

# EXPANDING DIMENSIONS IN HOSPICE & PALLIATIVE CARE



**Annual Fall Conference**  
**October 29-30, 2018**  
Campbell's Resort - Chelan

**HIGHLIGHTS** 4<sup>th</sup> Annual Dr. Stuart Farber Excellence in Hospice & Palliative Care Award Welcome Reception • Memorial Reflection—Honoring Hospice and Palliative Care Professionals Annual Business Meeting • Pediatric Care Track (Tuesday)

*Choose the sessions that best fit your and your program's needs from the 4 keynote & plenary speakers and 20+ concurrent sessions!*

## NEW! CME

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the National Hospice and Palliative Care Organization (NHPCO) and the Washington State Hospice and Palliative Care Organization (WSHPCO).



The NHPCO is accredited by the ACCME to provide continuing medical education for physicians. NHPCO designates this live activity for a maximum of **11.25** AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in this activity.

Sessions eligible for CME credit are highlighted in yellow.

## FEATURING MIGUEL VALENCIANO

Miguel is recognized in the United States and internationally for his extensive work in the field of cultural competency and has been a featured speaker at many local, state, national and international conferences. He has conducted approximately 2,000 training programs for more than 115,000 persons. He is a dynamic and energetic facilitator/trainer/consultant; his vision, energy, and creativity contribute to his success in leading diverse teams, facilitating and implementing strategic plans for organizations, and providing outstanding training and consultation.



Miguel has developed and facilitated modules on several content areas in the health care industry, including; cultural competency, managing inclusively, cross-cultural communications, addressing "ouches" in the workplace, strategic planning, engagement, cultural audits, micro-aggressions, teambuilding, conflict resolution, supervisory skills, change process, and inclusive leadership. He also conducts Diversity Training of Trainers programs at the national and international levels.

## LODGING

Campbell's Resort is located on the shore of Lake Chelan, within driving distance of Seattle, Spokane, Everett, Portland & BC, or fly into Wenatchee. Rooms are available at a rate of \$96-\$110 per night.

Please call Campbell's to make your hotel reservation: **800.553.8225** (refer to room block #463986). Registration fee does not include lodging. Campbell's Resort is located at 104 West Woodin Ave., Chelan, WA 98816.

## GO GREEN

*No handouts will be printed for attendees.* Please download session handouts from the WSHPCO website after 10/15/18 (<https://wshpco.org>)

## 4 SESSION TRACKS IN 2018

The Chelan conference agenda is filled with content-rich clinical sessions, regulatory compliance information, leadership topics and other topics including ethic, psychosocial and spiritual care. Back by popular demand is a pediatric track! Conference participants will have the opportunity to:

- Discuss challenges faced by palliative care and hospice programs around the state.
- Identify opportunities for innovation and share solutions.
- Strengthen collaboration and networking among palliative care and hospice professionals and programs statewide.
- Practice evidence-based, ethical, effective and efficient hospice and palliative care.
- Enhance attendees' abilities to identify internal biases, increase cultural competency and improve cross-cultural communication techniques.
- Identify, discuss and share innovative approaches for psychosocial, spiritual and bereavement care.

**CE/CEU HOURS** A maximum of **11.25** Education Contact Hours approved by California Board of Registered Nursing, Provider CEP14488. This program has been approved for a maximum of **11.25** CEUs by the Washington Chapter, National Association of Social Workers (NASW) for Licensed Social Workers, Licensed Marriage and Family Therapists and Mental Health Counselors are eligible. Provider number #1975-153.

**WHO SHOULD ATTEND?** Administrator, Executive Director Medical Director, MD, NP • RN, Nurse Manager, Patient Care Coordinator • Social Worker, LCSW, Bereavement Coordinator • Volunteer, Volunteer Coordinator • Hospice Aide Marketing, Development, Education & Quality Staff • Board Member • Chaplain, Spiritual Counselor

Please complete and return one registration per person. **You may also register and pay by credit card online at <https://wshpco.org/2018-chelan-conference/>.**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Special Needs (diet, disability): \_\_\_\_\_

