

THE HEART AND SCIENCE OF HOSPICE

Midwest Regional Conference Kansas City, MO 2023



OBJECTIVES

- Identify communication techniques to foster trust and create relationships with patients and caregivers
- Implement practices to facilitate effective family conferences
- Demonstrate effective skills to guide patients and caregivers through the dying process and death.
- Describe the impact of communication and connection on CAHPS satisfaction surveys.



How do we describe Death?

- Medical event
- Biological event
- Spiritual event
- Psychosocial event
- Relational event
- Community event
- A shared human experience

Who are we inside Death work?

PROFESSIONALS

- Clinicians
- Collaborators
- Last resort of the healthcare system
- Saints
- "Angels of death"

Who are we inside Death work?

PEOPLE

- Witnesses
- Grievers
- Givers of self
- Boundary setters
- Empathizers
- Companions
- Partners

What influences our work?

- Industry administrative burden
- Public perception of what we do
- Feeling insignificant
- Questioning our value
- Remembering our "why"
- Creating meaning
- Coping with grief

ADVANCE CARE PLANNING

It's the conversations that give us confidence to make decisions on a loved one's behalf.

The conversations are what we remember.

- Lisa Pahl, hospice social worker, co-creator of the EOL Deck

STATS_

- While 92% of Americans say it's important to discuss their wishes for end-of-life care, only 32% have had such a conversation.
- 95% of Americans say they would be willing to talk about their wishes
- 53% even say they'd be relieved to discuss it

(The Conversation Project National Survey, 2018)

THINGS TO CONSIDER_

- Consumer culture, education, fear, money
- Service provider training, time, documentation
- System legal and EMR/EHR standardization

```
Legal requirements
                           Education
       Communication styles
                            Healthcare literacy
            MPOA/proxy
                            Cognitive ability
  Family members
                  Capacity
                               Religious/faith beliefs
                     Burnout
Time
          Training
  Staffing
                   Race
                           Family dynamics/discord
  Step relationships
                             Disease progression
                   Diversity
     Moral distress
                               Compassion fatigue
          Culture
                       Grief
                                 Incarceration
        EMR systems
                       Polyamorous relationships
         Substance Use Disorder
                           Distrust of healthcare
             Solo agers
                                  system
              Common law spouses
                  Religious trauma
                         Finances
                 Healthcare trauma
                            Bias
                       Fear
```

That's just the tip of the iceberg...

QUESTIONS TO ASK_

- What barriers to ACP discussions have you encountered?
- What tools have made you most successful?
- Have you completed your own ACP?

FAMILY CONFERENCES

A dysfunctional family is any family with more than one person in it.

- Mary Karr, author and poet

STATS_

BENEFITS OF FAMILY CONFERENCES

- Reduce caregiver distress
- Mitigate the perception of unmet needs
- Prepare family for caregiving
- Improvement bereavement outcomes
- Reinforce alliance with families
- Promote consensus
- •Provide opportunity to show empathy and see the family's perspective

(Current Treatments in Oncology, 2022)

THINGS TO CONSIDER

- Culture
- Religion(s)
- Education levels
- Healthcare literacy
- Healthcare trauma
- Relational histories
- Current family dynamics
- Time

QUESTIONS TO ASK_

- What disciplines on the team are needed to support this patient/family?
- What are they communicating without words?
- What are we communicating without words?

COMMUNICATION

connection is the result of authenticity.

- Brene Brown, author, researcher, storyteller

STATS_

18 of 47 questions on the CAHPS surveys are related to COMMUNICATION

38%

STATS_

CAHPS surveys are related to COMMUNICATION

- Informing
- Explaining
- Listening
- Discussing

- Coordinating
- Reporting
- Training
- Supporting

THINGS TO CONSIDER_

- How we talk with patients
- How we talk with caregivers
- How we talk about patients/caregivers

THINGS TO CONSIDER

Communication should be:

- Timely
- Detailed
- Respectful
- Accurate

- Repeated
- Accessible
- Appropriate
- Documented!!

QUESTIONS TO ASK_

- What do our IDT discussions reflect?
- Are we listening to reflect or respond?

Listening is the most respectful part of communication.

THE GOOD DEATH

A good death does honour to a whole life.

- Petrarch, Italian scholar, Renaissance poet

STATS_

Research shows that:

80% of Americans wish to die at home

Less than 25% do

75% of hospice patients die at home

(National Hospice Foundation)

THINGS TO CONSIDER

Definition of a "good death"

- Provider version
- Patient version
- Caregiver version

QUESTIONS TO ASK_

- How can we respond?
- How can we show respect?
- What can we say?
 - You're in charge.
 - The decision is up to you.
 - I'm here to support you.
 - It's your choice.

FINDING BALANCE IN HOSPICE WORK

- Companioning vs compliance
- Patients vs policy
- Touch vs technology
- Mission vs monetizing
- People vs profits
- Presence vs productivity

RESOURCES

- •CAHPS Hospice Survey hospicecahpssurvey.org
- National Hospice Foundation <u>nationalhospicefoundation.org</u>
- •The Conversation Project National Survey Findings 2018 https://theconversationproject.org/wp-content/uploads/2018/07/Final-2018-Kelton-Findings-Press-Release.pdf
- The EOL Deck thedeathdeck.com
- The Heart of Hospice podcast theheartofhospice.com

REFERENCES

•Glajchen, M., Goehring, A., Johns, H., & Portenoy, R. K. (2022). Family Meetings in Palliative Care: Benefits and Barriers. *Current treatment options in oncology*, 23(5), 658–667.

https://doi.org/10.1007/s11864-022-00957-1

•Kim H, Flieger SP. Barriers to Effective Communication about Advance Care Planning and Palliative Care: A Qualitative Study. J Hosp Palliat Care 2023;26:42-50. https://doi.org/10.14475/jhpc.2023.26.2.42

THE HEART AND SCIENCE OF HOSPICE

Hospice workers are a beautiful human blend of the heart and science of end of life care.