

# Pandemic Palliative Care: Survey of the Field in National Context

Diane E. Meier, MD

Brynn Bowman, MPA

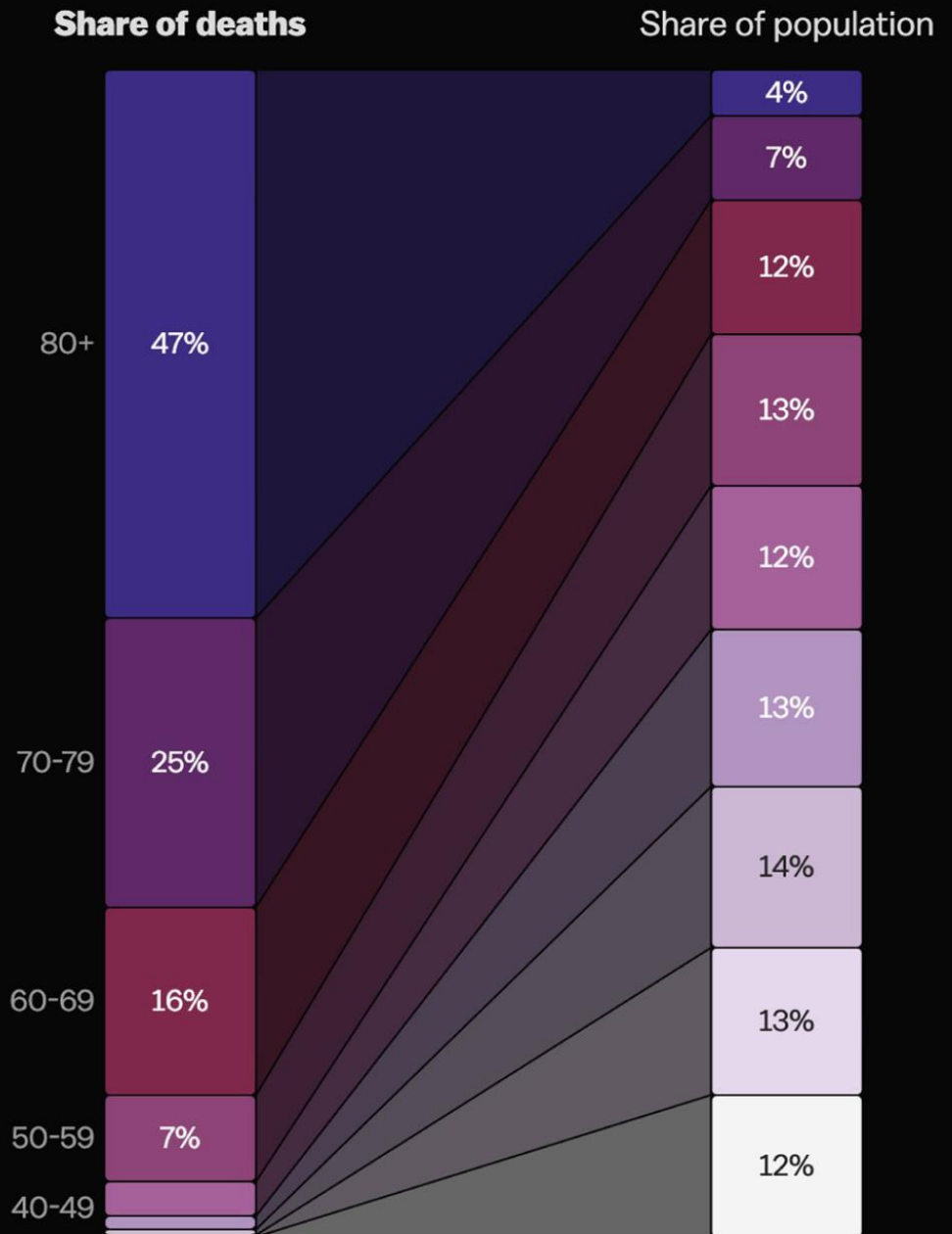
February 25, 2021

