

## SESSION DESCRIPTIONS, TIMES – MONDAY, OCTOBER 25, 2021

Green = Administrative/Regulatory Track, Blue = Clinical Track, Purple = Psychosocial, Spiritual, Ethics Track, Red = Palliative Care & Other Track

### KEYNOTE PANEL PRESENTATION: 8:30-9:30A 10/25/21

**“What the Pandemic Has Taught Me”, with past Farber Award recipients Anne Koepsell, retired WSHPCO Executive Director, Ross Hays, MD, Seattle Children’s Hospital, Mimi Pattison, MD, FAAHPM, Virginia Mason Franciscan Hospice and Palliative Care, Gregg VandeKieft, MD, MA, FAAFP, FAAHPM, Medical Director for Palliative Care, Providence Health System**

The pandemic has upended our lives. What can we learn from it? During this session, four previous recipients of the Stu Farber Award for Excellence in Hospice and Palliative Care will share their insights and perspectives about how the pandemic has impacted them, professionally and personally.

*OBJECTIVES:* Participants will 1) discuss the perspectives of experienced hospice and palliative-care professionals as they share lessons they have learned during the past 18 months; 2) reflect on the opportunities this challenging time in health care has provided for self-growth, leadership and resilience; 3) suggest future considerations for improving our “capabilities and capacities” as both health care providers and as individuals striving for work/life balance.

*ABOUT THE PRESENTER(S):* Anne Koepsell, RN, BSN, MHA, CLNC is the former Executive Director of the Washington State Hospice & Palliative Care Organization, a position she held from 2005-2015. Now retired, Anne has been an RN for over 40 years, with 10 years of experience in home health administration prior to another 10 years of hospice administration. Anne was awarded the Stu Farber Award in 2016 to honor her many years of leadership and advocacy to improve hospice and palliative care in Washington state. Anne’s suggested title for this Keynote presentation was: “If Great Grandma survived the 1918 flu pandemic, I can survive COVID!”

Dr. Ross Hays, M.D., is a board certified physician and medical director for the Palliative Care Consultation Service at Seattle Children’s Hospital and a UW professor of Medicine and Rehabilitation Medicine and an adjunct professor of Bioethics and Humanities and Pediatrics. He also provides consultation on pediatric palliative care to hospitals regionally and nationally. Dr. Hays strives to provide the same type of compassionate care he would want for a member of his own family. Dr. Hays earned his M.D. from the UW. He is board certified in Pediatrics, Rehabilitation Medicine and Hospice and Palliative Care. His clinical interests include pediatric rehabilitation, chronic pain and palliative care. His research interests include pediatric disability, medical ethics and palliative care. Dr. Hays was awarded the Stu Farber Award in 2020 to honor his many contributions toward improving hospice and palliative care for children in the state and northwest.

Dr. Mimi Pattison is a palliative medicine physician with more than two decades of clinical experience in the field. She is the medical director for Franciscan Hospice and Palliative Care. In 2008, she was appointed by Governor Christine Gregoire to the Medical Quality Assurance Commission for Washington State and served as chair between 2010 – 2012. In 2014, Dr. Pattison was selected to participate in a 32-member Alzheimer’s Disease Working Group to develop a plan for the care of persons diagnosed with Alzheimer’s and other dementias. Dr. Pattison’s medical interests include ethical issues at end of life, systems integration of palliative care, and access for persons with dementia to palliative care and hospice. Dr. Pattison was awarded the Stu Farber Award in 2018 for her leadership in educating future palliative care providers.

Dr. Gregg VandeKieft practices palliative medicine in Olympia, Wash. He has held leadership positions within Providence St. Joseph Health and the American Academy of Hospice and Palliative Medicine. He attended the University of Iowa’s College of Medicine and the Phoenix Baptist Hospital’s Family Medicine Residency Program. He completed Michigan State University’s master’s program in Health and Humanities and Harvard Medical School’s program in Palliative Care Education and Practice. He is the recipient of the Stuart J. Farber Award for Excellence in Palliative Care and Hospice in 2017 to honor his state and national advocacy efforts, and the Hastings Center Cunniff-Dixon Physician Award in 2018.

### CONCURRENT SESSIONS GROUP 1: 9:50-10:50a 10/25/21

**Pearls Gleaned from Four Years of the WA Rural Palliative Care Initiative; Pat Justis, Master of Arts in Counseling, Executive Director, Rural Health, Washington Department of Health, Gregg VandeKieft, MD, MA, FAAFP, FAAHPM, Medical Director for Palliative Care, Providence Health System, Adrienne Goldberg, PhD, LICSW, MEd, Tele-Palliative Care Social Worker, Providence Stevens County, Advance Heart Failure and Transplantation at Sacred Heart Medical Center, Rev. Carolyn Cristina Manzoni, MA, CCC, EOLD, CBC, FT, Bereavement Coordinator, Spiritual Care Coordinator, Jefferson Healthcare Hospice & Deb Watson, RN, BSN, MBA, NEA-BC, Clinical Project Manager, Pullman Regional Hospital, Clinical Coordinator, WA Rural Palliative Care Initiative, Team Lead-Pullman Palliative Care Team**

Leaders and participants from the WA Rural Palliative Care Initiative will reflect on their experiences and the important lessons learned from work that seeks to help rural community members with serious illness receive palliative care.

*OBJECTIVES:* On completion of this session participants will 1) be able to name at least five "pearls"; 2) list at least two supports available to community teams in the WA Rural PC Initiative; 3) be able to describe the importance of rural primary palliative care.

*ABOUT THE PRESENTER(S):* Pat Justis MA, is the leader of the WA Rural Palliative Care Initiative and the Executive Director of Rural Health at the Department of Health.

Gregg VandeKieft, MD, MA, FAAFP, FAAHPM is Medical Director for the WA Rural Palliative Care Initiative, Palliative Care Medical Director for Providence Health System and practices at Providence St. Peter Hospital in Olympia.

Adie Goldberg, PhD, LICSW is a palliative care social worker at Providence Stevens County and Providence Sacred Heart's Advanced Heart Failure and Transplant program in Spokane.

Rev. Manzoni is the Bereavement and Spiritual Care Coordinator at Jefferson Healthcare Hospice.

Deb Watson is Pullman Regional Hospital's Clinical Project Manager as well as their palliative care team Lead. She is also the clinical coordinator with the WA Rural Palliative Care Initiative.