Acceptable Payment Methods: Check (payable to WSHPCO) or Credit Card

Credit Card #: \_\_\_\_\_ Exp.: \_\_\_\_\_ CV Code: \_\_\_\_\_

Billing Address for Credit Card (if different from above): \_\_\_\_\_

Signature: \_\_\_\_\_

**FEES**

<input type="checkbox"/> <b>WSHPCO/OHPCA MEMBERS</b>	<u>Before 10/5</u>	<u>After 10/5</u>
<input type="checkbox"/> 1 individual - One Day (please circle Monday or Tuesday)	\$200	\$250
<input type="checkbox"/> 1 individual - Two Days	\$395	\$445
<hr/>		
<input type="checkbox"/> <b>FACULTY/PRIMARY PRESENTER "Single Presentation"</b> Primary presenters receive a 25% discount on registration. All presenters may attend a single session free of charge.		
<input type="checkbox"/> 1 individual - One Day (please circle Monday or Tuesday)		\$187.50
<input type="checkbox"/> 1 individual - Two Days		\$333.75
<hr/>		
<input type="checkbox"/> <b>FACULTY/PRIMARY PRESENTER "2 or More Presentations"</b> Primary presenters receive a 50% discount on registration for presenting more than once. All presenters may attend a single session free of charge.		
<input type="checkbox"/> 1 individual - One Day (please circle Monday or Tuesday)		\$125
<input type="checkbox"/> 1 individual - Two Days		\$222.50
<hr/>		
<input type="checkbox"/> <b>STUDENTS/VOLUNTEERS</b>		
<input type="checkbox"/> 1 Day (please circle Monday or Tuesday)		\$150
<input type="checkbox"/> 2 Days		\$200
<hr/>		
<input type="checkbox"/> <b>NON-MEMBERS</b>		
<input type="checkbox"/> 1 Day (please circle Monday or Tuesday)		\$300
<input type="checkbox"/> 2 Days		\$545

TOTAL ENCLOSED: \_\_\_\_\_

Please mail registration and payment to WSHPCO at P. O. Box 361 • Camas, WA 98607

or Email: [mccauley@wshpco.org](mailto:mccauley@wshpco.org) • Questions? Call Meg, 503.890.7027. **CANCELLATIONS:** Full refund less a \$20 processing fee if notice is made by 10/5/18. No refund will be granted thereafter.

**WALK-INS:** Walk-ins or substitutes are welcome if space is available and payment is made in full.

## SESSION TRACK COLOR CODES FOR EASY REFERENCE

CLINICAL	ADMINISTRATIVE/REGULATORY
PALLIATIVE CARE	PEDIATRIC
ETHICS/PSYCHOSOCIAL/SPIRITUAL/SELF CARE/OTHER	

Sessions eligible for CME credit are highlighted in yellow.

<b>Monday, October 29, 2018</b>		
7:30am	<i>Continental Breakfast/Registration - Exhibits, Silent Auction and Reflection Room open</i>	
		Foyer Stehekin Edmunds
8am	Welcome & Introductions – Gary Castillo, WSHPCO Board President	
		Centennial
8:15am	<b>KEYNOTE - Building Cultural Agility by Understanding Our Biases</b> , Miguel Valenciano, Portland <b>(1 CME)</b>	
	Centennial	
	<p>This session draws on empirical evidence to take participants on a journey of realization. It is designed to raise awareness of bias from the unconscious to the conscious level. It provides tools for positively managing them for improved cultural agile decision making by training the mind to pay attention to what’s really going on.</p> <p>By the end of this session, participants will be able to: 1) explain the concepts of unconscious versus conscious bias and cultural agility; 2) identify contributing factors toward the creation of unconscious biases; and 3) identify strategies to use to mitigate unconscious bias in their everyday lives and in their work.</p>	
9:15am	<b>Presentation of the 4th Annual Dr. Stuart Farber Excellence in Hospice &amp; Palliative Care Award</b>	
		Centennial
9:30a	<b>PLENARY - Legislative Update</b> , Leslie Emerick, MPA, Director, Public Policy & Outreach, WSHPCO, Olympia <b>(.75 CME)</b>	
	Centennial	
	<p>This session will provide an overview about how the legislative process works in Washington state. Leslie will review how to find out who your elected officials are, how to reach them and how important it is for constituents to communicate with their elected officials about issues which are important to them. Leslie will provide a historical background on palliative care in Washington state and provide an update on legislative and regulatory activity from the 2018 legislative session and the work with state agencies to support palliative care.</p> <p>By the end of this session, participants will be able to: 1) identify how they can find out who their elected officials are and how they can contact them; 2) identify the historical progression of hospice and palliative care up through proposed legislation from the 2018 legislative session; and 3) list topics which will impact and expand palliative care in the public policy arena in Washington state.</p>	
10:15am	<i>Break - Silent Auction, Exhibits and Reflection Room open</i>	
10:45am Concurrent	<b>1A</b>	<b>Designing an Effective Debriefing Session</b> , Daniel W Clark, PhD, Critical Concepts Consulting, Olympia <b>(1.25 CME)</b>
		<p>Dr. Clark regularly provides training on facilitating and applying Critical Incident Stress Management principles to help people deal with their trauma, by allowing them to talk about an incident without judgment or criticism. This session will provide strategies to assist hospice and palliative care professionals in developing debriefing sessions which will be effective for staff.</p> <p>At the completion of this workshop, participants will be able to: 1) recognize their personal reactions to stressful situations and implement strategies to manage those reactions; 2) select necessary components of an effective debriefing session; and 3) identify when to have debriefing sessions take place for optimal effect.</p>
	<b>1B</b>	<b>Introduction to Medical Cannabinoids</b> , Brian Lawenda, MD, Radiation Oncologist, NW Cancer Clinic, Tri Cities <b>(1.25 CME)</b>
		<p>Increasingly, we are being asked by our patients to help them understand if and how they can incorporate cannabinoids into their health care. As one of the few integrative oncologists in the United States, Dr. Lawenda has extensive experience in the implementation and use of various evidence-based complementary therapies (including cannabinoids) and lifestyle approaches to help patients improve their quality of life and cancer outcomes. During this session, Dr. Lawenda will cover the major topics that you will need to be better able to</p>