# One short year

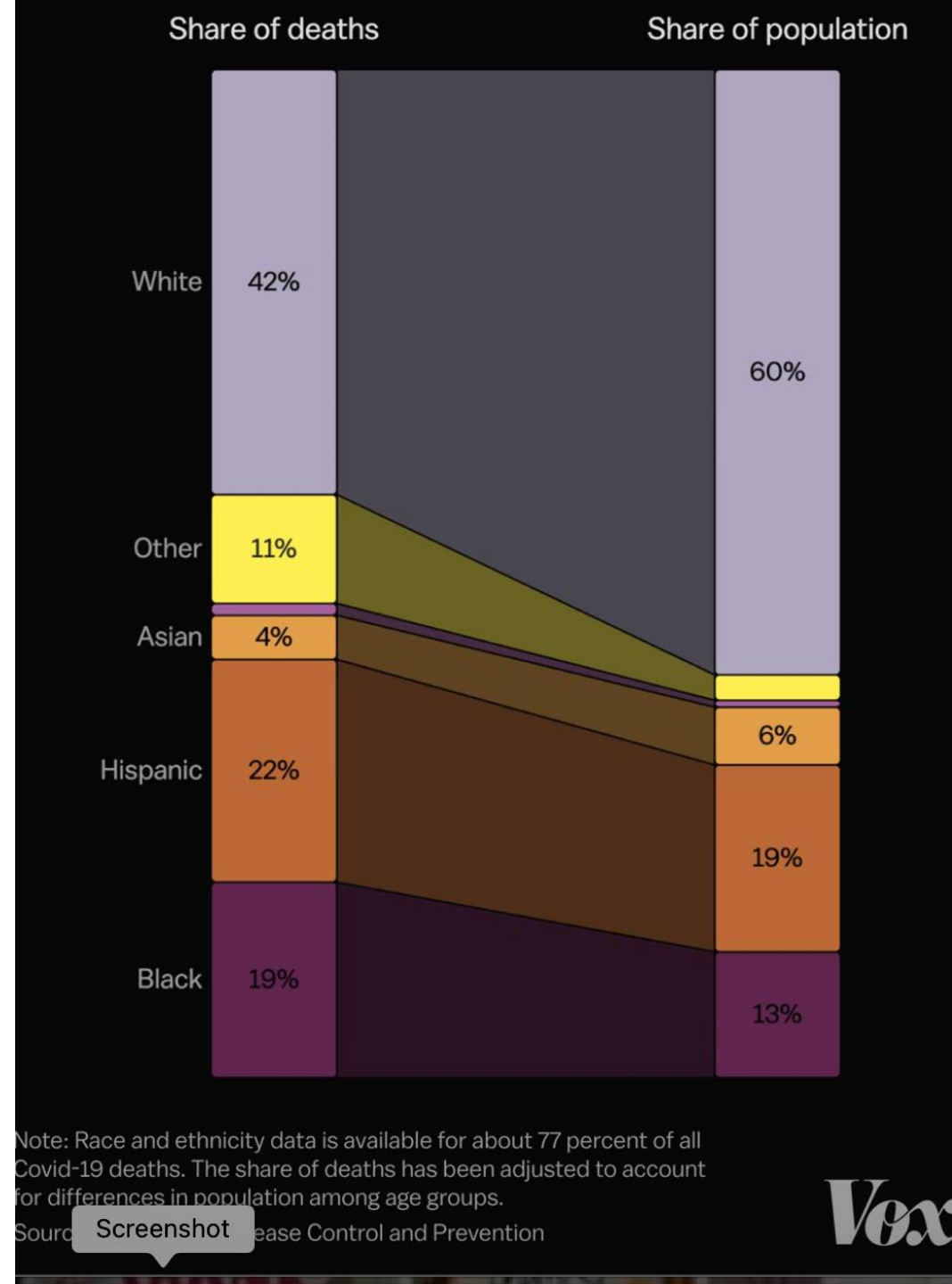
**The US leads the world in cases and deaths.**

U.S. = 4% of the world's population, but accounts for 20% of global deaths from COVID.

