

**Conference: Wednesday, November 7**

**Registration & Continental Breakfast 8:00 am – 8:45 am**

**Welcome 8:45 am – 9:00 am**

**Deborah Dolaway, President, HPCFM Board of Directors**

**Keynote Address 9:00 am – 10:00 am**

### **The Future of Healthcare**

**Michael Burcham, MBA, DHA, CEO, Narus Health, Nashville, TN.**

The healthcare system of our country is poised for significant change; its future will be built around the consumer and their experience, not a payer nor a provider. New models will fundamentally alter how healthcare organizations interact with patients and one another to deliver care, share information and manage costs.

Innovative companies are creating new opportunities designed to disrupt and invade the healthcare venture space; they are nibbling at the edges of the traditional healthcare ecosystem, bringing new designs from technology, retail and hospitality business models that engage the consumer directly and leverage the workforce.

Hospice and palliative care providers cannot operate on the periphery of this new momentum, but must be part of it. According to Dr. Burcham, “At this time in healthcare, we are challenged by one of two choices: accept and entrench ourselves in the status quo or help lead the change.”

### **Session One – 10:30 am – 11:45 am**

#### **1A Prognostication in Advanced Illness: Supporting Palliative Care Choices**

**Ramya Prabhakar, MD, Medical Director, Palliative Care, and Virginia Doherty ANP-BC, GNP-BC, ACHPN, Palliative Care Nurse Practitioner, Lowell General Hospital, Lowell.**

Prognostication is more challenging earlier in a disease process, when Palliative Care can often be most beneficial, than at end of life. In order to identify tools for earlier integration of Palliative Care, Dr. Prabhakar and Ms. Doherty will discuss the natural course of specific disease trajectories as well as various disease specific events that can help detect changes in patient’s prognosis. The presenters will demonstrate how to correlate events with various disease status assessment tools and use various performance indices to help determine a prognosis.

#### **1B HPCFM Leadership Roundtable**

**Michael Burcham, DHA, MBA, CEO, Narus Health, Nashville, TN and Deborah Dolaway, LICSW, HPCFM Board President, Executive Director, Cranberry Hospice & Palliative Care, Plymouth.**

The healthcare system in this country is poised for significant change; its future will be built around the consumer and their experience. In this invitation only session Dr. Burcham will facilitate a lively discussion among leaders of HPCFM Member Organizations in a continuation of the keynote presentation, *The Future of Healthcare*. Hospice & Palliative Care providers must be part of the momentum in health care change.

### **1C Choosing the Hospice Diagnosis and Determining What is Related**

**Edward Martin, MD, MPH**, Chief Medical Officer, Hope Health, Inc., Providence, RI.

Hospice regulations continue to change, evolve and present challenges around selecting the appropriate end-of-life diagnosis. Dr. Martin will highlight the importance of terminal diagnosis and terminal prognosis and present the process for determining the appropriate terminal diagnosis.

### **1D Strategies for Medication Management in Hospice**

**Lily Travis, Pharm D**; Assistant Director of Pharmacy Operations, Apothecare Pharmacy, Brockton.

Managing medications during the transition to hospice care often presents challenges. Dr. Travis will describe the benefits of medication management and provide strategies to assist in the transition to hospice. The presenter will discuss the risk benefit ratio, present strategies and their application for effective medication management at end of life.

### **1E Planning, Strategizing and Preparing for a Medicare Audit: Targeted Probe and Educate**

**Corrinne Ball, RN, CPC, CAC, CACO**, Provider Outreach and Education Consultant, National Government Services, Silsbee, TX.

Planning, strategizing and preparing for a Medicare audit provides detailed information about the targeted probe and educate (TPE) process followed by the Medicare Administrative Contractors. This workshop will focus on the TPE process and how to prepare documents and respond to an additional development request.