		<p>converse with your patients about the history, laws, science, pharmacology, metabolism, routes of administration, products and clinical indications for the medical use of cannabinoids.</p> <p>By the end of this session, participants will: 1) be able to discuss with patients about the basic science, pharmacology, side effects and risks and routes of administration of cannabinoids; 2) learn about the differences in recreational vs. medical cannabinoid programs and legal issues; and 3) learn about clinical indications, specialty medical society positions on cannabinoids and the various challenges involved in studying cannabinoids.</p>	
	1C	<p><b>The Art and Science of Prognostication (Part 1)</b>, Maggie O'Connor, MD, Minnesota (1.25 CME)</p> <p>Physicians are often criticized for not speaking with patients about their prognosis, and for being overly optimistic when they do. This workshop will explore why prognostication is "softened," the consequences for patients and families, and the stresses that play a role in prognosticating. Why prognostication is so difficult? What are the challenges of both determining prognosis and communicating this to patients and families? What are the perils of prognostication, and do they affect the practice of medicine. Together we will explore how to improve prognostication both in personal practice and the larger medical system.</p> <p>By participating in this workshop, attendees will be able to: 1) discuss how to improve prognostication in personal practice and the larger medical system; 2) identify 2 or 3 individual goals for improving the practice of prognostication; and 3) identify new ways to communicate prognosis information to patients and families.</p>	
	1D	<p><b>Cornerstones of Compassion: Foundation of Caring for Ourselves and Others</b>, Becca Hawkins, MSN, ARNP and Mark Rosenberg, MD, FACP, Directors, Compassionate Care, Providence, Oregon (1.25 CME)</p> <p>This session will provide participants with experiential exploration of the four Cornerstones for Compassion: Gratitude, Self-Compassion, Finding Meaning and Mindful Pause. These cornerstones promote connection, encourage a positive attitude, enable better coping with stress and allow us to be our best at both work and at home. These practices are applicable to both individuals and teams and examples of how they can be used in "real time" will be provided. In addition, some of the Compassion Cornerstones will be "experienced" in this breakout.</p> <p>Objectives for this session are to 1) explore the connection between compassion and burnout; 2) recognize the Compassion Cornerstones as a potential avenue for building resilience in self and/or team; and 3) experience how Compassion Cornerstones could be put into practice.</p>	
12 pm		<i>Lunch - Exhibits, Silent Auction and Reflection Room open</i>	
1pm Concurrent	2A	<p><b>Washington State Department of Health In-Home Services Division – An Update for Hospice Providers in a Roundtable Discussion Format</b>, Robin Bucknell, In-Home Services Survey Manager, Office of Investigation and Inspection, Department of Health, Suzanne Kinchen, MPH, BSN, Nurse Consultant Institutional &amp; Nancy Tyson, Executive Director, Office of Community Health Systems, WA State Department of Health, Olympia</p> <p>Managers and staff from the Washington State Office of Investigation and Inspection will share recent state and federal Hospice survey findings, provide updates about the recent changes in the In-Home Services Rules and clarify the significant changes in the rules that went into effect in April. They then will participate in "Q &amp; A" sessions with attendees in a less formal format. Bring your questions!</p> <p>At the end of this session, participants will be able to identify: 1) the most frequent WAC citations issued to hospices and home care agencies in the previous year; 2) the top ten federal citations issued to hospices and home care agencies in the previous year; and 3) examples of how to meet state and federal hospice conditions of participation.</p>	
	2B	<p><b>Care of the Imminently Dying Patient: From Drips to Boluses and Beyond</b>, Caroline Hurd, MD, Cambia Palliative Care Center for Excellence at the UW (1 CME)</p> <p>This session will provide an overview of the historical development and principles of commonly used medication order sets for end of life care. The presenter will discuss common concerns and complications that occur using these order sets related to reliance and rapid titration of opioid infusions. This will include factors to consider when selecting the best route and frequency of opioid and benzodiazepines for pain and dyspnea at the end of life using a medication decision tree. Dr. Hurd will review how to assess for signs of</p>	Centennial