# COVID Death Distribution



# Share of Deaths by Ethnicity



# US Life Expectancy

- Decline by 1 year overall
- Decline for Black people: 2.7 years, erasing all the gains of the last 25 years



## Thread



**Andrea Mitchell**  @mitchellreports · Feb 18 

On drop in life expectancy, Dr. Fauci: "Right now COVID-19 is the leading cause of death in the United States, which is just extraordinary. It's sad and it's tragic. And actually, when you look at the decrease in the life expect expectancy..." (1/2) [#AMRstaff](#)



**Andrea Mitchell**  @mitchellreports · Feb 18 

Dr. Fauci: "...it's absolutely real and directly related to COVID-19. The differential among people of color versus white again underscores the disparities." (3/3) [#AMRstaff](#)



# Impact on the Healthcare System

- More uninsured (70 million already un- or under-insured pre-pandemic + 15 million losses of ESI due to COVID)
- Financial losses for providers due to reduced volumes and worsening payer mix
- Worsening racial/ethnic disparities
- Public health infrastructure failure

Blumenthal et al. COVID-19- Implications for the health care system NEJM 2020;383:1483-8.

# Modern Healthcare

NEWS

INSIGHTS

TRANSFORMATION

DATA/LISTS

OP-ED

AWARDS

EVENTS

LIST

February 24, 2021 03:44 PM | UPDATED 2 HOURS AGO

## COVID-19 could dent hospital revenue by at least \$53 billion in 2021, AHA says

ALEX KACIK





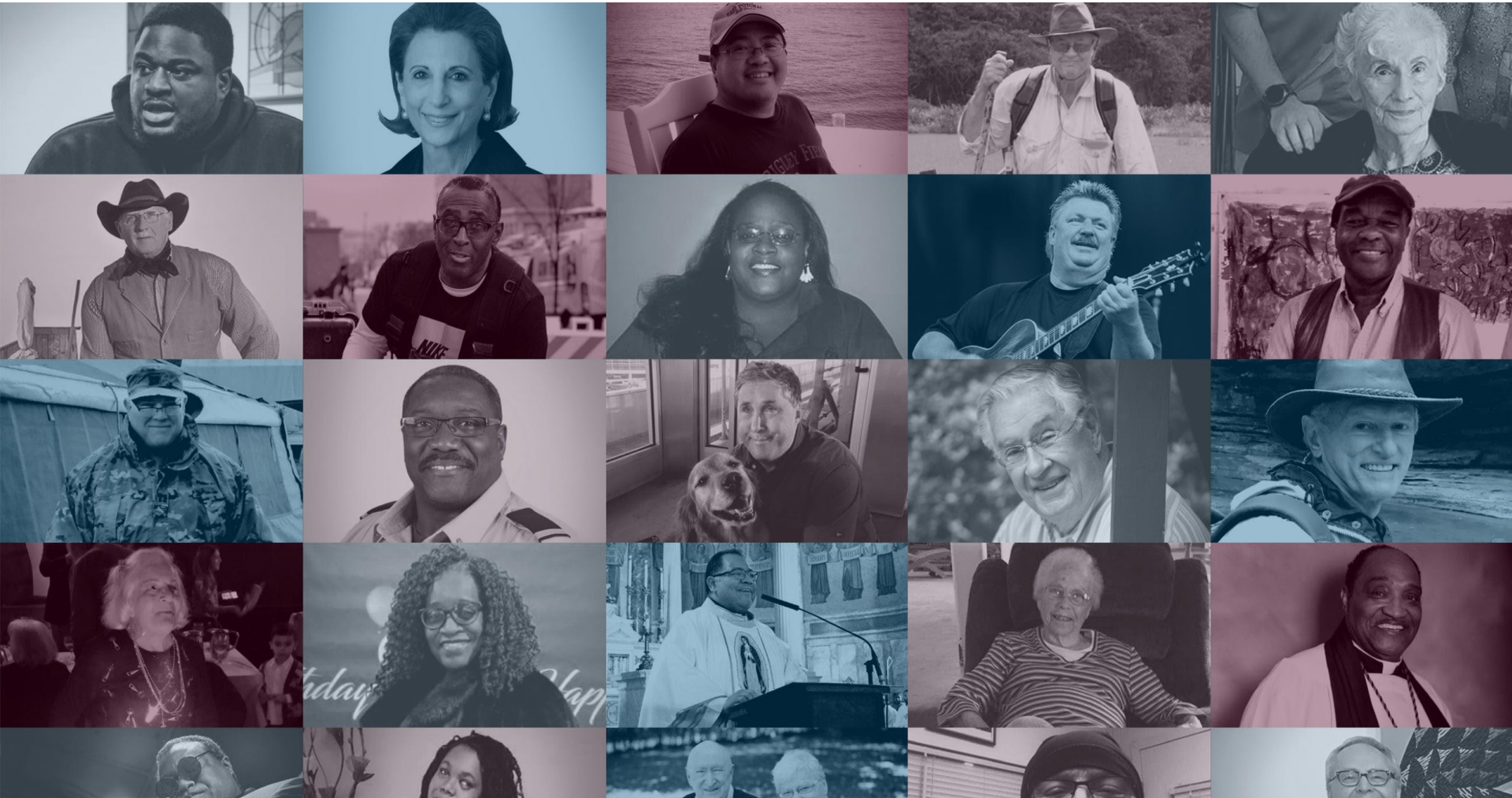
# 2021 Predictions (for what they're worth...) & implications for the legacy health care system

