Cordt Kassner

From: Hospice & Palliative Care Today Newsletter

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Sent: Saturday, June 8, 2024 4:00 AM

To: Cordt Kassner

Subject: Your Hospice & Palliative Care Today Newsletter for 06/08/24



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Saturday newsletters focus on headlines and research - enjoy!

Contents

- 1. Stepped palliative care for patients with advanced lung cancer: A randomized clinical trial
- 2. National Nurses Honor Guard Coalition
- 3. Geriatric End-of-Life Screening Tool prediction of 6-month mortality in older patients
- 4. The role and professional standards of the Adult-Gerontology Nurse Practitioner in hospice and palliative care
- 5. A moratorium on the euphemism MAID
- 6. Exposure to a loved one's death and advance care planning: Moderating effects of age
- 7. Mapped: The highs and lows of the world's happiness landscape

8. Today's Encouragement

Research News

Stepped palliative care for patients with advanced lung cancer: A randomized clinical trial

JAMA; by Jennifer S. Temel, MD, Vicki A. Jackson, MPH, MD, Areej El-Jawahri, MD, Simone P. Rinaldi, MSN, ANP-BC, ACHPN, Laura A. Petrillo, MD, Pallavi Kumar, MD, Kathryn A. McGrath, MD, Thomas W. LeBlanc, MD, Arif H. Kamal, MD, Christopher A. Jones, MD, Dustin J. Rabideau, PhD, Nora Horick, MS, Kedie Pintro, MS, Emily R. Gallagher Medeiros, RN, Kathryn E. Post, PhD, RN, ANP-BC, Joseph A. Greer, PhD; 6/24 A stepped-care model, with palliative care visits occurring only at key points in patients' cancer trajectories and using a decrement in QOL to trigger more intensive palliative care exposure, resulted in fewer palliat ive care visits without diminishing the benefits for patients' QOL. While stepped palliative care was associated with fewer days in hospice, it is a more scalable way to deliver early palliative care to enhance patient-reported outcomes.

Publisher's note: This article was reference earlier this week in Palliative care for cancer patients is found to be as effective given virtually as in person.

National Nurses Honor Guard Coalition

Journal of Hospice and Palliative Nursing; by Betty Ferrell; 6/24

As hospice and palliative care nurses, we are very familiar with the importance of rituals at the end of life or after death, which helps us to honor this sacred time. We know that funeral or memorial services offer a time to honor lives and to provide comfort to families. But how often do we pause to honor our own nursing colleagues for their lives of service?

I recently learned of an incredible organization, the National Nurses Honor Guard Coalition, which is doing just this—honoring nurses through participation in their funeral services to celebrate these lives well lived and lives dedicated to our profession Hearing about the Honor Guard Coalition brought tears to my eyes to think about this incredible tribute to nurses.

Publisher's Note: Thanks for writing about this important group Betty! I also recently learned about the National (and state-specific) Nurses Honor Guard Coalition at the Nebraska Hospice & Palliative Care Association annual conference. A great group with a fantastic mission.

Geriatric End-of-Life Screening Tool prediction of 6-month mortality in older patients

JAMA Open Network; by Adrian D. Haimovich, MD, PhD, Ryan C. Burke, PhD, MPH, Larry A. Nathanson, MD, David Rubins, MD, R. Andrew Taylor, MD, MHS, Erin K. Kross, MD, Kei Ouchi, MD, MPH, Nathan I. Shapiro, MD, MPH, Mara A. Schonberg, MD, MPH; 5/31/24

In this prognostic study of 82,371 ED encounters within a tertiary care emergency department, the Geriatric End-of-Life Screening Tool (GEST) performed robustly on external validation, identifying 11.6% of the population as having a 30% or greater mortality risk. Compared with serious illness diagnoses, GEST provided a greater net benefit as a screening tool using decision c urve analysis. The findings of this prognostic external validation study highlight the opportunity to use pragmatic, prognostic electronic health record algorithms to identify older adults in the emergency department for end-of-life care interventions.

Publisher's Note: See related article posted earlier this week from McKnight's Long-Term Care News, Screening tool predicts older adults' need for end-of-life care intervention.



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The role and professional standards of the Adult-Gerontology Nurse Practitioner in hospice and palliative care

Journal of Hospice and Palliative Nursing; by Heather Coats, PhD, APRN-BC, Kelly Henrichs, Kelly DNP, RN, GNP-BC; 6/24

The adult/gerontology (gero) nurse practitioner (NP) delivers primary and/or specialty palliative care to persons and their families who live each day with a myriad of serious illnesses. In this role, the adult/gero NP uses their skill set to address the whole person (physical, psychological, social, and spiritual/existential) to improve the quality of life for persons they care for. This article is the fourth in a series of 6 highlighting the different roles of the adult/gero NP and the advanced certifie d hospice and palliative registered

nurse, and how these 2 roles overlap. The purpose of this article was to provide details of education and certification pathways for these NP roles, describe the overlaps in clinical care, and illustrate how the adult/gero NP in palliative and hospice care can contribute to leadership in program development for care of persons and their families who live with serious illness.

A moratorium on the euphemism MAID

Journal of the American Medical Directors Association; by Richard W. Sams II MD, MA (Ethics), CMD, Peter Jaggard MD, CMD; 6/24

It is essential for high-quality health care for providers to adhere to the principle of truth telling, speaking with clarity and honesty. The euphemism medical aid in dying, MAID, is being mainstreamed in the medical literature by proponents of physician-assisted suicide and euthanasia. ... We recommend standardized language that accurately denotes the context and process. Provider Assisted Death by Prescription (PAD-P) and Provider Assisted Death by Administration (PAD-A) are terms that most accurately describe the process, taking into account who is prescribing or admi nistering a lethal substance and the outcome of the actions. ... The standardized language needs to be used on death certificates so we can most accurately assess the impact that provider-assisted death is having on society. Emphasizing truth telling in morally controversial practices will foster trust among health care providers and with patients.

Exposure to a loved one's death and advance care planning: Moderating effects of age

American Journal of Hospice and Palliative Medicine; by Peiyuan Zhang, MS, Sarah Clem, MSW, Roderick Rose, PhD, John G. Cagle, PhD; 6/24

Despite documented benefits of Advance Care Planning (ACP), it is still under-utilized in the U.S. Our study aimed to examine whether experiencing a loved one's death is associated with one's own ACP behavior among adults in the U.S. and the potential moderating effect of age. ... Exploring an individual's previous experience with a loved one's death might be an effective way to broach the concept of ACP among adults of all ages. This strategy may be particularly useful in facilitati ng discussions of end-of-life medical wishes with doctors among younger adults than older adults.



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Mapped: The highs and lows of the world's happiness landscape

BigThink.com (originally posted in 1440 Daily Digest; by Frank Jacobs; 6/3/24 The Gallup World Poll reveals regional peaks and valleys of happiness across all of the continents. At a glance, we see that happiness levels are relatively high across the Americas, in Europe and Oceania, and generally lowest across Africa and South Asia. In North America, Canada (6.9) came out on top, happier than the U.S. and Mexico (both 6.7). The least happy country in North America is the Dominican Republic (5.8) — perhaps unfairly, as its bad-to-w orse neighbor Haiti wasn't surveyed.

Today's Encouragement

Over 90% of what we worry about never happens.



JULY 24-26, 2024

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