### **1F Family-led Care and Ceremonies for After Death**

**Heather Massey, LMT, MSW**, Natural Deathcare Educator and Consultant, Natural Deathcare Collaborative, West Falmouth and **Jasmine Tanguay, BA**, Sustainable Legacy Facilitator, A Sustainable Legacy, Stoughton.

Many of the benefits offered by at-home Hospice care leading up to death can also be found in at-home care after death. Ms. Massey and Ms. Tanguay will discuss the benefits of at-home care after death, such as deeper family involvement in a quieter, slower, and more intimate setting. In addition, the presenters will provide an overview of families' rights and options to care for and honor loved ones

including preparation/preservation of the body, home wakes/visitations, and ceremonies or rituals to honor the deceased.

### **1G Irrevocable Trusts - A Helpful Tool to Protect Assets or Not?**

**Stephen Spano, Esq., MBA, JD**, Partner, Board Certified Elder Law Attorney and **Andrea Witt, Esq, JD**, Partner, Attorney at Law, Spano & Dawicki, LLC, Saugus.

Irrevocable Trusts are liberally used to protect assets from the nursing home for the younger generation, without full understanding of the consequences to the elders who create them. Attorneys Spano and Witt will explain why, contrary to popular belief, this estate planning document is not right for everyone, as years later, elders may find themselves unable to access trust assets. The presenters will list and describe other methods and legal tools that can accomplish an elder's goals of protecting assets, while maintaining control over the assets they often need.

### **1H After the Support Group: Fostering Creativity in Grief Programming**

**Aubrie Hills, LICSW, ACHP-SW, FT**, Social Worker and Bereavement Coordinator, Hospice of the South Shore, Rockland.

Community grief programs are often more effective when approached creatively. Ms. Hills will review bereavement programs and discuss how strategic thinking impacts the success of such programming. The presenter will also describe advertising and evaluation of creative community grief programs.

## **Session Two – 1:00 pm to 2:15 pm**

### **2A Guiding Patients and Families with Substance Misuse through End of Life**

**Zachary Sager, MD, Board Certified in Psychiatry**, MD, Division of Geriatrics and Palliative Care, VA Boston, Advanced Research Fellow in the New England Geriatric Research Education Clinical Center (GRECC), **Kate Faulkner, MD**, Medical Director, and **Sianna Lieb, LICSW**, Social Work Team Leader, Clinical Social Work Mentor, Good Shepherd Community Care, Newton.

Substance misuse impacts patients and families at end of life. Doctors Sager and Faulkner and Ms. Lieb will present a review of literature and real-life examples to illustrate successful transitions to hospice care at home. Family systems theory will feature in the presenters' description of screening techniques and language that builds trust and helps families set boundaries all while balancing the mission of hospice and addressing total pain at end of life.

### **2B Hospice at a Major Crossroad Again**

**Andrew M. Mihalyo, CAHA, MBA**, Certified Advanced Hospice Administrator, MBA Solutions, LLC/Delta Care Rx, Steubenville, OH.

As the scrutiny of hospice care remains substantial, keeping apprised of industry challenges, including the need for extensive risk management in many areas is critical. Mr. Mihalyo will detail areas that are

at the forefront of managing organizational risk as well as provide recommendations to help position hospice organizations for the future of hospice.

## **2C Polypharmacy and De-prescribing in Hospice Patients**

**Elisabeth Allen, RPh, BS**, Consultant Pharmacist, Sunflower RX Consulting, Westborough.

De-prescribing medication aligns with the goals of care and helps reduce the pill burden to the hospice patient. Ms. Allen will define polypharmacy, its benefits and the difference between pharmacokinetics and pharmacodynamics in an aging body. The presenter will also discuss what, when and how to de-prescribe, and how to have the conversation with the patients and caregivers.

## **2D When Your Patients Ask About the Use of Medical Cannabis**

**Janet Travers, CHPN, BSN, RN**, RN Case Manager, Hospice of the South Shore, Rockland and **Ellen Kasper, BSN, RN**, Staff RN, Alternative Compassionate Services, Bridgewater.