		<p>impending death and how to instruct caregivers to know what to expect and how to treat terminal symptoms which may occur.</p> <p>By participating in this session, attendees will be able to: 1) assess for pain and discomfort at the end of life for patients who are unable to speak; 2) describe signs of impending death; and 3) counsel families about common end of life symptoms including dyspnea, terminal secretions, hydration and nutrition.</p>	
	2C	<p><b>Telepalliative Care: A Primer</b>, Gregg VandeKieft, MD, MA, Providence Health and Services, Southwest Washington (1 CME)</p> <p>Dr. VandeKieft will introduce and describe an example of a program design that places the needs of the people receiving care AND the needs of dedicated professionals at the center. By leveraging secure telemedicine technology to create strong relationships of trust over time, a mechanism to solve problems in real time, and the power of value-based economics we are providing robust inter-professional and integrated team-based care to people in their homes.</p> <p>Following this presentation, participants will be able to: 1) describe challenges for meeting palliative care needs in rural communities; 2) define telehealth and telemedicine; and 3) outline ways that telehealth can support local clinicians in meeting palliative care needs in their communities.</p>	
	2D	<p><b>Creating Transformation in the Grief Process, One Stitch at a Time</b>, Michelle Walsh, MSW, Bereavement Coordinator and Dianne Gillespie, MA, Volunteer Coordinator, Whatcom Hospice, Bellingham</p> <p>Linking objects hold intimate meaning for the bereaved and assist them in maintaining a connection of remembrance with a loved one. At PeaceHealth Whatcom Hospice, Volunteers and Bereavement staff combine creativity, connection, and compassion to support the bereaved in making an individualized memory keepsake object. Treasured clothing items are lovingly stitched while staff provide the companionship model of bereavement care. Attendees will learn how this creative workshop facilitates a transformational shift for the bereaved.</p> <p>By participating in this workshop, participants will: 1) be able to identify how linking objects are used to assist the mourner in maintaining a healthy bond of remembrance; 2) learn the steps to train volunteers to support the bereaved through creation of a linking object; and 3) have the tools to create a memory keepsake workshop to serve the bereaved in their program.</p>	
2 pm		<i>Break - Exhibits, Silent Auction and Reflection Room open</i>	
2:15pm Concurrent	3A	<p><b>You, Too, Can GIP (General Inpatient)</b>, Lori Kenyon, RN, BSN, and Laurie Reiter, RN, Providence Hospice of Seattle (1 CME)</p> <p>We would like to present Providence Hospice's coordinated care modality of General Inpatient Hospice Care and how we have overcome challenges working in this venue. We believe it to be helpful to present effective ways to; educate hospital staff and physicians, support continuity of care to patients and families that require acute symptom management. Easing families' way to discharge and/or if patient is actively dying maintain goal of comfort. We will provide a flyer which cover: GIP charting to meet Medicare guidelines.</p> <p>By participating in this workshop participants will be able to: 1) define the scope of what GIP entails; 2) include admit, daily care, documentation and how to support patients/families through the end of life; and 3) list appropriate criteria for GIP admission/discharge.</p>	
	3B	<p><b>Palliative Sedation: What, When, Where, and How?</b> Hope Wechkin, MD, Evergreen Health, Kirkland, Juan Iregui, MD, Franciscan Hospice, University Place, Caroline Hurd, MD, UW, Seattle and Katrina Hoffman, NP, Samaritan Evergreen Hospice, Albany (1 CME)</p> <p>The panel will discuss the following questions within the context of case presentation(s):</p> <ul style="list-style-type: none"> <li>• <b>What</b> actually <u>is</u> palliative sedation, anyway? Different people use the term differently; what definition should we settle on?</li> <li>• <b>When</b> should it be administered? Should every institution have a policy re: when its use is appropriate; Should it only be used after an ethics consultation has been obtained?</li> <li>• <b>Where</b> can it be done? At home? In a residential facility? Only inpatient?</li> <li>• <b>How</b> is it actually done? What medications are used? What medical staff should be present, and for how long?</li> </ul> <p>Upon completion of this session, participants will be able to identify: 1) at least one definition for what is considered to be "palliative sedation"; 2) several clinical conditions</p>	