- Move towards **mandatory VBP**
- Partner with payers or become self-insured
  - **Requires** skills in contracting, risk management, care management, advanced analytics
- Domestic production/supply chains
- Public health infrastructure build
  - Technology modernization
- Access = Telehealth → 28 fold increase in last 1 year
  - Primary/specialty/remote monitoring/direct to consumer engagement
  - Major **private sector and PE competition** with legacy systems

DeVore S. Health care in 2021: Five trends to watch. Health Affairs Blog 01/20/21

# Why Americans are numb to the staggering coronavirus death toll

Death is everywhere and yet nowhere in America during the worst stretch of the pandemic







# Our Country is Grieving

**“...there have now been in the United States alone, 500,000 COVID-19 related deaths. For each COVID-19 related death, there are an average of nine people grieving. Thus, today, we remember those who have died from this isolating disease and hold space for the 4,500,000 friends and family who are grieving.”**



**NHPCO**

National Hospice and Palliative  
Care Organization



**NHPCO News**  
@NHPCO\_news

"NHPCO and its interdisciplinary team of members grieve alongside our nation and world," @EdoBanac . NHPCO shares a video message of remembrance: [youtu.be/P41xmfSXsZY](https://youtu.be/P41xmfSXsZY) #hospice #hpc #grief #bereavement.

8:02 AM · Feb 22, 2021 · Twitter Web App

6 Retweets 2 Quote Tweets 7 Likes











[https://swhpn.memberclicks.net/index.php?option=com\\_mcform&view=ngforms&id=2051485#/](https://swhpn.memberclicks.net/index.php?option=com_mcform&view=ngforms&id=2051485#/)

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Grief & Bereavement

## Call for a National Grief Strategy

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### A National Grief Strategy: The Time Is Now

COVID-19 has affected how we live, and how we grieve. The public health restrictions in place to contain the virus, while absolutely necessary to flatten the curve, have affected the grief experience of the families and friends of the more than 300,000 Americans who have died of COVID-19 thus far, and of the thousands of others who have died of other causes during the restrictions. Also affected are those facing a life-limiting illness while alone, and those grieving an expected death of someone they cannot visit. As we are realizing that COVID-19 is here to stay, we are recognizing its impact on how we grieve: the visiting and goodbyes that didn't occur, the family gatherings that weren't allowed, the funeral rites limited or delayed, the grief suffered in isolation.

