



2018 Conference Breakout Session Descriptions

Session A - Thursday, 10:00 am - 10:50 am

A1. The Grey Areas of ACP: The Collision of Law Versus Medicine - *Diana Nordlund, DO, JD, FACEP, Deputy Corporate Compliance Officer/Emergency Physician, Emergency Care Specialists and Attorney with Nordlund Hulverson PLLC*

A2. "I" Matter: Influences of Integrating Advance Care Planning for Those with Insistent Illness - *Rena Ruehle, BSN, RN, Clinical Operations Specialist, Advance Care Planning, Spectrum Health Hospital*

A3. ACP Conversations: A Gift to Your Loved Ones - *Heidi Brown, RN, ADC, CDP, Director of Activities, Gogebic Medical Care Facility*

Description: Gifts come in all shapes and sizes. When it comes to advance care planning, conversations led by skilled facilitators can produce many gifts: increased patient satisfaction, peace, reduction of stress and anxiety in loved ones, and more. Hearing from the loved one's mouth to the family member's ears how they want to be treated at the end of life is truly a gift to all involved. This session will help you hone your conversation skills and provide the tools you need to help individuals give the gift of advance care planning to their loved ones.

A4. ACP in the Community: The Experience of ACP Programs on What it Takes to Engage Others

- o *Ashley Hunt, RDMS, RVT, BBA, Advance Care Planning Specialist, MidMichigan Health*
- o *James Kraft, Mth., Director, Advance Care Planning & Collaborative Care, Henry Ford Health System*
- o *Carol Robinson, DNP, RN, CHPN, Community Coordinator, Making Choices Michigan*

Description: Convincing people to engage in advance care planning can be difficult work. Whether it is providing education to individuals with the goal of having them participate in a facilitated ACP conversation or creating partnerships with other organizations, engagement of others requires those individuals to take action. In the Community Engagement ACP pilot, communities tested multiple engagement strategies, resulting in over 600 follow-up actions by attendees. Learn how these ACP leaders developed relationships, designed systems, provided education using multiple strategies, and grew ACP programs in their communities.

Session B - Thursday, 11:00 am - 11:50 am

B1. Dementia, Withholding Food and Water, and Overcoming Barriers to VSED by Advance Directive - *Thaddeus Pope, JD, PhD, Director of the Health Law Institute and Professor of Law, Mitchell Hamline School of Law*

Description: Must Michigan healthcare facilities honor written instructions or patient advocate directions to stop hand feeding a patient with advanced dementia? A growing number of end-of-life advocacy organizations are guiding individuals to complete special dementia advance directives that direct "no oral food or fluids" at specified stages of advanced dementia. Voluntarily stopping eating and drinking (VSED) has become increasingly accepted as an "exit option" for patients with capacity. But the ethical and legal status of "advance VSED" is far less established. This session clarifies this under-examined but expanding type of ACP.

B2. Michigan Physician Orders for Scope of Treatment (MI-POST): New Form - *Sunrae Hummel, RN, Clinical Operations Specialist-ACP, Spectrum Health*

Description: With Michigan's new Physician Orders for Scope of Treatment (POST) bill passing into law, it is important that we have an understanding of what POST is and what the new form looks like. With that



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said, let's take a look at the new form and take an even deeper dive into each of its sections. Learn about the target population, how to complete the form, and discuss a few key guidelines.

B3. Care of the Arab/Muslim Patient - *Sam Mossallam MD, MBA, Vice President and Medical Director for International Affairs and Initiatives, Henry Ford Health System*

Description: Providing person-centered advance care planning requires an understanding of how faith and/or culture affects decision-making. In this session, expert Sam Mossallam will provide general information to dispel beliefs about Arab/Muslim patients. He will provide you with an overview of caring for this population, and you will leave empowered to engage in advance care planning with Arabs and Muslims in the United States.

B4. CMS Utilization: ACP Reimbursement - *Ashley Hunt, RDMS, RVT, BBA, Advance Care Planning Specialist, MidMichigan Health*

Description: Recent changes in Medicare reimbursement policies provide opportunities for more clinicians and patients to engage in advance care planning conversations. However, many are confused about where to start. This workshop session is designed to provide participants with a comprehensive overview of advance care planning billing and documentation requirements so they may apply proper utilization in their own practices. Practical workflow examples will be discussed, along with ways to successfully manage patient expectations.