		and symptoms for which palliative sedation is considered to be an appropriate treatment; and 3) medications currently used to provide palliative sedation.	
	3C	<b>The Surprise Question: One Year In</b> , Laurel Oswalt Jackson, MDiv, Masters Certificate in Clinical Ethics, Senior Director, Compass Care, Virginia Mason Memorial Hospital, Yakima (1 CME)	
		Virginia Mason Memorial is the only hospital to have standardized The Surprise Question, where every physician is required to answer this question for every inpatient admission. One year into our experience, and coinciding with a current clinical trial, we have produced data helpful in affirming and training physicians and administration alike in the ongoing charge to identify and resource palliative-appropriate inpatients.  At the end of this session, participants will be able to: 1) identify what The Surprise Question means in end-of-life care; 2) list methods for instituting the use of The Surprise Question in their programs; and 3) list results for how one program's incorporation of The Surprise Question in their agency's practice impacted their hospice and palliative care programs after one year.	
	3D	<b>Bells, Cranes, and Lavender: Using Rituals in Hospice</b> , Cheryl Smith, Chaplain, MDiv, Whatcom Hospice, Bellingham (1 CME)	
		This workshop is designed to engage participants creatively and to inspire new ideas for ways to use rituals in Hospice and end of life care. Using lecture, discussion, and participation this session will look at why rituals are important, ways rituals can address spiritual pain, assist patients, families, and staff in coping with grief and loss and how to incorporate rituals into the work, not only of chaplains, but the interdisciplinary team.  By participating in this workshop, participants will: 1) understand that rituals assist in coping with grief and loss; 2) recognize how use of rituals addresses spiritual pain; and 3) develop rituals in their context.	
3:15pm		<i>Break - Exhibits, Silent Auction and Reflection Room open</i>	
3:30pm Concurrent	4A	<b>Common Questions and Misperceptions Around Funeral Planning</b> , Char Barrett, Founder, A Sacred Moment, Everett (1 CME)	
		This session will discuss common misperceptions, issues and questions which have most commonly been asked by Hospice providers and other in-home services staff. The session will cover what is required under state law and review the many options patients and families have when completing funeral plans.  By the end of this session, participants will be able to identify: 1) requirements regarding the disposition of a body in Washington state; 2) the most common questions family members usually have after the death of a loved one; and 3) common options patients and families have when making funeral plans.	
	4B	<b>An In-Depth Introduction to the Macy Catheter in the Home Hospice Settings</b> , Brad Macy, RN BA, BSN, CHPN, Hospi Corporation, Newark, CA (1 CME)	
		This lecture provides an in-depth introduction to the Macy Catheter, an option for controlling symptoms in patients when the oral route fails, and sublingual is not effective. The lecture briefly reviews the challenges associated with symptom management in the home and describes how the Macy Catheter allows for the continuation of oral medication already at the bedside when the oral route fails, allowing immediate symptom control efforts without awaiting delivery of other options. The lecture demonstrates the cost benefits associated with the intervention. The lecture further reviews the literature on rectal medication pharmacokinetics and ends with several case studies.  At the completion of this session, participants will be able to: 1) describe the Macy Catheter and the clinical and cost benefits of the technology in both the inpatient and home hospice setting; 2) describe the physiology of the rectum and how this effects absorption of medication formulations at the end of life; and 3) list 5 medications commonly used at the end of life for symptom control and their rectal absorption kinetics in micro-enema form.	
	4C	<b>End of Life Documents</b> , Sally McLaughlin, Executive Director, End of Life Washington and Hilary Walker, PeaceHealth Bellingham Program Director of Advance Planning (1 CME)	
		Participants will learn of the different Advance Directives for Health Care commonly used in Washington State (Five Wishes, Honoring Choices, WSMA, EOLWA, etc.) and will explore their strengths and challenges. The advantages and inherent limitations of EOL documents will also be highlighted, as well as approaches and protocols to augment an EOL documents'	

