

# Palliative Care and Quality of Life Interdisciplinary Advisory Council

September 26, 2014 Meeting Minutes

## Members Present:

**Linda M. Dziobek, R.N.**, Chair, Partnership to reduce Cancer in Rhode Island; **Rev. Marie Carpenter**, Director of Eldercare Ministries, American Baptist Churches of Rhode Island; Chair of the Advisory Council, **Dr. Edward V. Martin, M.D., MPH**, Medical Director, Home and Hospice Care of Rhode Island; **Dr. Angela Taber, M.D.**, Palliative Medicine Physician, Miriam Hospital and Rhode Island Hospital; **Dr. Joan M. Teno**, Professor of Health Systems, Policy and Practice, Brown University School of Public Health.

## Members Not Present/ Excused:

**Jean Anderson, R.N.**, CEO, Visiting Nurses Service of Newport and Bristol Counties; (excused)  
**Maria Barros, R.N.**, Director of Clinical Services, Nursing Placement, Inc  
**Dr. Linda DelVecchio-Gilbert**, Associate Professor, New England Institute of Technology, Nursing Department  
**Nancy Roberts, MSN, R.N.**, President and CEO, VNA of Care New England Health System

## Staffing the Advisory Council:

**Manuela Raposo**, Comprehensive Cancer Control Program, Rhode Island Department of Health

## Members of the Public Present:

**Jim Wellsey**, Roger Williams Medical Center  
**Nicholas Oliver**, MPA CAE Director, Rhode Island Partnership for Homecare

## Present from Rhode Island Department of Health (HEALTH):

**C. Kelly Smith, MSW**, Comprehensive Cancer Control Program, Rhode Island Department of Health

## Minutes:

### 1. Introductions, Roll Call and Establishment of a Quorum (Chair)

Dr. Martin welcomed and thanked the Council Members and Members of the Public. He then called roll (results above). A quorum of the Council was determined to be present.

### 2. IOM Report: Dying in America, Improving Quality and Honoring Individual Preferences Near the End of Life: Dr. Joan Teno provided a summary on the Key Findings and Recommendations

- How we are financing our healthcare system
  1. The burden of fragmented delivery of care for our patients and families is driven by how we finance our healthcare system
- Striking evidence on Social Determinants of Health
  1. How do we as a nation compare to other nations.
  2. Medical spending: The US is spending the highest amount with mediocre results
  3. Innovation lies in how resources can be blended
- Need for transparency and accountability
  1. We need to take on the issue of really measuring the quality of care

Dr Teno encouraged the council to think of what are we able to do within the committee, how we can try to think about recommendations that would help influence policy, or put us in an environment where we can potentially think about leading the nation in thinking about some of these issues.

### 3. Recommendations for Next Steps

Dr Teno recommends concentrating on collecting data on palliative care programs in the hospitals around the following:

- Disciplines available on team
- Levels of care-Do the hospitals provide GIP level of care?
- Where is the palliative care provided: in hospital/off campus
- Has team been certified by JCAHO
- Have the providers achieved additional certification
- Information on availability of providers
- Quality measures of the programs
- Outpatient clinic info

The Council then discussed what would be done with information once it is collected, how it would be disseminated. The following were discussed:

- Education/Awareness
- Website
- The Partnership to Reduce Cancer can provide information at the annual summit
- Social networking

Dr Teno offered to make phone calls and perform a brief survey to collect this data, the council agreed. Recommendation was made to invite Dr. McDonald to the next meeting to discuss with him the importance of making the case as to why HEALTH should track how many physicians are certified in palliative care in the state. Dr Martin will invite him.

#### **4. Physician and patient understanding of the need for palliative care**

The idea of making a video to increase understanding and awareness was discussed. A video could be made or identified that would be appropriate for both physician and patient. Cultural sensitivity needs to be taken into account when identifying end of life/palliative care educational materials.

#### **5. Timeline and deliverables**

- MOLST letter was delivered to Dr. Fine
- Once feedback is received from Dr. Fine, deliverables can be established

#### **6. Topics for Future Consideration at Meetings:**

- Dr. Joan Teno will report on survey
- State of the State on Palliative Care
- Dr McDonald will talk about tracking certifications on Palliative care

#### **7. Public Comments**

Jim Wellsey suggested adding the following questions to Dr Teno's data collection

- screening question
- methodology to consultation question
- Nicholas Oliver commented on a contract that the state has with neighborhood health plan, CMS and DOHHS for the CMS 1115 waiver –State Integrated Care Initiative. Neighborhood health plan has a financial investment in providing quality care via this contract.

#### **8. Future Meetings**

The Advisory Council members will meet every other month, on the last Friday of the month, from 3:30pm to 4:30pm. Next meeting dates will be rotated forward a month in order to accommodate for the holidays: Doodle will be sent out to confirm the meeting schedule.- Manuela Raposo

- November 14<sup>th</sup>
- January 30<sup>th</sup>

**Adjournment:** The meeting was adjourned at 4:38pm. (Minutes reported by Manuela Raposo)