

Cordt Kassner

From: Hospice & Palliative Care Today Newsletter
<subscriptions@hospicepalliativecaretoday.com>
Sent: Wednesday, June 26, 2024 4:00 AM
To: Cordt Kassner
Subject: Your Hospice & Palliative Care Today Newsletter for 06/26/24

OUR SPONSORS

[Teleios Consulting Group](#)

[CHAP](#)

[LMHPCO Conference](#)

[Composing Life Out of Loss](#)

[Hospice Analytics](#)



**HOSPICE &
PALLIATIVE CARE
TODAY**

June 26th, 2024

Contents

1. [BrightSpring Health Services announces definitive agreement to acquire Haven Hospice, expanding its hospice services into the CON state of Florida](#)
2. [Jimmy Carter's long stay in hospice dispels myths about end-of-life care](#)
3. [Reflections: Three ways to think about death and dying](#)
4. [Getting muddy for Center for Hospice Care](#)
5. [Aroostook House of Comfort hosts 11th Annual Golf Classic: Raises over \\$80k](#)
6. [Improving advanced care planning for late-stage cancer](#)
7. [Dementia decisions: Making tough choices about hospice, palliative care](#)
8. [Children's Healing Center opens in Ypsilanti Township in July](#)
9. [Lawmakers remain committed to passing hospice workforce bill](#)
10. [Medical aid-in-dying bill stalls in Delaware Senate](#)
11. [NC Senate approves bill legalizing medical marijuana 36-10; measure goes to House next](#)

12. [A paradigm shift for healthtech CEOs: Increasing patient satisfaction and retention](#)
13. [Telemedicine and e-Health: May issue](#)
14. [When victims die more than 30 days after a crash, they don't count](#)
15. [Today's Encouragement: Alone we can do so little; ...](#)

Headlines

[BrightSpring Health Services announces definitive agreement to acquire Haven Hospice, expanding its hospice services into the CON state of Florida](#)

BrightSpring press release; 6/24/24

BrightSpring Health Services (NASDAQ: BTSG), a leading provider of home and community-based health services for complex populations, today announced a definitive agreement to acquire the assets of North Central Florida Hospice, Inc. and Haven Medical Group, LLC (collectively "Haven Hospice"), a Florida-based company holding a Certificate of Need (CON) for comprehensive hospice care services in 18 counties in north central Florida. ... BrightSpring's acquisition of Haven will allow the Company to provide advance care planning, palliative, and hospice services throughout Florida Agency for Health Care Administration service areas 3A, 4A, and 4B. Total consideration for the acquisition is \$60 million, with \$15 million in cash at close, \$30 million in Company equity at close, and an additional \$15 million in a seller note payable four years after closing. The acquisition is expected to close in the third quarter of 2024.

Hospice Provider News

[Jimmy Carter's long stay in hospice dispels myths about end-of-life care](#)

Miami Herald; by Brian Dunleavy; 6/24/24

Former President Jimmy Carter's being in hospice for 16 months makes him an "outlier," but it also highlights the multifaceted nature of end-of-life care and dispels myths about that care, experts told UPI. ... [Dr. Joan Teno, a former hospice provider and an expert in geriatric care said,] "President Carter is an outlier in that only a small percentage of hospice patients survive more than 15 months," she told UPI in an email. "The fact that he has lived so long on hospice is testament to his excellent medical care at home and, if I had to guess, his will to live." It also illustrates the core focus of hospice, which is typically geared toward people with an anticipated life expectancy of 6 months or less, for whom

curing their underlying illness isn't an option, Teno added.

Defying the odds: More than 90% of patients who enter hospice care die within the first six months, and nearly 40% die within the first week, according to the National Institutes of Health.

Editor's Note: Too many hospice organizations and news outlets have used former President Jimmy Carter's longer-than-normal hospice stay to discount and ignore core "hospice" care. Rarely--if ever--have any of these news articles been transparent enough to mention anything whatsoever about the [CMS Hospice Face-to-Face Encounter Requirement](#), nor anything about hospice live d ischarges. This article is more authentic by describing his hospice stay of 16 months as being as "outlier." Still, this headline can be misleading with its phrase "... dispels myths about end-of-life care."