# IMPLICATIONS FOR PALLIATIVE CARE

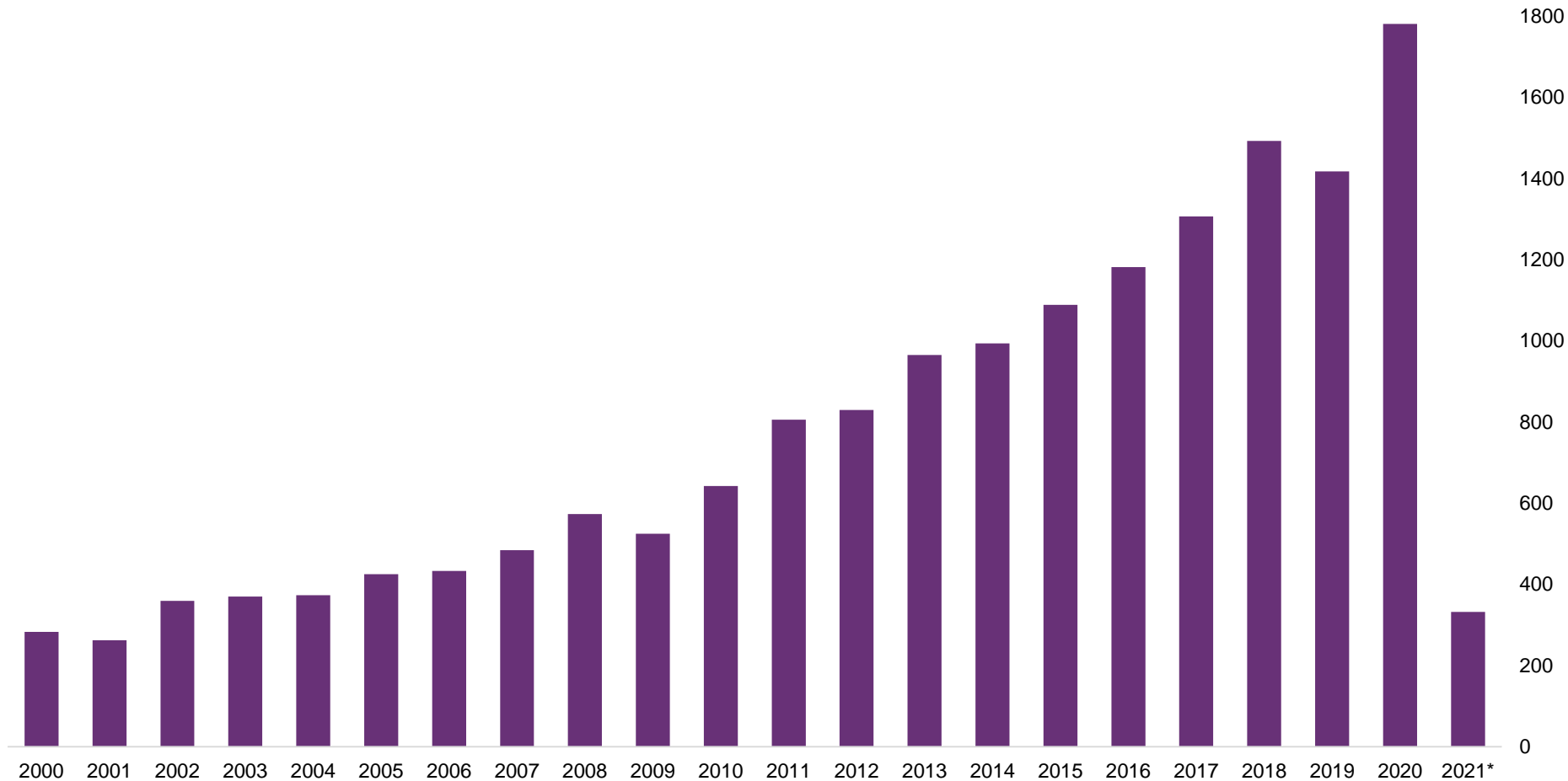
# **We are media darlings: Mainstream coverage of palliative care in 2020**

