

Cordt Kassner

From: Hospice & Palliative Care Today Newsletter
<subscriptions@hospicepalliativecaretoday.com>
Sent: Saturday, July 27, 2024 4:00 AM
To: Cordt Kassner
Subject: Your Hospice & Palliative Care Today Newsletter for 07/27/24

OUR SPONSORS

[Teleios Consulting Group](#)

[CHAP](#)

[NPHI](#)

[LMHPCO](#)

[Composing Life Out of Loss](#)

[Hospice Analytics](#)



**HOSPICE &
PALLIATIVE CARE
TODAY**

July 27th, 2024

Saturday newsletters focus on headlines and research - enjoy!

Contents

Research News

- [1. Further psychometric evaluation of the eight-item Hospice Philosophy Scale: Results from a national sample of interdisciplinary hospice clinicians](#)
- [2. Longitudinal analysis of cancer family caregiver perception of sleep difficulty during home hospice](#)
- [3. Omega - Journal of Death and Dying - June 2024](#)
- [4. Medicare-Covered Services Near the End of Life in Medicare Advantage vs Traditional Medicare](#)
- [5. Palliative Medicine - June 2024 Issue](#)
- [6. The home-based experiences of palliative and hospice care for children and](#)

caregivers (EXPERIENCE) Measure: evaluation of psychometric properties

7. Psychiatric manifestations of neurological diseases: a narrative review

8. The Uniform Determination of Death Act is not changing. Will physicians continue to misdiagnose brain death?

International News

9. Fulfilling last wishes: improving the compassionate discharge process

Today's Encouragement

10. Today's Encouragement

Research News

Further psychometric evaluation of the eight-item Hospice Philosophy Scale: Results from a national sample of interdisciplinary hospice clinicians

Journal of Applied Gerontology; by Todd D Becker, Sarah E Clem, Paul Sacco, John G Cagle, Joan K Davitt, Nancy Kusmaul; 7/20/24 online ahead of print

This study examined the psychometric properties of the eight-item Hospice Philosophy Scale (HPS-8) through confirmatory factor analysis; differential item functioning by age, gender, race, and professional discipline; and internal consistency reliability. ... Our results support the HPS-8 as a valid and reliable measure of attitudes toward the hospice philosophy of care in hospice clinicians.

Longitudinal analysis of cancer family caregiver perception of sleep difficulty during home hospice

American Journal of Hospice & Palliative Care; William Hull, Gary Donaldson, Kristin G Cloyes, Lee Ellington, Kathryn Lee, Kathleen Mooney; 7/22/24

Our findings indicate that family caregivers who cohabit exhibit increased perception of sleep difficulty over the course of hospice. Future studies and interventions for hospice family caregivers' sleep should consider cohabitation between the patient and the caregiver as a significant predictor of sleep difficulty to observe and potentially mediate the negative outcomes associated with caregiver sleep difficulty. Further, determining the underlying reasons for sleep difficulty in cohabitation (e.g., patient symptoms or treatments) should be explored.

Editor's Note: What evening, weekend, and holiday support do you provide for your hospice patients' family caregivers? To what extent can they trust your organization to be responsive to the patients' needs during non-business hours? Does your

interdisciplinary team assess this stress, provide supportive family education, and suggest appropriate interventions?

Omega - Journal of Death and Dying - June 2024

Sage Journals - Omega - Journal of Death and Dying; June 2024 issue

Omega - Journal of Death and Dying, a peer-reviewed journal that says it brings insight into terminal illness, the process of dying, bereavement, mourning, funeral customs and suicide, published research articles on the following topics in its June 2024 edition (Vol. 89, Issue 2). [A few sample topics include the following:]

- Impact of the COVID-19 Pandemic on Funerals
- Do Work-Related Factors Moderate the Association Between Subjective Nearness-to-Death and Psychological Distress?
- Patients Receiving Palliative Care and Their Experiences of Encounters With Healthcare Professionals
- Humor: A Grief Trigger and Also a Way to Manage or Live With Your Grief
- Awareness, Acceptance, Avoidance: Home Care Aides' Approaches to Death and End-of-Life Care
- "I don't Want to Die Alone" Nurses' Perception of Ageism: A Qualitative Study
- More ...



Accelerate Results
Accelerate Growth
Accelerate Learning

Sponsor of Hospice & Palliative Care Today

Medicare-Covered Services Near the End of Life in Medicare Advantage vs Traditional Medicare

JAMA Health Forum; by Lauren Hersch Nicholas, Stacy M Fischer, Alicia I Arbaje, Marcelo Coca Perrillon, Christine D Jones, Daniel Polsky; 7/24

Financial incentives in Medicare Advantage (MA), the managed care alternative to traditional Medicare (TM), were designed to reduce overutilization. For patients near the end of life (EOL), MA incentives may reduce potentially burdensome

care and encourage hospice but could also restrict access to costly but necessary services. MA enrollment was associated with lower rates of potentially burdensome and facility-based care near the EOL. Greater use of home-based care may improve quality of care but may also leave patients without adequate assistance after hospitalization.