### **Opting Out of Time-of-Death Visits: Insights from Home Hospice Families; Kathy Katzenberger, Hospice Manager-RN, DNP, CHPN, EvergreenHealth Hospice**

Hospice offers support to our families and caregivers at the time-of-death when their loved one dies but what happens when they refuse the visit? Presenter will be sharing rare research findings from home hospice families that chose to opt out of having a time-of-death visit. Study looked at why families chose not to have hospice support at the time of death of their loved one and what families had to say about their experience. Come hear what these families had to say were their reasons why and how they were coping 6-13 months later.

*OBJECTIVES:* 1) Participants will learn what home hospice families shared was important to them at the time-of-death of their loved one; 2) On completion of this session participants will gain new insight into what hospice families need at the time-of-death.

*ABOUT THE PRESENTER(S):* Kathy Katzenberger is a nurse with over 30 years of hospice experience. She recently completed her DNP and received the Project of the Year Award for her research on Meaningful Time-of-Death Visits. Kathy has been a certified hospice nurse for many years. She is currently serving as the Vice President of the WSHPCO Board and has been a part of the WSHPCO conference planning committee for many years.

### **Home & Hearth: Ethical Dilemmas in Health Care at Home During the COVID-19 Pandemic; Hope Weckin, MD, Medical Director, Hospice & Palliative Care, EvergreenHealth**

During this session, real-life scenarios will be presented and discussed to illustrate ethical dilemmas encountered by a Hospice program serving patients during the COVID-19 pandemic. The discussion will involve questions about the principles of fairness, equity and patient agency. How can a

program adhere to safety standards when the rules keep changing, the PPE supplies are dwindling and the patients and families who are being served want to waive them? The session will include a discussion of the challenge of how to respect commitments to social justice in the face of overwhelming and entrenched inequalities in health, well-being, and resources.

**OBJECTIVES:** Upon completion of this activity, attendees should be able to 1) identify concepts and principles for understanding ethical issues which have arisen during the COVID-19 pandemic for the care of home hospice patients; 2) implement a method for analyzing ethical cases in the home hospice setting; 3) understand the skills needed for decision-making for clinical cases that present ethical problems.

**ABOUT PRESENTER(S):** A family physician by training, Dr. Hope Wechkin has served as the medical director of EvergreenHealth's hospice and palliative care programs since 2007. Having served as a physician consultant on the University of Washington Medical Center's palliative care service and co-directed (with Stu Farber, MD) the palliative care track of the chronic care clerkship at the University of Washington School of Medicine, Dr. Wechkin now serves as a guest lecturer in end-of-life care in the annual summer seminar in medical ethics that is held at the University of Washington School of Medicine. In her role as physician co-chair of EvergreenHealth's ethics committee, Dr. Wechkin led EvergreenHealth's successful efforts to retain the services of a professional ethicist and to form a joint ethics committee with Virginia Mason Medical Center. She has been an active member of Washington state's Honoring Choices work group and has worked with ACP (Angelo Volandes et al.) to increase access for EvergreenHealth patients and families to education regarding decisions at the end of life through video discussions.

**Surviving Covid: Inpatient to Outpatient to Direct to Patients Telehealth Service; Nicole Dwyer, PA-Certified, Sarah Rial, LICSW & Deb Watson, RN, Pullman Regional Hospital**

Pullman Regional Hospital Palliative Care Core Consult Team members will share about their journey to move an inpatient palliative care service to an outpatient setting and then quickly transition it to a direct-to-patient telehealth service in order to support community members suffering from serious illness during the stringent Covid-19 restrictions. The focus will be on why the need, how this was accomplished, and what they learned along the way.

**OBJECTIVES:** On completion of this session, participants will be able to 1) share 3 steps in developing a direct to patient palliative care telehealth service; 2) state 3 processes for ensuring optimal direct-to-patient TH visits; 3) describe 3 types of visits that are suitable for Direct-to-Patient Palliative Care visits.

**ABOUT THE PRESENTER(S):** Nicole Dwyer is a certified Physician Assistant who received her Master's in Physician Assistant Studies from Pacific University in Hillsboro, Oregon in 2009. Prior to that, she earned a Bachelor's of Science in Biology at the University of Colorado at Denver in 2003. She is nationally accredited through the National Commission on Certification of Physician Assistants. She currently works in Emergency Medicine at Tristate Memorial Hospital in Clarkston, Washington, Urgent Care in Moscow, Idaho, and Palliative Care at Pullman Regional Hospital in Pullman, Washington. Additionally, her career experience spans the specialties of Orthopedic and General surgery, Cardiology, Cardiovascular ICU, and Hospitalist Medicine. She earned her certificate in Palliative Care at the University of Washington in 2019 and was an integral team member in the development of a rural Palliative Care service line at Pullman Regional Hospital through the Washington Rural Palliative Care Initiative. Her true passion is the great outdoors where she draws strength from the beauty and experience of the landscapes she encounters.

Sarah Rial, LICSW has been practicing Social Work for 25 years. She obtained her MSW at Eastern Washington University in 1999. Sarah has practiced in long term care, Home Health, Hospice, Acute Psychiatric, Medical Social Work and Palliative Care.

Deb is an experienced nursing leader with more than 16 years practice in a variety of hospital nursing leadership roles and 37 years experience in health care. She is currently working as a clinical project manager for Pullman Regional Hospital. In 2018-current, she assisted with the development and implementation of palliative care services for the hospital to include, building and supporting a core consultation team that provides this hospital service. Deb is also assisting the WA DOH in their Palliative Care Initiative as the Clinical Coordinator where she gathers, screens and refines cases, ensures

patient privacy and prepares the consulting panelists for the telehealth even. Deb holds a BS in Nursing from Washington State University and a MBA with an emphasis in Health Care Management from Capella University.

#### **CONCURRENT SESSIONS GROUP 2: 10:55-11:55a 10/25/21**

#### **Disaster and Epidemiological Preparedness; Kristin Nelson, MBA in HealthCare Administration & Curran Yeretian, VP of Network Operation, StateServ**

In this presentation we will review the new final rule that was released March 2021 with proposed Hospice Requirement. This workshop will highlight how to treat respiratory patients and how to create a comprehensive plan.

*OBJECTIVES:* On completion of this session, participants will: know how to create a disaster plan; 2) prepare for an all hazards plan; 3) learn of contingency DME plans you might not consider.

*ABOUT THE PRESENTER(S):* Kristin Nelson holds a MBA in Healthcare Administration and has been in the hospice space for the last 16 years finding solutions for Hospices across the country. Kristin currently leads the sales team for StateServ and oversees Hospice, Hospital & SNF at Home, PACE and SNF for the division.

