

We have reached a tipping point! (Some) current initiatives in Hawaii

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Today's Topics



- Concurrent Care
- Advance Care Planning
- EOA ADRC Aging & Disability Resource Center
- Increase options for care in Hawaii
- Hawaii Island Initiatives
- Kokua Kalihi Valley (KKV)
- Palliative Care usage studies
- Kokua Mau Training
- Palliative Pupus Clinical discussion (Nov. 16)
- KM Spiritual Care Committee
- Healthcare Reform

Concurrent Care – Avoid the 'terrible choice'



- •UHA all members
 - Allows members to continue to get curative treatments but also enroll in hospice.
 - Offers another layer of care
 - Allows people to keep their care team in place
 - Inspired by Aetna studies, "instinctively the right thing to do"
- •Medicaid Pediatric Concurrent Care Hospice Hawaii linking with providers around Oahu
 - Child with a terminal diagnosis (6 months or less) can enroll in hospice AND get care from their Medicaid provider related to their illness.
 - Allows parents to keep their existing team AND utilize hospice expertise

Advance	Care	Plar	ning
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- Education campaign statewide for general public & practitioners about the importance of
 - The CONVERSATION
 - Documenting wishes (AD & POLST)
- Create statewide materials (written, DVD) HMSA support
- Electronic registry of documents (could include on-line creation of POLST)

State Executive Office on Aging

3 part program under ADRC (Aging Disabled Resource Center) umbrella

- Assist adults, people with disabilities and their loved ones make informed decisions about longterm care needs
- Improve coordination and collaboration in the Aging Network between Executive Office on Aging, County offices on Aging (AAAs) and providers
- Allows better linkages with Federal programs including Affordable Care Act, CMS, Admin on Aging

3 Integrated Aging Network Programs

- Statewide Aging and Disabled Resource Center (ADRC)
 - Single Entry point
 - Target those most at risk
 - Offer non-bias LTC information
- 2. Community Living Program (CLP) to keep people home
- 3. Person-centered hospital discharge planning (HDP)
 - Collaboration btw Area (AAA) & discharge planners to stop readmissions

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More options in Hawaii

- St. Francis Outpatient Palliative Care
- North Hawaii Hospital
- Maui Memorial
- Castle Medical Center



- Veterans Administration in patient hospice
- & VA contracted nursing home
- Hospice of Hilo Building an in-patient facility & Hawaii Palliative Care Ctr.

Hawaii Island – "huge amount of synergy"



- Hospice of Hilo new in-patient facility incl Hawaii Palliative Care Center
- Beacon \$16 million catalyst to improve coordination of care, communication, quality
- Independent Physicians (IPA) ACP in the office
- North Hawaii Hospital Palliative Care Program
- Kona Hospital expanding pal care

Kokua Kalihi Valley

- Not-for-profit community health center
- Established in 1972 by residents of Kalihi Valley
- 8 million annual budget
- 330 federal funds
- For residents of Kalihi Valley & Southeast Asians islandwide www.kkv.net



Need in the Community

- Disabled, Homebound persons
- Limited/no access to healthcare
- Stigma
- Caregivers high stress and burden
- Financial burden



Home Based Palliative Care

Who is eligible?

- Homebound/bed bound patients of Kalihi Valley
- Young and disabled
- Frail elderly
- Chronic advanced illness Neurological, cardiac, pulmonary, renal
- Terminal illness cancer

The Core Team



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Program Goals

- To provide palliative care irrespective of the ability to pay
- To deliver culturally sensitive care to Kalihi Valley residents that would relieve emotional, spiritual, personal and physical suffering
- To inform patients and families of all reasonable choices including hospice care
- To help clients die in comfort, with love and dignity



Benefits of Home Setting

- Increased patient and family control of medical care
- Familiar surroundings
- Decreased isolation
- No need to observe visiting hours
- Less exposure to iatrogenic infections
- Less expense if family member provide most of the care

Home Based Palliative Care -Services Provided

- Primary care
- Case Management
- Respite/Companion services
- Caregiver support groups
- Pastoral services
- Bereavement services
- Education students, residents, fellows

Caregiver Support Groups



Health Maintenance Groups



Results

 46 patients and 45 caregivers enrolled in study, Feb 2007 – Feb 2008

Results

- High caregiver satisfaction
- Improvement in symptoms
- Significant improvement in well-being, AD completion, document code status
- Improvement but not significant in symptoms, functioning, transcendence
- Decrease in ER and hospital usage

Hawaii - Palliative Care Studies 2 articles by Bell, Kuriya, Fischberg

Journal of Pain and Symptom Management

- 1362 consults with cancer patients @ QMC
- Conclusion is **Consultation Intensity**:
- Strongest predictor of hospice referrals & code status changes
- Reduced the ethnic variations associated with hospice referral

Pain management possible for all ethnic groups

Journal of Palliative Medicine

• 4658 patients of pain and palliative care patients btw 2005-2009 @QMC

Conclusions

- Pain outcomes were similar or better among non-white races than whites
- Surgical patients reported more final pain than cancer patients

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Kokua Mau Initiatives



- Training tailored to organization
 - North Hawaii Hospital
 - Healthways
 - Topics include communication, quality measures, building your program, pain & symptom mgmt
- Palliative Pupus
 - Clinical case discussion –build skills, network Nov. 16
 - Topic: withholding and withdrawing
- Dementia Task Force EOA

KM Spiritual Care Comm.



- Spiritual care providers from around the state
- Coordinate & collaborate between providers
- 2011 Research project on 22/23 facilities
 - Results upstairs in a poster
- Contact Clarence Liu lunch
- Face-to-face mtg planned for 2012



On the horizon



Healthcare Reform

- ACOs Accountable Care Organizations
- CMS reform (Oct 2012 penalize hospitals for readmissions)
- PCMH Patient Centered Medical Home

In Hawaii

• Collective Impact – Kupuna Work Group