Palliative Medicine [Journal] - June 2024 Issue

Sage Journals - Palliative Medicine; June 2024 issue

Palliative Medicine is a highly ranked, peer reviewed scholarly journal dedicated to improving knowledge and clinical practice in the palliative care of patients with far advanced disease. It reflects the multidisciplinary approach that is the hallmark of effective palliative care. [A few sample topics include:]

- Research methods in palliative care
- Creating more comparable cohorts in observational palliative care studies
- The effectiveness of out-of-hours palliative care telephone advice lines
- Cognitive testing of the Children's Palliative Outcome Scale (C-POS)
- What are we planning, exactly? The perspectives of people with intellectual disabilities, their carers and professionals on end-of-life care planning
- More ...

The home-based experiences of palliative and hospice care for children and caregivers (EXPERIENCE) Measure: evaluation of psychometric properties

Journal of Pain and Symptom Management; by Jackelyn Y Boyden, Mary Ersek, Kimberley A Widger, Judy A Shea, Chris Feudtner; 6/24

Home-based pediatric palliative and hospice care (PPHC) supports the hundreds of thousands of children with serious illness and complex care needs and their families in the home setting. The EXPERIENCE Measure is a tool with evidence for reliable and valid scores to evaluate family-reported home-based PPHC experiences at the time care is being received.

NEW Workshop

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



Healthcare Leadership Certification Workshop

San Diego, CA | October 8-9

Sponsor of Hospice & Palliative Care Today

Psychiatric manifestations of neurological diseases: a narrative review

Cureus Journal of Medical Science; Anthony J. Maristany, Brianna C. Sa, Cameron Murray, Ashwin B. Subramaniam, Sean E. Oldak; 7/24

Neurological diseases like Alzheimer's, FTD [frontotemporal dementia], Parkinson's, MS [multiple sclerosis], stroke, epilepsy, Huntington's, ALS [amyotrophic lateral sclerosis], TBI [traumatic brain injury], and MSA [multiple system atrophy] are not only characterized by neurological symptoms but also by various psychiatric manifestations, complicating diagnosis and treatment. For instance, Alzheimer's induces cognitive decline and emotional distress, Parkinson's leads to motor impairments and mood disorders, and MS intertwines physical symptoms with emotional disturbances. Understanding these complex relationships is crucial for comprehensive care. Collaboration, innovation, and ethical commitment are essential for improving outcomes.

The Uniform Determination of Death Act is not changing. Will physicians continue to misdiagnose brain death?

The American Journal of Bioethics; Michael Nair-Collins; 7/24

Efforts to revise the Uniform Determination of Death Act [UDDA] in order to align law with medical practice have failed. It has long been common practice to declare some patients dead by neurologic criteria even though they do not meet the legal standard for death. Thus, legally living people will continue to be declared dead, not because of a mistake, but because of a choice. The decision to continue misdiagnosing death according to the law will create routine violations of civil rights, will continue to violate the DDR [dead donor rule] that

allegedly is such an important red line for organ transplantation, and will contribute to a well-deserved mistrust in the determination of death.

International News

Fulfilling last wishes: improving the compassionate discharge process

[Singapore] British Medical Journal Open Quality; by Rasidah Alias, Yi Ling Neo, Liyun Wang, Long Zhen Sie, Hwee Jin Goh, Mohamed Yazid Mohamed Hussein , Hasnah Abdullah, Yoke Ping Wong; 7/24

Compassionate discharges (ComD), commonly known as rapid discharges, are urgent one-way discharges for critically ill hospitalised patients with death expected within hours or less than 7 days, to die at their place of choice-usually in their own home. Challenges abound in this time-sensitive setting when multiple parties must work together to prepare medically unstable patients for discharge, yet healthcare staff are largely unaware of the process, resulting in delays. Three Plan-Do-Study-Act (PDSA) cycles were used to refine a ComD resource package that was developed ... in order ... to support nurses, doctors and families during this difficult and emotional transition. The 12-month ComD success rate ... demonstrated ... a consistent reduction in the level of family anxiety before and after caregiver training and resources.



Sponsor of Hospice & Palliative Care Today

Today's Encouragement

Do Good – Recklessly!



**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



Composing Life

Caregiver and family education

Online video libraries 24/7

... through Serious Illness, Hospice, and Grief Care

Sponsor of Hospice & Palliative Care Today



**HOSPICE
ANALYTICS**

TURNING DATA INTO INFORMATION – TO IMPROVE PATIENT CARE

Sponsor of Hospice & Palliative Care Today

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.