Curran Yeretian in the VP of Network Operation and leads the implementation of disaster plans for more than 135,000 patients in hospice every year. He has been with StateServ for the last 10 years and prior to that worked as a hospice operator.

#### **Drug Metabolism Changes in Geriatric Patients; Corina Reyna, PharmD, BCGP, Origins Pharmacy Solutions**

Overview of challenges in prescribing for geriatric patients, including changes in medication metabolism, altered medication efficacy, increased risk of interactions and toxicity, and implications of these changes on prescribing and monitoring practices. Included will be a thorough exploration of pharmacokinetic and pharmacodynamic changes combined with a presentation of resources for appropriate geriatric medication prescribing. Discussion of methods and tips for ongoing drug regimen review to minimize risk and maximize benefit will conclude the session.

*OBJECTIVES:* 1) Identify sources of medication dosing challenges in the geriatric population; 2) Describe how key age-related physiological changes impact drug therapy; 3) Discuss resources & methods for reviewing med profiles of geriatric patients for appropriate dosing.

*ABOUT THE PRESENTER(S):* After graduating with a Doctor of Pharmacy degree from Idaho State University College of Pharmacy in 2004, Dr. Reyna jumped into pharmaceutical compounding. Her analytical nature combined with specialized training in functional endocrinology launched her into frequent individualized speaking engagements on topics from dermatology to veterinary pharmacy, bio-identical hormone replacement to hospice prescribing. She founded Origins Pharmacy Solutions, a hospice pharmacy benefits management company, in 2008 and became a certified geriatric pharmacist in 2009. Since then she has provided precise, straightforward, evidence-based recommendations for hospice nurses and prescribers in the form of medication therapy reviews, educational presentations, and written materials for hospice clients across the country.

#### **Legacy Work - Why it is Critical, When to Engage & How to Engage; Frances Murphy, MSW, EvergreenHealth Hospice**

What is Legacy Work? The definition is as broad as the mind can imagine but the theories related to this work are easily defined. These interventions are tied to positive outcomes, for patients, families and care givers. This presentation will empower you to notice for whom and when this work is appropriate and give you the knowledge of why this is critical work. You will also be exposed to practical interventions, and a resource handout to take with you.

*OBJECTIVES:* 1) By participating in this workshop, participants will gain an understanding of what Legacy Work is and who would benefit from clinical intervention; 2) Participants will gain an understanding of the theories related to Legacy work; 3) On completion of this session, participants will be empowered to engage patients in this work.

*ABOUT THE PRESENTER(S):* Frances Murphy has a Master's in Social Work from the University of Washington. She has worked for EvergreenHealth Hospice for the last three years. Legacy Work is a passion of hers and she wants to share this perspective with all who work with those facing end of life.

**Sustainability During Trying Times: Tending Your Personal & Professional Garden During a Pandemic; Cryss Blackwolf, MSW, LSWAIC & Lisa Stewart, Hospice Manager, MSW, EvergreenHealth Hospice**

Finding meaning in our lives and in our work requires cultivation, effort and attention. It takes energy to show up during times of great difficulty and to be present with people during profound personal and community loss. Cultivating your personal "garden", whatever that may be for you, is a way to sustain yourself which allows you to germinate, create and flourish. Learning to be present and to understand and offer your sacred gifts as well as how to receive those gifts from others allows us to stay present in the depth and profundity of each moment. This work is an inside job and we invite you to come take a walk in the garden with us and explore a shift in perspective through the development of personal rituals that help you sustain and which you can access readily.

*OBJECTIVES:* 1) By engaging in this workshop, participants will learn strategies to cultivate compassionate healing presence amidst chaotic times; 2) Participants will leave this session with ideas and practices to ground themselves while working through primary and secondary trauma; 3) On completion of this workshop, participants will gain tools and insights that spark curiosity and growth around resilient practice.

*ABOUT THE PRESENTER(S):* Cryss Blackwolf is a hospice social worker who graduated with his MSW in 2020. Cryss began his journey as a nursing assistant followed by three decades of service to aging communities as a volunteer in senior centers and facilitating adult drumming circles serving aging communities and those living with critical illness. Prior to pursuing his dream to become a social worker, Cryss worked in the field of information technology for 20 years and now works for EvergreenHealth hospice.

Lisa Stewart has 30+ years of human service and social work experience working in the development disabilities, youth and family and mental health systems and has spent the last 9 years working at EvergreenHealth Hospice initially as a field MSW and then in her current role as a hospice manager for the last 8 years.

**CONCURRENT SESSIONS GROUP 3: 12:45-1:45p 10/25/21**

**Certified End of Life Doula: What Are They and How They Can Benefit Hospice Programs; Cassidy Bastien, CAN, CEOLD**

This presentation will be identifying what a CEOLD (Certified End Of Life Doula) is. How they are of benefit to palliative care and hospice patients as well as their families. And how their services can positively benefit hospice programs.

*OBJECTIVES:* 1) What a Certified End Of Life Doula is; 2) How Certified End Of Life Doula's positively impact patients and families at end of life; 3) How Certified End Of Life Doula's can positively impact hospice programs.

*ABOUT THE PRESENTER(S):* Cassidy Bastien is an 18 year veteran Certified Nursing Assistant, having spent the last five years in Hospice and a Certified End Of Life Doula in her community the last two years studying under Suzanne O'Brien founder and creator of DoulaGivers End Of Life Doula training. She is very active in the greater Seattle area hospice she serves, sitting on the patient and family experience committee as well as the After Death Visit Committee. Focusing on patient and family experiences and meaningful after death visits and care. She was born in Washington state and grew up in Havre Montana where she got her CNA license at the age of 18 in 2003. She has worked as a CNA in skilled nursing facilities, Activities Aide in memory care training under Teepa Snow, CNA/ Restorative Aide for Bethany of the NW and in home private caregiver. In her spare time she created, and runs the Caregivers Hub Support Group on Facebook founded in 2016 which is home to 6.8K active caregivers all over the world. As well as holding virtual death cafes and live virtual events for the caregiver community. She is a fierce advocate for caregivers, dementia caregivers and end of life care.

**Goal-Concordant Care: The Intersection Between Drugs and Disease for Those With Serious Illness; Wayne Grant, PharmD, MBA, National Clinical Innovation Officer, Delta Care Rx**

Hospice and palliative care have long sought to establish the goals important to an individual's care. Further, the National Academy of Medicine proposed goal-concordant care as a quality measure. This presentation explores how clinicians, administrators, and patients apply the concepts of goal concordant care. Through a discussion of advance care directives, patients with serious illness will define what is important both to them and their loved ones.

