)" and "[56 percent willing to dip into retirement savings to be family caregiver: survey](#)."

Technology / Innovations News

How businesses should (and should not) use AI: A strategic blueprint

Forbes; by Bernard Marr; 5/31/24

Businesses often find themselves at a crossroads in the race to leverage artificial intelligence (AI). The lure of AI's promise is undeniable—from enhancing customer experiences to automating routine tasks. Yet, how a company

approaches AI can spell the difference between mere technological flirtation and achieving real, transformative outcomes. Here, I offer a strategic blueprint for businesses keen on not just piloting AI but also scaling it effectively.

- Start with strategy, not technology ...
- Ethical considerations and bias mitigation ...
- Regulatory and compliance issues ...
- Technology infrastructure requirements ...
- More ...



IntellaTriage and CommonSpirit Health at Home deepen partnership with Homecare Homebase integration

KMLK; Press Release; 5/30/24

IntellaTriage, the nation's leading provider of nurse-first hospice and home health triage solutions, and CommonSpirit Health at Home (CSHaH), one of the nation's largest nonprofit healthcare systems, went live with a secure integration between Homecare Homebase and IntellaTriage's triage platform, IntellaHub. Partners since 2022, the companies recognized that a deeper integration of their systems could greatly enhance their shared mission of improving patient and caregiver experiences. Home health and hospice electronic medical records (EMR) often lack interoperability, hindering efficient information exchange and patient care in the field. By breaking down these silos, both companies anticipate improved workflows, eliminated redundancies, and enhanced experiences for patients and field nurses.

Editor's Note: This description emphasizes "field nurses." What about field psychosocial team members? Many hospice EMR systems are replicated from medically-centric documentation systems, without relevant fields and practice

standards that are user-friendly for your social workers, spiritual care/chaplains, grief counselors, expressive therapists, and more. This editor's statement is not a assessment of this article's deepened partnership and its technology; rather, it is simply an observation and question for hospice leaders, whatever your EMR system.

General News

St. Vincent Hospital nurses and the MNA file fifth in series of complaints with state and federal agencies about dangerous patient care conditions that continue to compromise the care and safety of patients admitted to the Worcester-based facility

Massachusetts Nurses Association (MNA); 5/29/24

As patient care conditions continue to deteriorate at St. Vincent Hospital, the registered nurses and the Massachusetts Nurses Association (MNA) have filed yet another round of complaints to state and federal agencies seeking immediate intervention to protect patients and staff, a situation so dire the complaints include a direct appeal to the Department of Public Health to assign onsite inspectors on a daily basis to ensure hospital administration is providing the resources needed to ensure the safety of all concerned. In fact, the nurses report that DPH has recently been at the hospital investigating yet another serious patient safety incident.

Editor's Note: As reported in numerous articles in our newsletter, patient safety and workplace violence/safety issues continue to be key causes for healthcare professional resignations, unionizations, and strikes (ie., nurses and/or physicians). It's time to review your organization's patient safety and workplace violence Policies and Procedures, staff and volunteer trainings, caregiver resources to ensure patient safety in the home, topics like "Abuse and Neglect," and your community's data on workplace safety concerns and community response resources.

Today's Encouragement

I wonder what it would be like to live in a world where it was always June.

- L.M. Montgomery



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