Session C - - Thursday, 12:50 pm - 1:40 pm

C1. Destigmatizing Mental Health Advance Directives - *Nicky Lewis, LMSW, Advance Care Planning Coordinator Mercy Health Saint Mary's Hospital*

Description: Most Advance Care Planning providers are familiar with the rules and guidelines established in the Estates and Protected Individuals Code (EPIC) that pertain to healthcare decision-making, but many are far less comfortable with those relating to Mental Health (MH). This presentation will review the statutory provisions in EPIC related to MH surrogate decision-making, summarize the MH treatment options typically addressed and present the MH Advance Directive Guide - a tool to facilitate understanding and completion of advance directives for MH.

C2. Dying to talk about **it...**"

- o *John Fox, MD, MHA, Vice President, Associate Chief Medical Officer, Priority Health*
- o *Barbara Terrien, RN, BSN, Senior Care Manager, Priority Health*

Description: Despite Federal mandates to ask about advance directives, the overriding goals of assessing and understanding patients' goals, priorities, and preferences for care-especially patients with advanced chronic illness-have been unrealized. To address this issue, Priority Health Care Management launched a pilot project in 2012 that involved the incorporation of advance care planning discussions into telephonic care management conversations. During the pilot, medically complex/frail patients participated in telephonic facilitated discussions of their preferences and goals for medical care with Priority Health care managers. The pilot project produced high levels of patient and provider satisfaction, and >80% patient participation. As a result, telephonic ACP is now a part of standard work for all case managers who receive regular training on holding First Steps® and Last Steps® conversations. Our experience demonstrates successful engagement with members on a historically difficult and formerly taboo topic.



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C3. Staying Fresh: Building Resiliency Into Your Practice – *James Kraft, MTh, Director, Advance Care Planning & Collaborative Care, Henry Ford Health System*

Description: Healthcare workers routinely manage patients with significant suffering, aiming to improve quality of life. However, how do clinicians maintain their personal quality of life and self-manage against burnout and compassion fatigue?

Many clinical disciplines report high rates of burnout, which can lead to issues such as low quality of care, disengaged employees, and high turnover rates. Individuals in the helping professions are subject to unique stressors. Studies show between 16% and 85% of healthcare workers develop compassion fatigue. Often described as "burnout", compassion fatigue, also known as secondary traumatic stress (STS), is a condition characterized by a gradual lessening of compassion over time.

This workshop will seek to assist attendees by helping them assess their personal "level" of compassion fatigue and discover practical tips towards achieving their own personal or professional revival.

C4. Just One Word: Simple Tools for Healthcare Professionals that Can and Will Positively Impact Outcomes for Patients and Caregivers Experiencing Health Challenges

- o *Julie Wallace, Patient Advocate, Making Choices Michigan*
- o *Carol Robinson, DNP, RN, CHPN, Community Coordinator, Making Choices Michigan*

Description: "Nancy" was fast approaching her 92nd birthday. She enjoyed the fruits of a good life; great memories, good friends, a big happy family and relatively good health. Everyone around her accepted her slow, natural decline and had faith that she'd peacefully leave this world just as peacefully as she entered it. Unfortunately, that wouldn't be how Nancy's story ends. Join us as we relive Nancy last days and pinpoint places along her journey where a simple interaction with a frontline professional could have changed her trajectory from text book to ideal.

Session D - Friday, 8:30 am - 9:20 am

D1. Competency, Capacity, and Caregiving; Oh My! - *Stephanie VanSlyke BA, RN, HCEC, Advance Care Planning Coordinator/Ethics Consultant, Munson Medical Center*

Description: Medical decision-making is becoming more complex and the challenges aren't likely to get any easier. Advances in medical technology, growing life expectancy, varying degrees of cognitive impairment, ambiguities in advance directives and blanket capacity assessments challenge our ability to balance the obligation to do no harm and respect patient autonomy. The way in which the questions are asked can be either harmful or helpful. The future of health care decision making may ask us to consider what is the most right thing to do or the least bad thing to do in any given situation, but who gets to decide?