	<p>efficacy.</p> <p>At the end of this sessions, participants will: 1) be aware of the various commonly used Advance Planning Documents; 2) be introduced to new, innovative documents (Ex. EOLWA's <i>Instructions for Oral Feeding and Drinking</i> and Dr. Barak Gaster's <i>Advance Directive for Dementia</i>), with discussion about their advent and efficacy; 3) recognize the limitations to EOL documents – when and why they do and do not work; and 4) explore several techniques to improve the efficacy of EOL documents.</p>	
	<p><b>4D Sacred Spaces at End of Life: Exploring Diversity</b>, Rev. Shakur Sevigny, Spiritual Care Coordinator, Kindred Hospice, Seattle, Charlotte Keyes, MDiv BCC, WhidbeyHealth Hospice Chaplain, Coupeville, and Cheryl Smith, Chaplain, MDiv, Whatcom Hospice, Bellingham</p>	
	<p>The panelists will be discussing and sharing their individual experiences with different types of sacred rituals at the end of life. A goal is to demystify diverse sacred rituals which a family may wish to follow. Hospice chaplains are not always present when a patient dies. A goal of this session is to facilitate all hospice staff to feel more comfortable in honoring diverse ritual expression at the end of life.</p> <p>By the end of this session, participants will: 1) be able to identify different spiritual traditions utilized at the end of life; 2) be able to identify measures to help them discern what is sacred to patients and families; and 3) feel more empowered to offer ritual support to patients and families at the end of life.</p>	
4:30pm	Adjourn	
5-6pm	Welcome Reception	
6pm	Free Evening	

## Tuesday, October 30, 2018

7:30am	Continental Breakfast/Registration – Silent Auction, Exhibits and Reflection Room open	
8am	<p><b>Welcome &amp; WSHPCO Annual Business Meeting</b></p> <p>Gary Castillo - WSHPCO Board President and Director, Chaplaincy Health Care, Kennewick</p>	Centennial
8:30am	<p><b>Plenary – Compassion and Suffering in Healthcare</b>, Becca Hawkins, MSN, ARNP and Mark Rosenberg, MD, FACP, Directors, Compassionate Care, Providence, Oregon <b>(1 CME)</b></p> <p>This session will provide a provocative exploration of how addressing the suffering of caregivers in healthcare is essential in optimizing the care of our patients. The speakers will provide intriguing data linking burnout and compassion to the Quadruple Aim. Specific “Compassion Infusions” will be described, demonstrating the power of mindfulness, reflection and connection in maintain the wellbeing of teams and individuals.</p> <p>Session objectives include: 1) to review the relationship between burnout, suffering and compassion; 2) describe how compassion in healthcare can be a source of resilience; and 3) share “compassion infusions” that can be implemented for individuals or teams to strengthen resilience.</p>	Centennial
9:30am	<p><b>Plenary - Strategies for Managing Your Stress Every Day</b>, Daniel W Clark, PhD, Critical Concepts Consulting, Olympia <b>(1 CME)</b></p> <p>Dr. Clark will discuss how to identify how stress impacts our everyday lives. He will review tools and resources participants can utilize to manage their daily stress as well as to use during abnormally high periods of stress.</p> <p>At the completion of this workshop, participants will be able to: 1) recognize when they are feeling stressed; 2) recognize how stress impacts their mental and physical well-being as well as their performance; and 3) identify several strategies for alleviating and managing stress.</p>	Centennial
10:30am	<p><b>Opening Reflection – Honoring Hospice &amp; Palliative Care Professionals</b></p> <p>Sonjia Hauser, RN, Nurse Manager - Ray Hickey Hospice House, PeaceHealth Hospice Southwest and Laurie Oswald, M.Div, Senior Director, COMPASS CARE, Memorial's Care Line for Advancing Illness, Yakima Valley Memorial Hospital</p>	Centennial
10:40am	Break – Hotel Checkout/Silent Auction, Exhibits and Reflection Room open	