*OBJECTIVES:* 1) Define goal-concordant care; 2) Describe how goal-concordant care relates to advanced directives; 3) Relate how seriously ill patients' response to drugs will change over time and how to adjust therapies that continue to be appropriate for their care.

*ABOUT THE PRESENTER(S):* Dr. Grant's current role with Delta Care Rx includes developing clinical standards, clinical policy, and quality of care metrics for wellness, case management, disease management, and other clinical / administrative areas. I sit on Pharmacy and Therapeutics promoting the use of current evidence-based medicine to foster best practices and improve patient outcomes and Lean / Six Sigma practices to improve efficiency of organizations and pharmacy operations. Dr. Grant's clinical practice targets disease state management across multiple areas, including but not limited to: cardiology, gastrointestinal, geriatrics, nephrology, neurology, oncology, psychiatry, and pulmonology.

**Building and Nurturing Your Volunteer Tribe; Melissa Lubatti, Sheri Standley and Alicia Robinson, Volunteer Coordinators, EvergreenHealth Hospice**

Sharing best practices around sustaining, evolving and nurturing a healthy and robust volunteer program. Investing in relationships with your volunteers a creativity during chaos...what we learned and what we have built to strengthen our program throughout this pandemic and beyond

*OBJECTIVES:* 1) To increase your ability to build and nurture relationships with your hospice volunteers; 2) To inspire thinking outside the box the allow you to develop and pilot new volunteer roles and programs; 3) To cultivate a "Yes, how can we make it work?" mindset.

*ABOUT THE PRESENTER(S):* Melissa, Sheri and Alicia collectively have 35+ years of experience as Volunteer Coordinators in one of our Washington state's largest and oldest hospice providers. They are innovative thinkers who have developed creative best practices and sustained an engaged group of long term committed and dedicated hospice volunteers by cultivating a collective and collaborative approach that increases a sense of community and enhances the care and support we offer the community we serve.

**Boundaries—Who Needs Them? Cheryl Smith, MDiv, Bereavement Counselor & Ashley Aiken, MSW, Holistic Team Supervisor, Whatcom Hospice**

Nobody likes thinking or talking about boundaries. Yet they are helpful in preventing compassion fatigue, getting into sticky situations, and taking care of your needs as you care for others. Unlike other boundary trainings, this is specifically aimed at home care, where it is harder to make and claim healthy boundaries and yet remain caring and compassionate.

*OBJECTIVES:* 1) Understanding dual relationships; 2) Understanding the ring theory of empathy; 3) Developing healthy functional detachment.

*ABOUT THE PRESENTER(S):* Ashley has an MSW from Boston College with a focus on Older Adults & Families and has been a Hospice Social Worker for 7 years. She currently supervises the Holistic Care Team and is part of the leadership team. Cheryl has been a chaplain and bereavement counselor at several hospices for 25 years, 14 at Whatcom Hospice. She is an ordained minister in the UCC.

#### CONCURRENT SESSIONS GROUP 4: 1:50-2:50p 10/25/21

##### **Pediatric Concurrent Care: Helpful Hints to Decrease Your Confusion; Anne Anderson, RN, CHPPN, Nurse Coordinator, Palliative Care Program, Seattle Children's Hospital & Sarah Jackson, Stepping Stones and Carousel, Providence**

Is your hospice program concerned about caring for pediatric patients? Are you confused about pediatric concurrent care? We hope to allay your concerns and answer your questions about caring for pediatric patients in the state of Washington.

**OBJECTIVES:** 1) Increase your awareness regarding the pediatric concurrent care benefit; 2) Identify resources for questions about pediatric concurrent care; 3) Increase your confidence in caring for pediatric patients receiving palliative and hospice care.

**ABOUT THE PRESENTER(S):** Anne Anderson is the nurse coordinator with Seattle Children's Hospital's Palliative Care Program. She worked with Stepping Stones as a pediatric palliative care and hospice nurse prior to joining the Seattle Children's team. She is one of the founders of the Northwest Pediatric Palliative Care Coalition. Email [nwppcc@wshpco.org](mailto:nwppcc@wshpco.org) if you are interested in learning more about how they hope to advance pediatric palliative care in Washington, Oregon, Alaska, Montana and Idaho.

Sarah Jackson is a social worker by training, who has worked in hospice and palliative care as a director of an adult hospice, manager of an adult palliative care program, and now heads up the pediatric programs, Stepping Stones and Carousel, for Providence in King and Snohomish Counties. Stepping Stones and Carousel pediatric programs serve over 100 kids in these two counties. Prior to working in palliative care, she worked with children with special health care needs for over 15 years.

##### **How to Grow Your Hospice Heart Failure Census (Without Growing Your Emergency Readmissions); Joseph Solien, PharmD, BCPP, BCGP, Vice President – Clinical Services, OnePoint Patient Care**

Hospice services are woefully underutilized among eligible patients with end-stage heart failure (HF). Numerous factors, including prognostic uncertainty, late referrals, and misconceptions contribute to this trend. Overcome admission barriers by the sticking to the facts, which coincidentally align with the vast majority of what HF patients consistently tell us they want.

**OBJECTIVES:** 1) Review data demonstrating the underutilization of hospice services among patients with heart failure (HF); 2) List benefits to patients with HF and their families when they elect the hospice benefit in a timely fashion; 3) Discuss strategies to avoid HF decompensation to facilitate symptom control and continued care in the home setting.

**ABOUT THE PRESENTER(S):** Joseph Solien, PharmD, BCPP, BCGP is responsible for OnePoint Patient Care's national clinical services programs, including staff and partner education, formulary design and development, and medication utilization reviews. He is the primary author of the OnePoint Patient Care Clinical Symptom Guide, currently in its 2nd edition.

He began working for OnePoint as a pharmacy student intern in 2004 and became a staff pharmacist after graduation. In 2010, he was promoted to clinical pharmacist and has continued to serve on the clinical team in a number of roles since then.

Joseph earned a PharmD from Midwestern University – Glendale and is board certified in both psychiatric and geriatric pharmacy. He earned a BS in biochemistry and molecular biology and a BA in chemistry from the University of Minnesota – Duluth.