Palliative care patients and their families often ask about the use of medical cannabis for pain and symptom relief during the course of illness progression. This workshop will provide an overview of medical cannabis: how to obtain it, which types manage which symptoms, methods of administration and how to document its effectiveness. Ms. Travers and Ms. Kasper will use real-life case examples to illustrate successful pain management using medical cannabis.

## **2E Aromacare- Best Practice for You and Your Patients**

**Karyn Cooney, GCNS, RN, MS (APRN)**, Hospice Consultant, Lakeview Consultancy, West Wareham.

The safe use of aromacare at end of life may improve symptom management for hospice and palliative care patients. Ms. Cooney will provide an overview of essential oils including benefits, methods of use, safety and purity. The speaker will describe how the incorporation of essential oils in daily life may promote improved health and wellness.

## **2F Current Trends in Elder Law**

**Andrea Witt, Esq., JD**, Attorney at Law and **Stephen Spano, Esq., MBA, JD**, Board Certified Elder Law Attorney, Spano & Dawicki, LLC., Saugus.

The issues facing seniors and their families in 2018 differ greatly from previous generations. Attorneys Witt and Spano will describe the impact of blended families, late-in-life divorces, adult children moving back in and the Opioid Crisis on elders. The speakers will also address the legal implications and how elder law attorneys are assisting seniors to face these matters.

## **2G Suicidal ideation in the Home Hospice Patient: What Are We Missing?**

**Jennifer Sheng, LCSW, MSW**, Social Worker, Care Dimensions, Waltham.

Healthcare providers often apply the same approach to hospice patients as to the general population when it comes to suicide risk assessment. Emerging literature suggests that there is a different set of risk factors for these patients. Ms. Sheng will explain the importance of the healthcare provider to recognize this unique set of risk factors for home hospice patients at risk for suicide and develop an interdisciplinary plan of care to address their safety needs.

## **2H Always Within You: The Comfort of Spirituality for those Living with Dementia**

**Rev. Donna Vuilleumier, M.Div**, Spiritual and Bereavement Coordinator, Kindred Hospice, Marlboro.

Despite cognitive changes, spirituality and religious practices may remain a source of comfort and familiarity to those living with dementia. Rev. Vuilleumier will explain the importance of knowing a person's life story, his or her joys, challenges and faith practices to create opportunities for adaptations and connections through the disease and dying process. The presenter will describe how this knowledge may provide comfort for those patients and families and share techniques to kindle spiritual memories.

## **Session Three – 2:30 pm – 3:45 pm**

### **3A Palliative Sedation in the Hospice Setting**

**Robert M Taylor, MD**, Associate Medical Director, **Johnson Wu, DO, MBEc**, Physician, and **Alifia Banglawal, PharmD**, Director of Pharmacy Services, Care Dimensions, Waltham.

Palliative Sedation (PS) uses medication to induce decreased or absent awareness to relieve otherwise intractable suffering at end of life. Dr. Taylor, Dr. Wu and Dr. Banglawal will present the differences among the ethical justification of palliative sedation, with physician assisted dying (PAD) and voluntary active euthanasia (VAE). Using real-life cases, the speakers will explain how to discuss the options with patients and families, the consent process, and advantages and disadvantages of various medication options.

### **3B Customer Service and Value based Purchasing, “When Good isn’t Good Enough”.**

**Heidi McCaffery, LSW, CHPCA, BS**, Vice President of Hospice and **Robert Abel, MSN, CHPN**, Chief Nursing Officer & Director of Palliative Care, Maine Health Care at Home, Saco, ME.

To be successful in the competitive hospice marketplace, it’s imperative to focus on patient experience which drives quality scores. Ms. McCaffery and Mr. Abel will present strategies to improve patient experience by defining value based purchasing (VBP), its evolution and its impact on reimbursement.