Reflections: Three ways to think about death and dying

Post Alley, Seattle, WA; by Anthony B. Robinson; 6/21/24

Our book group had a wrap-up session on our "Aging and Mortality" series last night. We invited everyone to share their own take-aways from our six books. What did we learn? What was comforting? Challenging? How might this effect your planning and decision-making? Before I share my own take-aways from the series, I would note one general theme in what we read: the more we isolate death and the dying, the more we fear death. Here my three take-aways from the series and our conversations:

- First, the process of dying has some predictable stages and patterns, and can be relatively benign. ...
- My second take-away makes a distinction between control and agency. ...
- My third take-away is that death, or better, the experience of dying, is sacred. ...



Accelerate Results
Accelerate Growth
Accelerate Learning

Sponsor of Hospice & Palliative Care Today

Getting muddy for Center for Hospice Care

LaporteCounty.life; by Center for Hospice Care, Valpraiso, IN; 6/24/24

The Sunday of Memorial Day weekend the South Bend Sod Busters hosted their annual mud bog. For years a portion of the proceeds from this event have benefitted Center for Hospice Care. One of the first times Red Fisher attended the event as the events manager for Hospice Foundation, he told the organizers, "When you go over \$100,000 total for this event, I will go down the bog in a white tuxedo!" A couple of years ago, they surpassed that mark – and this year Red kept his word. Thanks to our friends at Louie's Tux Shop, Red got into one of the vehicles and went down the bog – not once, but twice – while wearing a stylish white tux!

Editor's Note: Calling all leaders, what fun, fundraising challenges might you offer?

Aroostook House of Comfort hosts 11th Annual Golf Classic: Raises over \$80k

The Aroostook Hospice Foundation proudly hosted its 11th Annual Golf Classic on Saturday, June 15 at the Presque Isle Country Club, successfully raising over \$80,000 for the Aroostook House of Comfort. This remarkable achievement was made possible through the generous contributions of 162 sponsors, 46 teams, 60 in-kind donors and 32 dedicated volunteers. ... The unwavering generosity of community members and partners allows them to maintain a 9,800-square foot, state-of-the-art facility where individuals and families receive compassionate care, comfort, and support during their hospice journey.

Editor's Note: The Aroostook House of Comfort is an inpatient hospice and respite care facility owned by the Aroostook Hospice Foundation and staffed by Northern Light Home Care & Hospice, in South Portland, Maine.

Palliative Care Provider News

Improving advanced care planning for late-stage cancer

Medical Xpress; by Melissa Rohman; 6/24/24

Multilevel care interventions improved clinician–documented advanced care planning (ACP) compared with a clinician-level intervention alone for patients with genitourinary cancer, according to findings published in *JAMA Oncology*. "Clinicians often have limited time to assist patients in fully understanding ACP. This intervention is one approach to improve ACP and care

delivery among patients with advanced stages of genitourinary cancer," said Gladys M. Rodriguez, MD, MS, assistant professor of Medicine in the Division of Hematology and Oncology and lead author of the study. For patients diagnosed with late-stage cancer, ACP can help reduce unnecessary acute care, increase [palliative care](#) and improve quality of life. However, previous reports have found that less than 20% of patients will engage in ACP with their health care providers. ... The primary outcome was ACP documentation in the electronic health record by the patient's oncology clinician within 12 months. Secondary outcomes included shared decision-making, palliative care use, hospice use, emergency department visits and hospitalizations within 12 months.



NEW Workshop

Become one of the first to achieve the CHLead® credential.