##### **An Update About the Oregon Psilocybin Services Act; Barb Hansen, MA, RN, CEO, Oregon Hospice & Palliative Care Association, Executive Director, WSHPCO**

The Oregon Psilocybin Services Program has a two-year development period where the Oregon Health Authority is responsible for publishing research on psilocybin and its effect on mental health and developing rules and guidelines for the manufacturing, sale, and consumption of psilocybin. WSHPCO Executive Director Barb Hansen, RN, serves on the Oregon Psilocybin Advisory Board as the representative of the Palliative Care and Quality of Life

Interdisciplinary Advisory Council. During this session, Barb will give an update about the activities of the “PAB” to date and discuss the expected timeline leading up to the January 2023 date when license applications may be accepted.

**OBJECTIVES:** By participating in this workshop, participants will 1) Discuss the types of licenses that will be issued by the Oregon Health Authority (OHA) under the Psilocybin Services Act; 2) Discuss at least three factors the Psilocybin Advisory Board must consider when advising the OHA about rules for Psilocybin Service Centers and for Facilitators; 3) Discuss how a hospice patient or a person receiving palliative care services may be able to obtain Psilocybin services when Service Centers open in 2023.

**ABOUT THE PRESENTER(S):** Barb Hansen is an RN who has worked in end-of-life care since 1986 as a nurse case manager, home health and hospice program director, home-care surveyor for the Joint Commission and as a wound-ostomy nurse. Currently, Barb serves as the CEO of the Oregon Hospice and Palliative Care Association and Executive Director of the Washington State Hospice & Palliative Care Organization. In Oregon, Barb also serves on the Palliative Care and Quality of Life Interdisciplinary Advisory Council, the Advance Directive Adoption Committee and the Psilocybin Advisory Board.

**A Blended In-person and Virtual Palliative Care IDT for Rural Hospitals; Gregg VandeKieft, MD, MA, FAAFP, FAAHPM, Medical Director for Palliative Care, Providence Health System, Amber Moody, RN, Providence Mt. Carmel & Adrienne Goldberg, PhD, LICSW, MEd, Tele-Palliative Care Social Worker, Providence Stevens County, Advance Heart Failure and Transplantation at Sacred Heart Medical Center, The Institute for Human Caring**

Rural and critical access hospitals typically do not have the resources to provide on-site specialized palliative care services. Providence Health System initiated a tele-palliative care program to provide inpatient consults by a blended on-site and telehealth model, with a palliative care nurse and chaplain onsite and a palliative care physician and social worker participating by video. The program has been very successful and we hope to expand the service to additional rural hospitals and to develop a similar blended community-based palliative care model. Ample time will be provided for discussion between session participants and faculty.

**OBJECTIVES:** 1) Participants will be able to design a palliative care needs assessment for rural hospitals; 2) Participants will be able to describe program development and clinical delivery of palliative care consults by a blended in-person and virtual palliative care interdisciplinary team.

**ABOUT THE PRESENTER(S):** Gregg VandeKieft, MD, MA, FAAFP, FAAHPM is Palliative Care Medical Director for Providence Health System and practices at Providence St. Peter Hospital in Olympia.

Adrienne Goldberg, LICSW, is the palliative care social worker for Providence Tele-Palliative Care and the Providence Heart Institute in Spokane.

Amber Moody, RN, is the palliative care nurse for Providence Mt. Carmel Hospital in Colville and Providence St. Joseph Hospital in Chewelah.

#### **CONCURRENT SESSIONS GROUP 5: 3:15-4:30p 10/25/21**

**The New Washington POLST: Better Conversations and New Tools; Sharmon Figenshaw, Palliative Care Nurse Practitioner, ARNP, ACHPN & Kelsey Stufflebeam, MHA, Assistant Director, Honoring Choices PNW**

Washington has revised the POLST form giving it a new name: Portable Orders for Life-Sustaining Treatment. Honoring Choices Pacific Northwest has created a clinical set of tools for better use of POLST. Learn how to use the improved POLST and the new toolkit in this interactive session. Leaders from Honoring Choices and POLST task force will also talk about how you can bring these tools as well as the program to teach the Serious Illness Conversation Guide, now available statewide, to your organization and partners.

**OBJECTIVES:** 1) By participating in this workshop, participants will become familiar with the best practices for POLST completion, storage and retrieval; 2) During this session, participants will practice new communication skills to discuss POLST with a person who has a serious illness; 3) On completion of the workshop, participants will be able to guide an individual to treatment options on the POLST that match their stated goals and preferences.

**ABOUT THE PRESENTER(S):** Sharmon Figenshaw has 30+ years in palliative care; 20+ years as Co-Chair for the Washington POLST Task Force. Kelsey Stufflebeam has a background in Population Health and Safety and Quality.

**Informed Assent and Code Status Conversations; Juan Iregui, MD, MA, FAAHPM, Virginia Mason Franciscan Health System & Mimi Pattison, MD, FAAHPM, Virginia Mason Franciscan Hospice and Palliative Care**

Informed Assent rather than informed consent provides the best framework to hold effective Code Status conversations where clinicians lean into their professional responsibility to provide goal concordant recommendations for the role of resuscitation in their care while protecting patient autonomy

**OBJECTIVES:** 1) Participants will be able to distinguish between informed consent from informed assent; 2) Participants will be able to create a communication script to incorporate informed assent in the Code Status conversations; 3) Participants will practice using communication script in Code Status discussions.

**ABOUT THE PRESENTER(S):** Drs. Iregui and Pattison are Hospice & Palliative Medicine Physicians from Virginia Mason Franciscan Hospice and Palliative Care with many years of combined experience taking care of hospice and palliative care patients while coaching and mentoring hospice and palliative care clinicians from all disciplines in communication.

**Palliative Care Across Cultures: Impact of Cultural Practices and Spiritual Beliefs on End of Life Decision Making and Care; Marie Eaton, PhD, Community Champion & Devyani Chandran, MSW, PhD Social Work, Director, Palliative Care Institute**

This presentation describes key learnings from a six part webinar series that explored the intersection between cultural identities and belief systems and their impact on services provided to clients. Presenters will showcase case studies and vignettes from the series that highlight the impact of culture on family decision-making when facing serious illness, death or after death care. We will also discuss feedback received from the 80 participants who attended the webinar series. Implications discussed include the development of anti-bias approaches and the development of specific skills that promote culturally sensitive end-of-life care to diverse communities.

**OBJECTIVES:** On completion of this session, participants will be able to 1) identify varied cultural and spiritual perspectives may impact how different communities and families respond to the same end of life challenges; 2) discuss rapport building and alignment in diverse communities, and how best to provide culturally specific end-of-life care; 3) describe end-of-life decision making processes for immigrants and undocumented individuals.