### **3C Palliative Care and Hospice Care at End of Life in the Department of Developmental Services (DDS) Setting**

**Sherrill Hayter, RN,CDDN**, RN, Department of Developmental Services, Wakefield and **Sarah Peterson, Esq, JD.**, Deputy General Counsel of Field Operations, Department of Developmental Services, Boston.

The *Intellectual and Developmental Disabilities* (I/DD) individual has the same right to quality end-of-life care as anyone. It can be difficult at times for health care providers, families, and staff to maneuver around various obstacles to provide care and comfort for these individuals. Ms. Hayter and Attorney Peterson will identify these hurdles including guardianship, the scope for decisions that surround end of life and comfort measures, how to create a smooth transition when an individual 'graduates' from hospice, and determining if hospice or palliative care is appropriate.

### **3D Documentation: Essentials for Best Practice, Quality, Risk and Payment.**

**Jean Ball, PT, M. Ed., CPHQ**, - Vice President, Quality and Compliance, Care Dimensions, Danvers.

Documentation is often seen as a mandated regulation, an added burden at the end of a day spent caring for patients and frequently treated as an afterthought. Ms. Ball will explain the impact of this mindset on best practice, quality of the care, and its connection to reimbursement. The presenter will highlight the difference between teaching clinicians *how* to enter documentation into the system versus what *and why* it's important to document, to insure that all areas are covered and that all I's are dotted and T's are crossed.

### **3E Clinical Management and Interventions in Amyotrophic Lateral Sclerosis (ALS) Disease**

**Elizabeth Bowers, ANP-BC, ACHPN**, Hospice and Palliative Care Nurse Practitioner and **Caitlin Keene, MS-CCC-SLP**, Speech and Language Pathologist, VA Boston Healthcare System, West Roxbury.

Amyotrophic Lateral Sclerosis (ALS) is a progressive disease characterized by upper and lower motor neuron signs and symptoms. Ms. Bowers and Ms. Keene will present a multidisciplinary approach to care to assist with earlier interventions, treatments, goals of care discussions and to support patients in their quest to maintain independence, quality of life and symptom management.

### **3F Serving on Team Rainbow: Preparing to Provide Outstanding Care to Lesbian, Gay, Bi-Sexual and Transgender (LGBT) Patients**

**Lisa Kynvi, MA, MT-BC, LMHC**, Creative Arts Therapy Coordinator, Board Certified Music Therapist, Care Dimensions, Danvers.

Team Rainbow is truly inclusive of LGBT patients and families. Ms. Kynvi will present basic concepts behind specific issues and situations that may rise when providing hospice services for LGBT patients and their families, including measures to creating a safer, more respectful environment at end of life.

### **3G Posttraumatic Stress Disorder at End of Life: Special Emphasis on Working with a Veteran Population**

**Kristen Dillon, PsyD**, Psychologist in Hospice and Palliative Care, **Betsy Gallant, HPCNP**, Palliative Care Nurse Practitioner and **Karen Budnick LICSW-ACHP, MSW**, Hospice Social Worker, Edith Nourse Memorial Veterans Hospital , Bedford.

Posttraumatic Stress Disorder (PTSD) poses additional challenges in end-of-life caregiving for the veteran population and their families. Dr. Dillon, Ms. Gallant and Ms. Budnick will explain PTSD, its impact on Veterans and families and biopsychosocial-spiritual model interventions. While the presenters will focus on veterans, the information presented is applicable to non-Veteran populations.

### **3H In To Me See**

**Susan Holtzman, LCSW, MBA, MSW**. Social Worker, Seasons Hospice and Palliative Care , Norwood.

The number of baby boomers is on the rise and therefore the increase in diseases like dementia. The loss of memory and the ability to communicate intensifies the need for innovative ways to connect with patients. Ms. Holtzman will present tools and techniques that can assist clinicians in effective communication with patients who have dementia noting the elements of joy and surprise.