**>1,538 stories on role of palliative  
care during the pandemic in major  
media**

**>678.5 million views**



# PubMed Search Timeline: “Palliative Care” in Article Titles



\*As of February 22, 2021

# COVID-19 Survey: Round Two

Sent in 3 waves to 2,000 organizations  
between December 2020 – January 2021

Response rate = 10%

*Thanks to CAPC's Maggie Rogers MPH and  
Rachael Heitner MA for the design,  
implementation, and analysis of this survey*

# SURVEY PARTICIPANTS

# Parent organizations

- Hospital/Health System: **56%**
- Hospice: **19%**
- Office Practice or Clinic: **10%**
- Other: **15%**

# Care settings

- Hospital: **76%**
- Patient's Home: **58%**
- Office Practice or Clinic: **49%**
- Assisted Living Facilities: **47%**
- Nursing Homes: **44%**

# Patient populations served

- Adult: 94%
- Pediatric: 27%

# SURVEY RESULTS

# 6 Key Findings

1. Many new COVID-related responsibilities
2. Increase in volume
3. Some adverse effects on program function
4. High confidence in future viability
5. Worry about team well-being
6. Value of palliative care much more visible



**Key Finding:** Palliative care programs were engaged in many new COVID-related activities.

# COVID-19 Related Activities

Palliative Care Program Activities	Spring 2020	Winter 2021
<b>Provided telehealth</b>	<b>76%</b>	<b>87%</b>
<b>Supported other clinicians' emotional wellbeing</b>	<b>60%</b>	<b>74%</b>
Elicited COVID patients' goals of care	<b>67%</b>	<b>72%</b>
Moved existing patients to telehealth	<b>79%</b>	<b>71%</b>
Provided education or clinical tools to non-palliative colleagues	<b>65%</b>	<b>66%</b>

# COVID-19 Related Activities

Palliative Care Program Activities	Spring 2020	Winter 2021
<b>Participated in organizational COVID-19 crisis planning</b>	<b>69%</b>	<b>63%</b>
Expanded ICU presence	46%	46%
Expanded ED presence	25%	25%
Expanded program coverage hours	-	22%
Started palliative care hotline	8%	16%

# Key Resources

The screenshot shows the CAPC website's COVID-19 Response Resources Hub. The header is dark blue with the CAPC logo and navigation links. The main content area is titled 'Telehealth and Palliative Care' and features a list of toolkit items, each with a blue plus icon to its right. A light blue box highlights the 'What's in the Toolkit' section and its list items.

Access CAPC's COVID-19 Response Resources Hub

capc

Resources Clinical Training Connect Events Jobs Membership About

## Telehealth and Palliative Care

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Palliative  
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### What's in the Toolkit

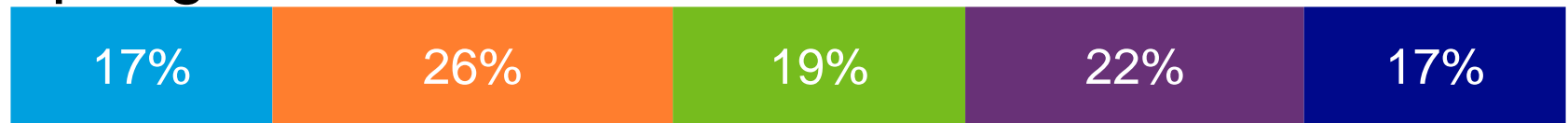
- Setting Up a Program +
- Preparing Patients and Families +
- Conducting Telehealth Visits: Etiquette +
- Conducting Telehealth Visits: Remote Physical Examination +
- Telehealth Documentation and Billing +

[capc.org/toolkits/telehealth-and-palliative-care/](https://capc.org/toolkits/telehealth-and-palliative-care/)