11:05am Concurrent	5A	<b>How Does Hospice Pharmacy Pricing Really Work?</b> Drew Mihalyo, Delta Care Rx, Steubenville, OH (1.25 CME)	
		<p>Expectations for hospices regarding medication management are changing at an alarming rate. The effect of Change Request 8358 (Hospice Medication Purchase Reporting) is still “early in the game.” Most hospices nationwide are still buying medications like it’s 1984. As our audience today, you are often called upon for sound advice and review regarding big decisions being made during vendor selection processes or RFP’s. And.... Navigating pharmacy purchasing agreements is challenging!</p> <p>At the end of this session, participants will be able to: 1) identify factors which contribute to how the most common hospice pharmacy pricing really works; 2) identify the different types of pharmacy pricing and how different options work; and 3) discuss considerations to incorporate when determining a strategy for any future RFP or change in pharmacy vendor.</p>	
	5B	<b>A Conversation About Prognostication (Part 2)</b> , Maggie O’Connor, MD, Minnesota (1.25 CME)	
		<p>Recommended (but not required) to have attended The Art and Science of Prognostication (Part 1/Monday). Participants will be presented with a case study, drawn from Paul Kalinithi’s book, <u>When Breath Becomes Air</u>. Dr. Kalinithi learned he had stage IV lung cancer as he was finishing his fellowship in neurosurgery at age 36. Using the extracted quotations of each conversation the author has with his oncologist, prognostication is addressed from first diagnosis to final visit. Together we will talk about the good, the bad, and the difficult in the conversations about prognosis.</p> <p>By participating in this workshop, participants will be able to: 1) articulate their own values and beliefs about the practice of prognostication; 2) reflect on the value and challenges that arise in both providing and receiving a prognosis; and 3) reflect on the meaning of “existential authenticity” in the medical context.</p>	
	5C	<b>Challenges in Serving Young Adults</b> , David C. Brunelle, MD, Medical Director for Pediatric Palliative and Hospice Care, Mary Bridge Children’s Hospital & MultiCare Home Health and Hospice, Tacoma (1.25 CME)	
		<p>Dr. Brunelle will discuss: what makes teens and young adults a unique population in general, how illness – particularly life-limiting and life-threatening illnesses – affect them in ways we all must recognize and understand and how serving this population in the Hospice setting can be optimized. He plans to close his session by sharing lessons teens/young adults have taught him.</p> <p>By the end of this session, participants will be able to: 1) identify the characteristics and traits that make serving teens and young adults both different and more challenging than serving adults; 2) identify several ways in which a life-limiting illness can impact teens and young adults which are unique to this age group; and 3) identify several ways to optimize and improve serving teens and young adults in a hospice setting.</p>	
12:20pm	<i>Lunch –Exhibits and Reflection Room open, Final Silent Auction Bids in by 12:50</i>		
1:05pm	<i>Silent Auction Closes – Pick Up &amp; Pay for Items Won!</i>		
1:20pm Concurrent	6A	<b>Long Term Care Perspective for the Intellectually Disabled</b> , Christian W. Dahl, MD, Senior Medical Director and Family Medicine Physician, Developmental Disabilities Administration, Lacy (1 CME)	
		<p>The goal of this presentation is to provide insight into the health issues of People with Intellectual Disabilities as they need more palliative care in their lives. These are unique individuals who may have been dealing with health care choices their entire lives, but often have not been the manager of their own care, or it have been influenced by others. We will cover some of the misconceptions about their care planning options and some poor policy decisions. Then we will review some of the better approaches to caring for this group of individuals.</p> <p>On completion of this session, participants will be able to: 1) better understand how people with Intellectual Disabilities can access palliative care; 2) understand the role of Guardians and other family members in helping people with their decisions; and 3) understand the history of regulations and the approach to decision making by state agencies.</p>	
	6B	<b>Acupuncture: An Invaluable Tool to Have on Your Team</b> , Robyn Curtis, Lac., LMP, Acupuncturist, Massage Therapist, MSA, Whatcom Hospice, Bellingham (1 CME)	
		The goal of this session is to show how acupuncture is a benefit to not only our patients, but	

