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July 1st, 2024

Contents

- [1. NPHI - Welcome New Sponsor!](#)
- [2. The best staff retention strategies: Poll](#)
- [3. Hospices' 2024 Public Policy Priorities](#)
- [4. Pediatric Palliative Care is essential to person-centered quality care for children with serious illness](#)
- [5. Evaluating palliative care impact: Insights from Tennessee Oncology's OCM participation](#)
- [6. Q&A: What is the ID clinician's role in end-of-life care?](#)
- [7. Story Rounds inspires real talk by doctors about their toughest work](#)
- [8. AMA Advocacy 2024 efforts](#)
- [9. Ascension selling spree continues](#)

10. [Senior Helpers is first in-home care company in country to achieve CHAP Age-Friendly Care Certification](#)
11. [Proven tips for recruiting top talent: Train the interviewers](#)
12. [Penn Health CEO on piecing together the healthcare hiring puzzle](#)
13. [UC San Diego receives \\$5M to support Geriatrics Workforce Enhancement Program](#)
14. [Anxiety in late life and serious illness: A podcast with Alex Gamble and Brianna Williamson](#)
15. [Today's Encouragement: ... an extra July ...](#)

Headlines

[NPHI - Welcome New Sponsor!](#)

Hospice & Palliative Care Today welcomes the [National Partnership for Healthcare and Hospice Innovation](#) as a new sponsor!

Hospice Provider News

[The best staff retention strategies: Poll](#)

Becker's Hospital Review; by Mariah Taylor; 6/24/24

Increased schedule flexibility remains one of the most effective strategies for staff retention, a recent *Becker's* poll found. The poll, posted on LinkedIn in mid-June, asked participants to vote on which of three options would have the greatest effect on staff retention at their organization. *Becker's* has no insights into respondents' organizations or roles. Of 832 votes received, 62% of respondents said increased schedule flexibility, 29% said hiring more staff, 4% said wellness initiatives and 6% said other.

Editor's Note: Pair this with "[\[Four-day workweeks:\] A flexibility trend gaining steam in nursing,](#)" also in our newsletter today.

[Hospices' 2024 Public Policy Priorities](#)

Hospice News; by Jim Parker; 6/27/24

A group of hospice leaders recently participated in Hospice Action Week, a lobbying event held last week by the National Hospice and Palliative Care Organization (NHPCO) and the Hospice Action Network. In their meetings with legislators, providers made known their policy priorities. A key goal of these discussions was to establish open lines of communication with congressional

offices to foster continued advocacy on hospice issues, according to NHPCO COO and interim CEO Ben Marcantonio. [Key issues include:]

- Battling fraud ...
- Gerald's Law [i.e.] a regulatory loophole that adversely affects veterans ...
- Rebuilding the workforce [more specifically,] action on the the Palliative Care and Hospice Education Training Act (PCHETA) ...
- Revising the Special Focus Program ...

[Click on the title's link to read more]



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Palliative Care Provider News

Pediatric Palliative Care is essential to person-centered quality care for children with serious illness

AAHPM Spring Quarterly; by Larry Beresford; 6/27/24

It has often been said that children are not little adults and should not be treated as little adults when it comes to their medical care or to the roles played in that care by palliative care and hospice teams. But what should that truism convey to members of AAHPM? How do hospice and palliative medicine (HPM) professionals ensure that children with serious, incurable, or life-threatening illnesses are managed with due consideration of their differences and distinct needs? What do adult palliative care professionals need to know—and contribute to ensuring that these children get the age-appropriate support they need for the duration of their illness?

Publisher's Note: Membership may be required to access this article, or perhaps waiting until it is archived.

Evaluating palliative care impact: Insights from Tennessee Oncology's OCM participation

The American Journal of Managed Care (AJMC); by Mary Caffrey and Pearl Steinzor; 6/27/24

A study finds limited changes in hospice utilization, highlighting challenges in real-world implementation. In an interview at the 2024 American Society of Clinical Oncology annual meeting, Ravi Parikh, MD, MPP, assistant professor of medicine and health policy, Perelman School of Medicine, University of Pennsylvania, discussed the outcomes of a palliative care study at Tennessee Oncology, providing insights into the challenges and limitations of evaluating hospice utilization and quality-of-life improvements in the real-world setting.

Clinical News

Q&A: What is the ID clinician's role in end-of-life care?