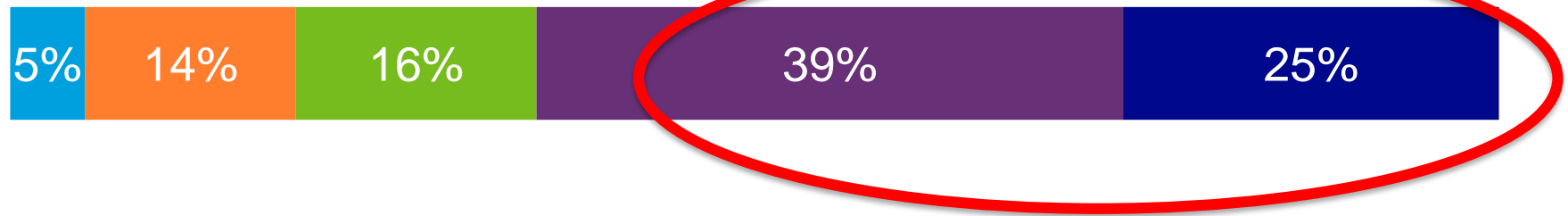
**Key Finding:** Consult volumes increased in 64% of programs.

# Net Impact of COVID-19 on Consult Volume

Spring 2020



Winter 2021



- Significantly Decreased
- Decreased
- No Change
- Increased
- Significantly Increased

**Key Finding:** Some report adverse effects on program function.

# COVID-19 Program Effects

- Hiring freeze: **23%**
- Decrease in referral base or consult volume: **19%**
- Program budget reduced: **12%**
- Staff furloughed: **11%**

But **52%** report none of the above.



# Sustainability: Practice Flawless Program Basics

## Practicing Flawless Basics: Palliative Care Sustainability in the COVID Era

Taking actions in areas the team has control over creates certainty during uncertain times. Focusing on the fundamentals of **program management and operational effectiveness** help stabilize the team, and demonstrate program responsiveness and accountability to the organization.

### Four Places to Start

1. Stakeholder Alignment

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2. Program Financing

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3. Operational Efficiency

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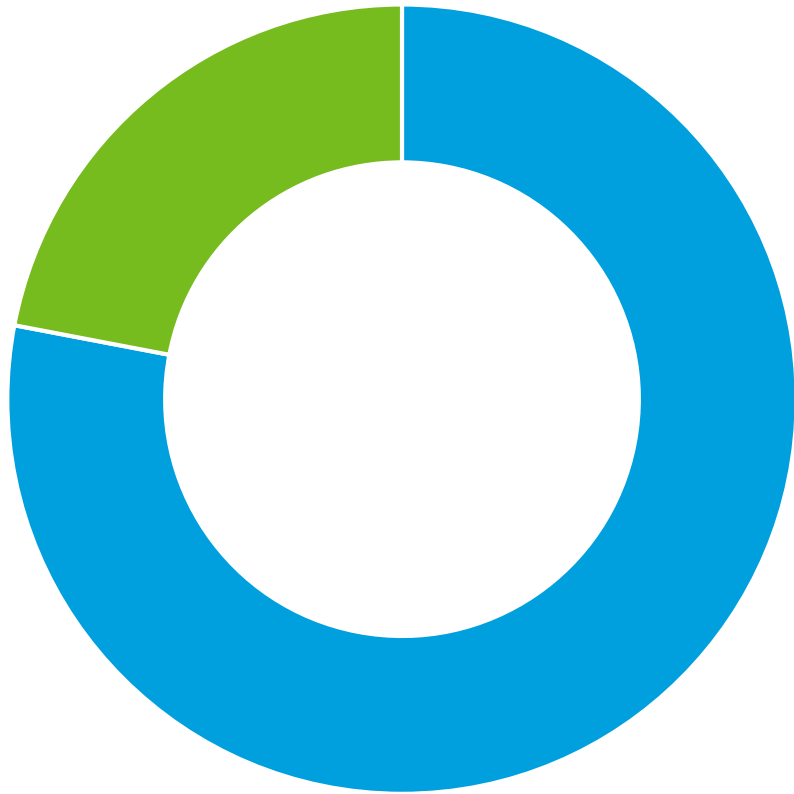
4. Team Health

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**Key Finding:** 78% of participants are confident about the future viability of their palliative care program.