		<p>to our hospice staff. Symptom management is made easier with more ways to help the patient and allows for the RN's to have another tool to offer when someone is struggling with symptoms such as pain, anxiety, or constipation. Working as a team allows for a better work environment and morale. Participants will also leave with some skills to help patients or themselves with some acupuncture clinical pearls.</p> <p>By participating in this workshop, participants will have: 1) an understanding of how and when to utilize complimentary therapies in their care plan; 2) valuable new skills as for evaluating their patient's symptoms; and 3) a basic understanding of acupuncture foundations applicable to end of life care through demonstrations and partner practice.</p>
	6C	<p><b>Some People Here Don't Think He Has a Soul</b>, Jennifer Kett, MD, MA, Mary Bridge Children's Hospital, Tacoma (1 CME)</p> <p>Dr. Kett will describe a case associated with an extreme level of moral distress amongst staff. This case was so fraught that a nurse unfortunately said to the family "Some people here don't think he has a soul." Dr. Kett will review some of the reasons that distress may have been so high in this case, including issues of unconscious bias due to gatekeeping, messaging, "saving vs. creating," perceptions of children with craniofacial anomalies and perceptions of neurodisability. She will review some ways moral distress and moral residue may affect the care of children with life-limiting or life-threatening illnesses.</p> <p>On completion of the session, participants will: 1) be able to identify areas of unconscious bias that may affect the care of children with severe neurodevelopmental and craniofacial disorders; 2) be able to identify disparities between provider and parent perceptions of disability; and 3) be aware of the concepts of moral distress and moral residue and how they can affect clinical care.</p>
	6D	<p><b>Hospice and Palliative Care Revisions</b>, Nancy Hite, LVN, ASN, MSBM, Occupational Nurse Consultant, Medical Care Services, WA State Health Care Authority, Olympia</p> <p>An informational session with the Health Care Authority answering questions around concurrent care and the addition of adult palliative care. Ms. Hite will also provide information about the possibility of a webinar being produced around hospice services in an institution and the difference in payment and client participation.</p> <p>By the end of this session, participants will be able to: 1) list the requirements to be met for a child to be eligible for pediatric concurrent care; 2) identify the proposed eligibility requirements for adult palliative care coverage by the Washington State Health Care Authority; 3) identify coverage issues for patients receiving hospice services while residing in an institution; and 4) discuss issues to be addressed during proposed HCA rulemaking for adult palliative care.</p>
2:25pm Concurrent	7A	<p><b>Safe Prescribing of Opioids in Palliative and Hospice Care</b>, Mary Catlin, BSN, MPH, CIC, Institutional Nurse Consultant and Carolyn Ham, PTA, Washington State Department of Health, Tumwater (1 CME)</p> <p>This session will discuss the risks of opioid prescribing contribute to range of harms from falls to overdoses, including in the hospice and nursing home settings. Presenters will discuss how to reduce the harms of unsafe prescribing, how to comply with new legislation for opioid prescribing and how to minimize risks of diversion by patients, family and staff.</p> <p>By participating in the workshop, participants will: 1) learn to reduce the risk of adverse events from opioids including falls, overdoses, and aspiration pneumonia; 2) be able to describe what the current guidelines and ESHB 1427 requires for charting for the prescription of opioids for chronic pain; and 3) learn how institutions can reduce diversion of opioids by family and staff and measures to address staff with opioid dependency.</p>
	7B	<p><b>Organ Donation: What You May Not Know</b>, Laurel Oswalt Jackson, MDiv, Masters of Divinity, Masters Certificate in Clinical Ethics, Senior Director, Compass Care, Virginia Mason Memorial Hospital, Yakima (1 CME)</p> <p>Organ donation can be an important way for a person to contribute to our society even after death, but we often neglect the many opportunities available for the terminally ill to contribute in this way, particularly when we assume that transplant donation is the only option. In this session, several donation options will be offered, from cadaver to organ/tissue for transplant to organ/tissue for education and science. Legal issues and resources will also be brought out for our team members to provide the best options to patients and families.</p> <p>At the end of this session, participants will be able to: 1) identify organ donation options for</p>

		hospice/palliative care patients; 2) describe to the lay person the difference between organ donation for transplant, organ donation for cadaver use, and organ donation for education/science; and 3) address benefits and challenges to particular types of organ donation.
	7C	<p><b>Pediatric Concurrent Care Presentation</b> – Anne Anderson, RN Care Coordinator   Palliative Care Program, Seattle Children's and Sue Ehling, ARNP, Hematology/Oncology Nurse Practitioner, Sarcoma and Wilms Tumors, Seattle Children's Hospital (1 CME)</p> <p>This session will discuss how hospitals can work with hospices in serving pediatric oncology patients, including ways to collaborate between hospice and the hospital. The session will provide an overview about pediatric concurrent care and how concurrent care is implemented in the state.</p> <p>At the end of this session, participants will be able to: 1) discuss ways that hospitals and hospices can collaborate in providing care to pediatric oncology patients; 2) identify how pediatric concurrent care is supposed to work under the provisions of the affordable care act.; and 3) discuss factors which impact when pediatric oncology patients are referred to hospice programs.</p>
3:25pm		Conference Adjourns – Safe Travels!

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### Thank you to our 2018 Conference Planning Committee

- Barb Hansen, Executive Director, WSHPCO
- Hilda Harmon, Franciscan Hospice
- Sonjia Hauser, Ray Hickey Hospice
- Juan Iregui, MD, Franciscan Hospice
- Laurel Oswalt Jackson, MDiv, Senior Director, Compass Care
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