

## Connecticut Advisory Council on Palliative Care

### MINUTES

Friday, May 8, 2015

10-11 AM

CHA- Wallingford, CT

#### Present:

Cynthia E. Roy, Regional Hospice & Home Care; James Prota, CT Hospice; Joseph Andrews, CT Hospice; Barbara Morrison, Yale-New Haven Health; Karen Mulvihill, Danbury Hospital; Colleen Mulkerin, Hartford Hospital; Diana Cameron, VNA Community Healthcare

#### Public:

Michael Culhane, CT Catholic Conference; Mary Ann De Banate, CCMC

I. Meeting convened at 10:00 am by Chair Mulkerin

II. Topics of Discussion

#### Testimony

1. Anne Elwell, Qualidigm

- Partnering on Readmissions
- Communities of Care- whole continuum; many readmissions for palliative or end of life care
- Opportunities exist:
  - Qualidigm Leadership Academies- one was Palliative Day, one was Hospice Care
  - Angelo Velendes' videos- really help patients make good decisions
- Angelo Velendes is working with Genesis homes nationally (and will be one in CT home)
- Mark Shaeffer, SIM office, may bring all payers together to look at this work. (ACPdecisions.org)
- Book "The Conversation"
- Need payers and hospital administrators on board or won't work
- So far SIM office and Vicky Veltri, Health Care Advocate, are on board
- Next step- perhaps work with payers as the U.S. transitions from fee-for-service to value-based purchasing

2. Mag Morelli and Matt Barrett

- LTC Survey- 20% responded (53)
- Apple Rehab has palliative care at their 26 sites
- In SNF's, palliative care for dementia patients is of great interest (see survey)
- LTC- much of the care is delivered by CNA's- less education, often cultural differences and views

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- Fear that in nursing homes one's wishes won't be respected
- Growing provision of hospice services now in SNF's due to Medicaid hospice benefit being available in CT.
- The Apple staff note (per Gayle from Coccomo):
  - They're trying to formalize their palliative program
  - Want to do more with own staff and not rely so much on outside hospice agencies
- Suggestions:
  - Med review as part of assessment (do they (meds) support palliation?)
  - Burdens and benefits

### III. Recommendations of Advisory Council

- Utilize a systems approach for all settings of care
- Standardize recommendations for all CT providers

### IV. Discussion

- Karen asks SNF's if they use criteria from National Palliative Care Association (NCP)?
- Mag notes DPH support is important for SNF's:
  - Few RN's
  - Leadership is key
  - It's better if an APRN is involved
  - Meds available at all times
  - More education for staff (e.g. certificates for Palliative Care)
  - Present to all MD and Nursing leadership
- Get NCPA guidelines to Mag and Matt

### V. Miscellaneous

- Discussion of need for Advisory Council Co-Chair
- Karen Mulvihill was elected Co-Chair by unanimous vote.

### VI. Meeting adjourned at 11:00 pm by Chair Mulkerin

- July meeting will be cancelled
- September meeting has been extended to 9 am-1 pm
- Next meeting will be June 12, 2015 at CHA, Wallingford from 10 am-11 am.