**ABOUT THE PRESENTER(S):** Dr. Marie Eaton is the Community Champion for the Palliative Care Institute (PCI) at Western Washington University. She was the founding Director of PCI, which partners with other community agencies and volunteers to transform palliative care in Whatcom County and support our human responses to living and dying. Dr. Eaton is also Chair of the Northwest Life Passages Coalition, which builds collaborative networks between agencies that provide care for those facing serious or terminal illness in our region, and a WSHPCO Board member. During her 40 years at Western Washington University, Marie served in a number of other faculty, leadership and administrative roles. As a faculty member at Fairhaven College she taught courses on Death and Dying, which provided the grounding for her current work at the Palliative Care Institute.

Dr. Devyani Chandran is an Associate Professor in the Human Services Program housed in the Department of Health and Community Studies in Western Washington University and the Director of the Palliative Care Institute. Dr. Chandran received her PhD in Social Welfare from the University of Kansas. Her doctoral dissertation explored the experiences of older adults living with HIV/AIDS. She currently teaches courses on Aging and health, interpersonal and small group systems and diversity and social justice dynamics. Dr. Chandran's research focuses on community based approaches to chronic illness, aging, end of life and palliative care. Her research findings have been published in "Social Work and Health Care"; Journal of Palliative

and End of Life Care, Social Work Education, and AIDS and Behavior. She currently teaches courses on Aging and health, interpersonal and small group systems and diversity and social justice dynamics. Dr. Chandran's research focuses on community based approaches to chronic illness, aging, end of life and palliative care. Her research findings have been published in "Social Work and Health Care"; Journal of Palliative and End of Life Care, Social Work Education, and AIDS and Behavior. Prior to joining the faculty in Western Washington University, she was an Assistant Professor at St. Olaf College in Northfield Minnesota.

**VSED: What Patients (And Providers) Want and Need to Know as They Consider This Legal EOL Choice; Nancy Simmers, Death Doula, Co-Founder, Illumined Path Collective, VSED Resources Northwest**

Talking about legal end-of-life choices such as Voluntary Stopping of Eating and Drinking (VSED) is not easy. Often medical providers do not have tools to initiate these conversations or may be restricted because of limited time or institutional guidelines. This presentation provides information about the medical, legal, caregiving, and social preparation needed to proceed with VSED. Participants will also learn about various resources available, including a comprehensive website developed by the new non-profit, VSED Resources Northwest, formed by a group of hospice staff, death doulas, the Palliative Care Institute, and other advocates involved in improving quality of life and healthcare for folks aging throughout WA and the nation.

*OBJECTIVES:* 1) Participants will identify three reasons it is important to have conversations about death undying and EOL options; 2) Participants will list five areas of preparation needed to be completed before beginning VSED; 3) Participants will name two comprehensive resources that can be used to help patients as they explore legal EOL options.

*ABOUT THE PRESENTER(S):* VSED Resources Northwest's co-founder and coordinator, Nancy Simmers, is a Registered Nurse and End-of-Life Doula. Her 40-year nursing career includes being a labor and delivery nurse, a public health nurse for high-risk mothers, a birth doula, a women's healthcare practitioner, and head nurse for a tribal opiate treatment program. As her own parents died, she first recognized the similarities of birth and death – how both are thresholds involving courage, uncertainty, fear, release, transformation and love. Her motivating fervor is for society to accept, discuss, prepare for, and anticipate dying as much as we do pregnancy and birth.

**SESSION DESCRIPTIONS, TIMES – TUESDAY, OCTOBER 26, 2021**

**Green = Administrative/Regulatory Track, Blue = Clinical Track, Purple = Psychosocial, Spiritual, Ethics, Palliative Care & Other Track**

**Plenary Presentation: 9-10a 10/26/21**

**Expanding Democracy in Challenging Times; Leslie Emerick, MPA, WSHPCO Director of Public Policy**

Leslie will be discussing the main elements of a Democracy and how the work that we do as citizens contributes to maintaining one. She will weave in how recent legislation and the public policy efforts by WSHPCO strengthens your profession and promotes palliative care and hospice in Washington state.

*OBJECTIVES:* Upon completion of this session, participants will 1) understand 4 key elements of a Democracy; 2) understand how your participation in the public process strengthens Democracy; 3) understand how the public policy work that WSHPCO does strengthens your profession.

*ABOUT THE PRESENTER(S):* Leslie has 26 years of public policy experience. She has represented WSHPCO since 2007 as a lobbyist and now as the Director of Public Policy. She was a Douglas County Commissioner and a legislative liaison for the state Department of Agriculture and the Department of Health. She has a Master of Public Administration degree, a BA in Speech Communication and Secondary Education with a minor in Political Science. Leslie started her contract lobbying business in 2006 and currently represents multiple health care related associations.

**CONCURRENT SESSIONS GROUP 6: 10:30-11:45a 10/26/21**

**Hospice QRP Standards; Jennifer Kennedy, EdD, MA, BSN, RN, CHC, Senior Director of Quality & Regulatory, NHPCO (virtual live)**

During this virtual presentation Jennifer Kennedy will provide an update on the Hospice Quality Reporting Program. Learn more about Hospice Visits in the Last Days of Life (HVLDL), the Hospice Care Index, value-based reimbursement, the HOPE tool, and how NHPCO's new initiative, Quality Connections can help you be prepared for what's to come.

*OBJECTIVES:* Participants will 1) discuss changes in the Hospice Quality Reporting program for FY 2022; 2) review which measures are "claims-based" and how they will be reported on Care Compare; 3) discuss the HOPE assessment tool and how hospices can prepare for implementation.

*ABOUT THE PRESENTER(S):* Jennifer Kennedy has more than 30 years of experience as a leader and nurse in diverse healthcare settings and has worked in hospice and palliative care for the last 18+ years. Jennifer is the lead for the NHPCO hospice quality program and interacts with CMS and their contractors related to hospice regulatory and quality issues.

**Use of Methadone in Hospice & Palliative Care; Michelle Mikus, PharmD, VP Pharmacy Services, Delta Care Rx**

Methadone has very unique properties that make it a great option for managing chronic and terminal pain in the geriatric population. By equipping clinicians with the knowledge to use it appropriately and safely, patient outcomes and quality of life improves. Learners will be engaged to relate their own methadone use experiences to information about the drug. Questions answered will include: what is methadone and why should we use it? Who is a methadone candidate? When should methadone be initiated? How is methadone safely used? By posing these questions and working through the answers with evidence based recommendations and case examples, the learner will be able to apply knowledge gained to their own patients.