Healio; by Caitlyn Stulpin; 6/27/24

Patients receiving infectious diseases (ID) consultation over the past decade were increasingly complex, generally sicker and more likely to die soon after a consultation was performed, according to a study. Researchers said that the rate of infectious diseases (ID) consultation relative to hospital admissions doubled during that time, suggesting that ID physicians are more often being faced with the challenge of caring for complex patients. Because of this, Alison G.C. Smith, MD, MSC, and Jason E. Stout, MD, MHS, and colleagues aimed to assess the role of these physicians when it came to end-of-life care, leading them to conduct a retrospective cohort study of all patients with an ID consult at the Duke University Health System between Jan. 1, 2014, and Dec. 31, 2023.

Key takeaways:

- Within the Duke University Health System, the number of ID consults increased by 94% over the last decade.
- Researchers said ID physicians are now providing care for more complex and sicker patients.

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Story Rounds inspires real talk by doctors about their toughest work

Stanford Medicine - SCOPE Beyond the Headlines; by Mark Conley; 6/27/24

Jay Shah, MD, took a deep breath as he stood on the Berg Hall stage and looked out across the crowd. It was made up of 150 of his Stanford Medicine peers, some of them longtime mentors and collaborators. ... Shah had been chosen to lead off the latest rendition of [Story Rounds](#), the [WellMD and WellPhD](#) and the Medical Humanities and Arts Program (MedMuse) co-sponsored live storytelling program -- a safe place for MDs, clinical students and residents to share with their colleagues. ... Shah's tale was an impassioned 13-minute story of metamorphosis: Of going from a doctor determined to trudge forward without self-reflection, watching it destroy his marriage and spiral his mental health, to one who recognized the harm in not processing the difficult situations and emotions that come with the job -- such as the pain, guilt and loneliness of losing a patient and feeling like it was all his fault. His was the first of five stories that evening, delivered in a personal storytelling format inspired by Public Radio Exchange's podcast The Moth. It encapsulated a growing movement toward doctors talking openly about burnout, stress and mental health -- and trying to support one another, whether they're a wide-eyed first-year resident or a veteran health care leader like Shah.

Editor's Notes: Physician burnout is common cause for the rise in physician resignations, unionizations, and strikes. Today's EMR technology has eliminated much of the humanizing that hospice and palliative physicians and other interdisciplinary team members experienced in regular, collaborative team meetings, through years past. How can new needs for productivity (empowered by crucial technology for

timely, shared documentation) be paired with the deeply human needs of debriefing, support, reflection, and resilience through one's professional community? And, how do you ensure the patient/family's privacy in such storytelling? Ask your physicians (and nurse practitioners) what they experience, need, and can be done to support them better.

AMA Advocacy 2024 efforts

American Medical Association; by AMA; Updated June 2024, 6/27/24

There are far too many everyday practice challenges interfering with patient care. That's why the American Medical Association is advocating to keep physicians at the head of the health care team, reform the Medicare physician payment system, relieve the burdens of overused prior authorizations and so much more. [Key advocacy efforts include:]

- Fixing prior authorization ...
- Reducing physician burnout ...
- Reforming Medicare payment ...
- Advocating for solutions to cybersecurity issues ...
- Promoting physician-led care ...
- Making technology work for physicians ...
- Pursuing solutions to the physician workforce crisis ...
- Fighting government interference in evidence-based medicine ...
- Improving public health ...
- Addressing insurer issues ...
- Reducing overdose and improving care for patients with pain ...
- Improving maternal health outcomes ...

Mergers & Acquisition News

Ascension selling spree continues

Becker's Hospital CFO Report; by Alan Condon; updated 6/25/24

St. Louis-based Ascension continues to improve its operating performance and aims to ensure long-term sustainability for the health system on the back of a \$3 billion operating [loss](#) in fiscal year 2023. ... Part of Ascension's turnaround strategy has also revolved around strategic transactions that reorganized its portfolio. The 139-hospital system has offloaded several key assets and hospitals

in the last three years, with more deals in the pipeline. Nine transactions to know: [Click on the title's link for details.]