CHAP CERTIFIED
Healthcare Leader®
CHLead®

Healthcare Leadership Certification Workshop

San Diego, CA | October 8-9

Sponsor of Hospice & Palliative Care Today

Clinical News

Dementia decisions: Making tough choices about hospice, palliative care

Being Patient; by Katy Koop; 6/25/24

In the later stages of Alzheimer's, palliative and hospice care can be necessary. But how do you find a facility designed for dementia patients? ... Dr. Maribeth Gallagher, director of Arizona's [Hospice of the Valley](#) dementia program, joins Being Patient video reporter Mark Niu to discuss how to make these difficult decisions and what makes a palliative or hospice care program "dementia-capable." Gallagher's work directing the Hospice of the Valley's dementia program has received national and international awards for its innovative approaches. Her focus on dementia care was initially inspired by her personal experiences as a family caregiver, sharing the journey with her loved one from

diagnosis to death. [Click on the title's link for the full conversation, in both audio and text.]

Children's Healing Center opens in Ypsilanti Township in July

DBusiness Magazine, Detroit, MI; by R. J. King; 6/24/24

The Children's Healing Center will open its doors in Ypsilanti Township on July 8, offering children with weakened immune systems and their families a safe and clean place to play. ... The facility is the Children's Healing Center's second location after first opening its doors in Grand Rapids in 2015. The new state-of-the-art 11,000-square-foot facility features a hospital-grade environment where families can engage in a diverse range of innovative programming free of charge. "It has always been our goal to open a second location of the Children's Healing Center," says Amanda Barbour, founder and CEO of Children's Healing Center. "The kids, young adults, and families who rely on us have very few options for social interaction, so we provide an invaluable outlet to build friendships and fight the effects of isolation and loneliness. The Children's Healing Center states it is a first-of-its-kind year-round recreational facility for kids and young adults aged 0-26 with weakened immune systems and their families that provides opportunities for play, programming, education, and socialization.

Public Policy News

Lawmakers remain committed to passing hospice workforce bill


Hospice News; by Jim Parker; 6/24/24

Federal legislators plan to continue to work on passing a bill designed to bolster the hospice and palliative care workforce. The Palliative Care and Hospice Education Training Act (PCHETA) has come before Congress several times but has not yet been passed. The bill's most recent development occurred in July 2023, when it was reintroduced by Sens. Tammy Baldwin (D-Wisc.) and Shelley Moore Capito (R-W.Va.). Capito has indicated that the senators are not giving up on the legislation as they seek to ensure that hospice and palliative care providers are able to meet growing demand. ... The legislation would establish fellowships through new palliative care and hospice education centers to provide short-term, intensive training, as well as incentivized award programs across all the relevant disciplines. It also would support programs to develop career paths within the field.



**Collaboration in Peace,
Comfort & Dignity:**

BE that change

 **LOUISIANA-MISSISSIPPI** 2024 CONFERENCE
HOSPICE AND PALLIATIVE CARE ORGANIZATION
JULY 24-26, 2024

Sponsor of Hospice & Palliative Care Today

Medical aid-in-dying bill stalls in Delaware Senate

Bay to Bay News, Dover, Delaware; by Joseph Edelen; 6/24/24

An act that would allow physician-assisted suicide stalled in the state Senate on Thursday. House Bill 140, if enacted as written, permits a terminally ill individual who is an adult resident of Delaware to request and self-administer medication to end their life in a humane and dignified way. ... The bill, brought by Rep. Paul S. Baumbach, D-Newark, narrowly passed the House of Representatives in April, with a vote of 21-16. On Thursday in the Senate, the measure logged 10 yes votes and nine no votes, with Sen. Kyra Hoffner, D-Dover, not voting. But Senate sponsor Bryan Townsend, D-Newark, then changed his yes vote to no. The alteration meant that the initiative stalled in the Senate but could be brought back to its floor for another vote by Sunday, the last day of this year's legislative session. Many senators seemed emotional while speaking about the measure Thursday. ...