*OBJECTIVES:* 1) Understand methadone and recognize why and how it can be used; 2) Identify methadone candidates, and those that are not a good candidate; 3) Recognize when methadone should be initiated and how to do so safely.

*ABOUT THE PRESENTER(S):* Dr. Michelle Mikus has a wealth of experience in medication therapy, interdisciplinary teamwork and organizational management. She received her Doctor of Pharmacy from the Duquesne University Mylan School of Pharmacy and is working on her masters degree in Public Health from the University of Massachusetts. In her current role, Dr. Mikus oversees the clinical operations of the company and serves as an information resource for pharmacists at both Delta Care and client hospices. Dr. Mikus also has presented at the American Academy of Hospice and Palliative Medicine, NHPCO, multiple state associations, Duquesne University, and a number of hospitals.

**Why We Do What We Do; Tammy Tarsa, MBA, BSN, RN, Executive Director, Jefferson Healthcare HHHPC**

As healthcare workers, over the last 18 months we have put our heads down and have done the work that needed to be done to care for our patients and communities. We've worked long hours and faced changes/new information at a rate never seen before. As we begin to come out of this frenzy, it's important to remember why we do what we do and how we can use that to finish the work that needs to be done and prepare for what's next.

*OBJECTIVES:* 1) Recognize how a "why" statement can build unity in a team; 2) Define their "why"; 3) Experience building a "why" statement.

*ABOUT THE PRESENTER(S):* Originally from Michigan, Tammy Tarsa moved to Port Townsend to work with Jefferson Healthcare's Home Health, Hospice and Palliative Care programs. She has been a nurse for over 20 years and have worked in home health and hospice for 15 of those and with palliative care for 4. Tammy loves to learn and am currently working on a doctorate degree in Healthcare Administration.

**CONCURRENT SESSIONS GROUP 7: 12:45-1:45p 10/26/21****Touch of Grace: Hospice & Palliative Care Training for SNF Staff; Jodi Newcomer, BSN, RN, CHPN, Whatcom Hospice & Marie Eaton, PhD, Community Champion, Palliative Care Institute**

Hospice staff are required to offer educational support about end of life care to staff in skilled nursing facilities. The Touch of Grace program provides a structured curriculum to foster facility wide improvements in palliative care across all SNF staff levels, enhancing patients' access to treatment aligned with their end-of-life choices by increasing timely referrals to hospice services and improving nursing-home-based palliative care when hospice staff are not on site. The curriculum also provides tools for staff self-care as they contend with the challenges of end of life care.

**OBJECTIVES:** On completion of this session, participants will 1) be able to identify appropriate palliative care roles for both licensed and non-licensed professionals in nursing home settings; 2) discuss the roles of non-licensed support staff in the larger palliative care team and best practices that support the development of a palliative culture in organizations; 3) be able to describe staff support and care behaviors that create a safe and secure environment for dying patients and their families.

**ABOUT THE PRESENTER(S):** Jodi Newcomer is with PeaceHealth Whatcom Hospice. She received her ADN at Seattle Central Community College in June 1994. She spent time working at Harborview and then transitioned to a full time Oncology nurse. Her family moved from Seattle to Bellingham in July 2007, and Jodi began her career with hospice. First as a Charge RN and now Program Manager. She has seen significant growth in her program as well as staff. Jodi IS honored to continue to serve her community in this capacity.

Dr. Marie Eaton is the Community Champion for the Palliative Care Institute (PCI) at Western Washington University. She was the founding Director of PCI, which partners with other community agencies and volunteers to transform palliative care in Whatcom County and support our human responses to living and dying. Dr. Eaton is also Chair of the Northwest Life Passages Coalition, which builds collaborative networks between agencies that provide care for those facing serious or terminal illness in our region and is a board member of WSHPCO. During her 40 years at Western Washington University, Marie served in a number of other faculty, leadership and administrative roles. As a faculty member at Fairhaven College she taught courses on Death and Dying, which provided the grounding for her current work at the Palliative Care Institute.

**SORRY...SESSION CANCELED****Is Dialysis Compatible with Hospice? Megan Nolan, FN, BSN, Program Supervisor & Jennifer Christophel Lichti, MSW, LICSW, Northwest Kidney Centers****Hospice-ED-Palliative Care Collaboration, Lessons Learned from the Pandemic; Darrell Owens, Associate Medical Director Palliative Care, DNP & Peter Toth, MD, Medical Director, ER, UWMC, NW Campus**

Patients with chronic or life-threatening conditions who would benefit from palliative interventions present to the emergency department daily. Whenever possible, emergency clinicians should engage patients and their families in conversations about palliative care and hospice services. Early referral from the ED to palliative medicine or, when indicated, to hospice can benefit the quality of life. Such practice is in keeping with the recommendations of the American College of Emergency Physicians. This presentation will discuss the development, challenges, and ongoing collaboration between the ED at the University of Washington, Northwest Campus, their palliative care program, and the local hospice community.

**OBJECTIVES:** On completion of this session participants will be able to 1) identify at least three different opportunities for collaboration between ED, hospice, and palliative care teams; 2) identify at least challenges associated with ED, hospice and palliative care collaboration; 3) discuss the successes and challenges of ED, hospice and palliative care collaboration during the recent COVID 19 pandemic.

**ABOUT THE PRESENTER(S):** Dr. Owens is an international expert in palliative care with over 29 years experience in hospice and palliative care. He has published numerous articles and spoken in the US and Asia on palliative care related topics.

Dr. Toth is a physician board certified in emergency medicine. He has been an active proponent and champion of the integration of emergency medicine and palliative care for years.

**CONCURRENT SESSIONS GROUP 8: 1:45-2:45p 10/26/21**

**WA State Surveyors Regulatory Update - TBA**

**Artificial Hydration in the Hospice Setting, a Multidisciplinary Approach; Brad Macy, RN, BA, BSN, HospiCorp**

The decision to hydrate patients in the hospice setting is a multifaceted interdisciplinary decision that involves psycho-social, ethical, clinical, educational, religious and logistical considerations. This lecture takes an in-depth look at these different considerations and presents a road map for decision making around hydration in the hospice setting to best assure the benefits of hydration outweigh burdens. The lecture examines the different methods available for hydrating hospice patients and the benefits and challenges of these modalities.

*OBJECTIVES:* At the end of this course the participant will be able to 1) discuss the difference considerations involved in deciding the appropriateness of hydration in hospice patients; 2) verbalize understanding of how to talk with patients and families about the benefits and burdens of hydrating at end of life; 3) list the benefits and burdens of different modalities for hydration in the hospice setting.