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Post-Acute Care News

Senior Helpers is first in-home care company in country to achieve CHAP Age-Friendly Care Certification

PR Newswire, Towson, MD; by Senior Helpers; 6/27/24

Senior Helpers ... is the first in-home care provider in the United States to be Age-Friendly Care at Home certified by Community Health Accreditation Partner (CHAP). "We have always set the highest standard of care for ourselves and our clients, and we are thrilled to be recognized for that," said Mari Baxter, COO of Senior Helpers. "Our proprietary LIFE Profile assessment tool sets us apart from others in the industry and helped position us to be the first in the country to achieve the Age-Friendly Care Certification. ... The three Senior Helpers locations that have earned the coveted Age-Friendly Care Certification for home care are Senior Helpers of Milwaukee, Senior Helpers of Charlotte, and Senior Helpers of Greater Chicagoland. More locations are expected to receive their certifications soon.

*Editor's Note: [Community Health Accreditation Partner \(CHAP\)](#) is a sponsor for *Hospice & Palliative Care Today*. [Click here for their new Age-Friendly Care Certification.](#)*

Education

Proven tips for recruiting top talent: Train the interviewers

TCN Talks; by Tina Houser; 6/26/24

We train for many events in life, like spelling bees and marathons. We also need to train the person interviewing candidates. Our interviewers are critical in selecting the right candidates who contribute to the company's success and overall culture. Interviewers need training and essential resources to conduct

effective and fair interviews in order to choose the best overall talent. ... There are five key elements to training interviewers. They range from simple to more complex but they are all equally important.

1. Job Requirements ...
2. Interview Techniques ...
3. Effective Communication ...
4. Bias Awareness ...
5. Legal and Ethical Considerations ...

To continue reading, click on the title's link. This is the second part of a three-part blog series. For the first post, [click here](#).

[Penn Health CEO on piecing together the healthcare hiring puzzle](#)


Becker's Hospital Review - Leadership & Management; by Madeline Ashley; 6/17/24

... Penn Medicine has introduced programs to students and young people that will not only inspire them to join the healthcare industry, but prepare and train them for the opportunities that lie ahead. "I think the world needs mission oriented people," Kevin Mahoney [CEO of Philadelphia-based University of Pennsylvania Health System] told *Becker's*. "Yo u've got to believe in where you're working, otherwise you're just punching the clock." In late May, the health system partnered with [Heights Philadelphia](#), an organization that connects middle schoolers and up with career and college opportunities, and Philadelphia City Council majority leader Katherine Richardson to hold a career event. ... "By introducing students to the field, we're creating a pathway to careers that enrich lives and make a difference in others. Encouraging careers in health care also helps to strengthen the field overall, ensuring a pipeline poised to answer the needs of the future." [*Click on the title's link to read more of this innovative solution, and other student-oriented programs.*]



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UC San Diego receives \$5M to support Geriatrics Workforce Enhancement Program

UC San Diego Today; by Miles Martin; 6/25/24

The University of California San Diego has been selected for the third time to participate in the Geriatrics Workforce Enhancement Program (GWEP). This highly selective program comes with a \$5 million grant from the Health Resources and Services Administration (HRSA). These funds will be used over the next five years to support the San Diego Imperial Geriatric Education Center (SDIGEC), which provides geriatric educational programming to health workers and other care providers across both San Diego and Imperial counties. SDIGEC is an ongoing collaboration between UC San Diego and San Diego State University (SDSU) that works to address the critical need for more aging-friendly communities and health systems. ... The grant will also support new programming to reach underserved communities and provide training for a wider variety of health workers and caregivers, emphasizing the needs of those living with Alzheimer's disease and related dementias.

Non-print News

Anxiety in late life and serious illness: A podcast with Alex Gamble and Brianna Williamson

GeriPal [podcast]; by Eric Widera, Alex Smith, Alex Gamble, Brianna Williamson; 6/27/24

"Anxiety is a lot like a toddler. It never stops talking, tells you you're wrong about everything, and wakes you up at 3 a.m." I'm not sure who wrote this quote, but it feels right to me. We've all had anxiety, and probably all recognize that anxiety can be a force of action or growth but can also spiral to quickly take over our lives and our sleep. How, though, do we navigate anxiety and help our patients who may end up in the anxiety spiral that becomes so hard to get out of? On today's podcast, we've invited Alex Gamble and Brianna Williamson to talk to us about anxiety. Alex is a triple-boarded (palliative care, internal medicine, and psychiatry) assistant professor of medicine at Stanford. Brianna is one of UCSF's palliative care fellows who just completed her psychiatry residency.

Today's Encouragement

If I had my way, I'd remove January from the calendar altogether and have an extra July instead. - Roald Dahl



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