NC Senate approves bill legalizing medical marijuana 36-10; measure goes to House next

CBS17.com, Raleigh, NC; by Harrison Grubb; 2/24/24, updated 2/25/24

North Carolina is one step closer to legalizing medical marijuana after the Senate passed a bill 36-10 Monday night. "Anytime cannabis comes up in the

conversation in North Carolina, especially when that conversation is able to be moved forward in the right direction, I always like to be here to make sure the voice of the people is the loudest in the room,” said Chris Suttle, an advocate for legalization. Suttle says he was diagnosed with an inoperable brain tumor several years ago when he began microdosing cannabis. ... Several amendments are now part of the legislation, including stricter ID requirements and restrictions on packaging to ensure they’re less likely to be advertised toward children. Several Republicans again voiced concern about cannabis ahead of Monday’s vote.

Technology / Innovations News

A paradigm shift for healthtech CEOs: Increasing patient satisfaction and retention

Forbes; by Eric Giesecke; 6/24/24

In our hyperconnected world, seamless communication is the norm. From the latest news to customer service chats, consumers expect streamlined interactions. However, the healthcare and healthtech industries have lagged in adopting consumer-friendly practices. ... A patient’s experience is extremely important for healthcare organizations to thrive. It’s important to remember that in the digital age, competitors are not just other healthcare companies. ... So how can we customize experiences better than ever before? One important step is taking the time to understand your organization's current technology. ...

1. Conduct a technology audit. ...
2. Engage key stakeholders. ...
3. Develop a clear implementation plan. ...
4. Provide comprehensive training. ...
5. Utilize existing resources. ...

Adopting a Consumerism Mindset ...

1. Enhance communication and transparency. ...
2. Implement continuous training programs. ...
3. Personalize patient interactions. ...
4. Integrate patient education. ...



Telemedicine and e-Health: May issue

Telemedicine and e-Health; Editor-in-Chief Charles R. Doearn, MBA, FATA and Executive Editor Karen Rheuban, MD, FATA; published monthly

The leading peer-reviewed journal for cutting-edge telemedicine applications for achieving optimal patient care and outcomes. [Relevant titles include the following. These are included in this current May's print edition, many were previously published "online ahead of print."]

- Bridging the Telehealth Divide: Racial and Ethnic Disparities in Medicare Telehealth Usage Highlights the Need for Equity-Focused Approaches
- Chronic Disease Management through Clinical Video Telehealth on Health Care Utilization, and Mortality in the Veterans Health Administration: A Retrospective Cohort Study
- Improving Access to Specialty Pediatric Care: Innovative Referral and eConsult Technology in a Specialized Acute Care Hospital
- Rural Patients' Experiences with Synchronous Video Telehealth in the United States: A Scoping Review
- Navigating the Landscape of Telemedicine Research: A Topic Modeling Approach for the Present and Future

General News

When victims die more than 30 days after a crash, they don't count

StreetsBlogUSA; by Kea Wilson; 6/24/24

... Since it first launched in 1975, the federal Fatality Analysis and Reporting System database has excluded all car crash deaths that occur more than 30 days after the initial collision. That means people like [9-year-old] Ben — who lived

with a traumatic brain injury, a severed spinal cord, an inability to speak, and other major disabilities for five years before he died — aren't included in official annual death totals. Survivors say those stats also don't capture the sheer scale of the grief, horror, and hardship suffered by victims and their families, whether they succumb to their injuries immediately or manage to hang on.

Today's Encouragement

Alone we can do so little; together we can do so much. - Helen Keller



Sign up for our free daily newsletters [here!](#)

The Fine Print:

Paywalls: Some links may take readers to articles that either require registration or are behind a paywall. **Disclaimer:** Hospice & Palliative Care Today provides brief summaries of news stories of interest to hospice, palliative, and end-of-life care professionals (typically taken directly from the source article). Hospice & Palliative Care Today is not responsible or liable for the validity or reliability of information in these articles and directs the reader to authors of the source articles for questions or comments. Additionally, Dr. Cordt Kassner, Publisher, and Dr. Joy Berger, Editor in Chief, welcome your [feedback](#) regarding content of Hospice & Palliative Care Today. **Unsubscribe:** Hospice & Palliative Care Today is a free subscription email. If you believe you have received this email in error, or if you no longer wish to receive Hospice & Palliative Care Today, please unsubscribe [here](#) or reply to this email with the message "Unsubscribe". Thank you.