*ABOUT THE PRESENTER(S):* Bradford Macy, RN, BA, BSN, is a 25-year veteran hospice nurse and the President of Hospi Corporation. For the majority of his career as a hospice nurse Mr. Macy cared for home hospice patients in the after-hours setting where he saw thousands of difficult symptom management cases. Out of a need to better manage symptoms quickly in the home setting he invented the Macy Catheter, a rectal administration catheter designed to administer ongoing fluid and medication rectally. Mr. Macy was awarded the 2013 National Award for Hospice and Palliative Care Nurse of the Year through the National Board for Certification of Hospice and Palliative Care Nurses for his contributions to the field of Hospice and Palliative Care. Mr. Macy has presented on issues related to symptom management at the end of life throughout the country over the last 10 years and has contributed to research in the field including peer reviewed publications in the Journal of Pain and Symptom Management and the Journal of Hospice and Palliative Nursing. Mr. Macy received a special major B.A. in psycho-physiology from California State University, Long Beach in 1987, and a B.S. in Nursing from the University of San Francisco in 1989.

**Palliative Care in the Emergency Department; Ashtyn Mott, BSN, RN, CHPN, Whatcom Hospice**

Does Palliative Care belong in the Emergency Department? Early Palliative care and hospice referrals improve quality of life and reduce stress and symptom burden. This training will review how Palliative Care in the ED works for St. Joseph Medical Center in Bellingham, WA and how it could work for you.

*OBJECTIVES:* On completion of this session, participants will 1) have a basic understanding of how to initiate a nurse-driven palliative care emergency department program; 2) understand the fundamentals of creating a hospice environment in the ED; 3) be able to articulate several approaches to preventing undesired medical interventions.

*ABOUT THE PRESENTER(S):* Ms. Mott started out as an ICU nurse and has been working for hospice for the last six years. She was the hospice liaison for two years at SJMC prior to starting Palliative Care in the ED.

**CONCURRENT SESSIONS GROUP 9: 2:45-3:45p 10/26/21**

**Hospice Nurses and Death With Dignity in Washington State: A Study of Their Understanding, Experiences, and Impacts on Practice; William Lonneman, DNP, RN, Associate Professor and Nursing Program Director, Western Washington University**

This presentation will discuss the preliminary findings of an IRB-approved study conducted by the author in 2021. This study sought to investigate: 1) factors affecting hospice nurses' attitudes and beliefs about Death with Dignity (DWD), the Washington state law that allows terminally ill patients to

choose to end their lives with medication; 2) the effects of participation or refusal to participate in DWD on these nurses and their practice; and 3) ways to support these nurses as they navigate issues arising in DWD. The author sent a survey to the nursing directors of every hospice in the state of Washington, with a request to forward to all hospice RNs. Results were received from 42 nurses from across the state and interviews were conducted with five who volunteered for further discussion.

**OBJECTIVES:** 1) Gain an understanding of the preliminary results of the study; 2) Reflect on their own knowledge and experience of patients choosing DWD; 3) Enter into thoughtful, heartfelt discussion on this issue with others.

**ABOUT THE PRESENTER(S):** The author has been a nurse since 1983 and had his first five years as a nurse at Hospice of Cincinnati. He has been teaching nursing for the past 14 years and recently received tenure and promotion at Western Washington University. His teaching has been recognized by his peers and students as highly engaging and notable for the passion he has for the material. This will not be a lecture, but more of a seminar with frequent interaction. My goal is to continue the conversation on this important topic, to invite the audience members to reflect on how this impacts their own lives and practices, and perhaps to help us all arrive at some direction for how to better support one another as we continue to face Death with Dignity with our patients and families.

### **Agitation & Dementia: Ten Practical Tips From a Hospice Pharmacist; Joseph Solien, PharmD, BCPP, BCGP, Vice President – Clinical Services, OnePoint Patient Care**

Successfully managing agitated behaviors in terminally ill patients with dementia can be incredibly difficult. There's certainly no "silver bullet" or one-size-fits-all approach that can be reliably employed. Discover a novel strategy for taking on this all-too-common issue and increase your chances for success by laying a solid foundation that includes customized solutions and evidence-based drug therapy.

**OBJECTIVES:** 1) List resources and constructs that can be used in the development of customized, patient-specific, non-pharmacological approaches to managing the behavioral & psychological symptoms of dementia (BPSD); 2) Develop a stepwise, pharmacotherapy based approach to managing BPSD that incorporates the following items: Treatment of underlying causes, Evidence-based effectiveness of drug therapies, Explicit use criteria for drug therapies, Drug selection and monitoring; 3) Differentiate common types of dementia and specific BPSD that are associated with each type

**ABOUT THE PRESENTER(S):** Joseph Solien, PharmD, BCPP, BCGP is responsible for OnePoint Patient Care's national clinical services programs, including staff and partner education, formulary design and development, and medication utilization reviews. He is the primary author of the OnePoint Patient Care Clinical Symptom Guide, currently in its 2nd edition.

He began working for OnePoint as a pharmacy student intern in 2004 and became a staff pharmacist after graduation. In 2010, he was promoted to clinical pharmacist and has continued to serve on the clinical team in a number of roles since then.

Joseph earned a PharmD from Midwestern University – Glendale and is board certified in both psychiatric and geriatric pharmacy. He earned a BS in biochemistry and molecular biology and a BA in chemistry from the University of Minnesota – Duluth.

### **Integrative Therapies: Harnessing the Science of the Art of Medicine, Katheryn Lauer, MD, MPH, Yakima Valley Memorial Hospital**

The way people respond to medications, interventions and integrative therapies can vary widely. The medical establishment has historically dismissed this as "the placebo effect." However, the ways we deliver care will profoundly affect how a treatment is received. We can harness this to give our patients the best end of life care possible with everything from subtle changes in medication regimens to addition of targeted integrative therapies.

**OBJECTIVES:** 1) Describe the roles of meaning and context of disease and treatment in treatment efficacy; 2) Identify the function of behavioral conditioning in the mind-body connection; 3) Apply these principles to various integrative and holistic modalities.

*ABOUT THE PRESENTER(S):* Dr. Lauer is the medical director of hospice and palliative medicine at Yakima Valley Memorial in Yakima, Washington and teaches at Pacific Northwest University of Health Sciences. She is board certified in Family Medicine, Hospice and Palliative Medicine and Integrative and Holistic Medicine.