D2. ACP in the PCMH: A Natural Fit - *Karen Riley, RN, Health Management Adviser, Lakeland Care PHO*

Description: The Patient Centered Medical Home model to providing healthcare is relationship based and focused on the whole person. Learn how Lakeland Care has implemented team based care that has resulted in over 460 patients participating in ACP conversations from January – July 2018 alone, and the outcomes these conversations are having on healthcare in our communities.

D3. A Program that is "**OPTIMISTIC**" about ACP - *Monica Ott, MD, CMD, Assistant Professor of Clinical Medicine, Department of Internal Medicine and Geriatrics, Indiana University; Medical Director of OPTIMISTIC*



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Description: OPTIMISTIC is an ongoing \$30.3 million, Centers for Medicare and Medicaid services (CMS) Center for Innovation demonstration project at Indiana University running from September 2012 to September 2020. RNs and NPs were embedded in 19 central Indiana nursing facilities to deliver a multicomponent program to reduce avoidable hospitalizations. These clinical staff utilize the Respecting Choices® model. This session will include information on the OPTIMISTIC program's success in advance care planning that has reduced avoidable hospitalizations as well as the presenter's personalized approach to goals of care conversations.

D4. The Miracles of ACP: How 3 Faith-Based Organizations Explore Faith and Spirituality in the ACP Process

- o *Sanford Freed, BS, CSA, Senior Adviser, Care Patrol of West Michigan*
- o *Cynthia Beel-Bates, PhD, MSN, BSN, Professor of Nursing, Grand Valley State University*
- o *Marcia Veenstra, MSN, BSN, RN, Respecting Choices® First Steps® Facilitator*

Description: This workshop asks the questions: What is the role of miracles in your faith? What is the role of miracles in your worldview? How do miracles happen? In this workshop, a panel of three faith organizations who have implemented ACP processes will discuss the interaction of ACP and faith, how it impacts the facilitation processes and individual decision-making.

Session E - Friday, 9:30 am - 10:20 am

E1. Ethical Dilemmas in ACP – *Tallat Mahmood, MD, Owosso Memorial Healthcare and Karmanos Cancer Institute at McLaren Greater Lansing*

E2. Death Cafe: Changing the Cultural Conversation about Death - *Merilynne H. Rush, MS, RN, BSN, Respecting Choices First Steps Facilitator Trainer, End-of-Life Doula Trainer, Lifespan Doula Association*

Description: Why is it so popular to talk about death with strangers? Reaching people further upstream enhances awareness, preparation and acceptance of death for all adults and increases quality of life. Rush has been hosting the longest standing, continuously meeting Death Cafe in the world since Nov. 2012.

E3. Building Infrastructure for ACP in the Skilled Nursing Home - *Barb Smith, LBSW, MS, NHA, Director of Post-Acute Network, Burcham Hills and Ingham County Medical Care Facility*

Description: In this session, participants will be introduced to the steps necessary to implement an advance care planning program in the skilled nursing home. Tools to analyze gaps in your current processes and design ideas for a future state will be shared. Federal Regulations will be reviewed in regard to tracking advance directives, documenting conversations and implementing person-centered care plans to honor residents' wishes. The presenter will share personal experience in implementing ACP in a life plan community that includes a skilled nursing facility.

E4. Patient Advocacy in Dementia: Helping Families and Healthcare Providers Honor a **Person's** Wishes

- o *Joy Spahn, MPA, Regional Director, Alzheimer's Association-Greater Michigan Chapter-West Michigan Region*
- o *Carol Robinson, DNP, RN, CHPN, Community Coordinator, Making Choices Michigan*

Description: Dementia. The thought of no longer knowing who you, where you are, or who is visiting you is a frightening proposition. The condition is a motivator to complete advance care planning in those who have experienced caring for a loved one with dementia. Individuals with dementia, and their patient advocates, must be well informed on the stages of dementia and their usual progression. Ironically, frontline healthcare



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providers are not always familiar with the stages, or may insert their own personal/cultural biases into a person's care, possibly suggesting treatments that would hamper the natural progression of the disease in its final stages. This, in turn, could lead to the exact "suffering" that individuals fear (e.g. repeat hospitalizations, artificial nutrition, etc.).

This session will use evidence-based dementia curriculum and personal stories to examine when and how patient advocates can effectively speak for a person to promote compassionate care that helps a person live in a way that gives meaning.