# Palliative Care Program Viability



**78%** of survey respondents are **not** concerned about the viability of their palliative care programs post-COVID

**Spring 2020: 68%**

# Eyes on the Prize: Stakeholder engagement is key

## Planning Forward in the COVID Era



While the coronavirus has created financial and operational uncertainty across US health care, it has also highlighted the value of palliative care for patients, families, clinician colleagues, and organizations.

Strategic palliative care programs will seize the moment to proactively engage stakeholders, reinforce program value, and improve on program basics. **This toolkit provides a three-step process for stabilizing and strengthening your program.**



### What's in the Toolkit

1. Understand the Environment



2. Engage Stakeholders



3. Practice Flawless Program Basics

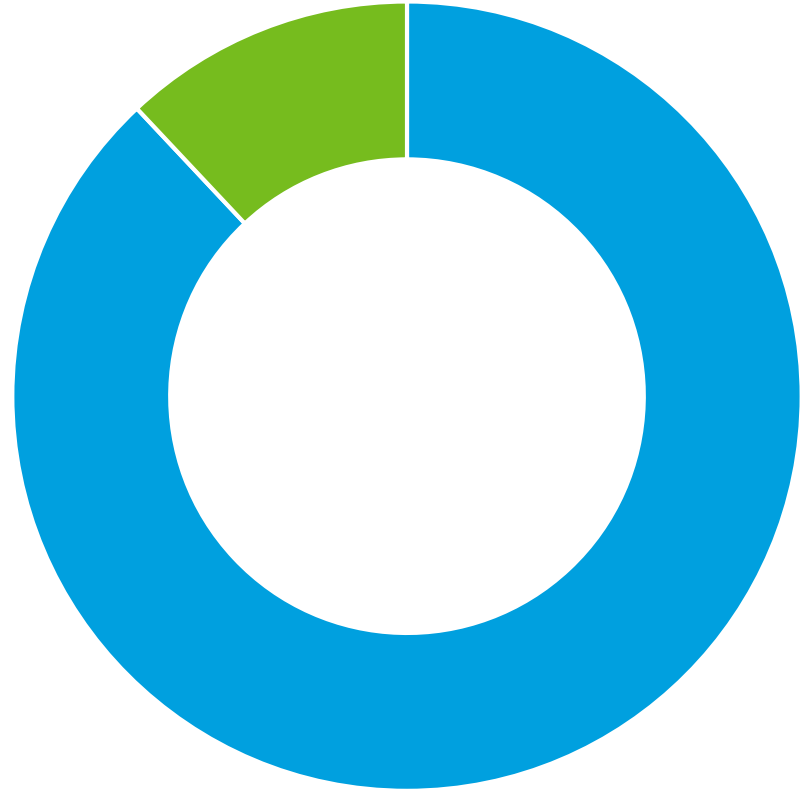


[capc.org/toolkits/planning-forward-covid-era/](https://capc.org/toolkits/planning-forward-covid-era/)

**Key Finding:** The emotional health of palliative care team members is a concern and priority for leadership.

# Team Resilience and Wellbeing

**88%** of survey respondents are tracking the emotional health of their palliative care team members



# How is your team coping?

While 71% say their staff demonstrate **resiliency** and emotional **wellbeing**,

## The Highs and Lows of Emotional Health

60% also say their staff demonstrate a sense of **burnout** and/or **distress**.

and 65% also say their staff demonstrate a sense of **loss** and **grief**.

# Emotional PPE Resources for Clinicians, Teams, and Organizations

< COVID-19 Rapid Response Resources Hub

## Emotional PPE



Resources for improving team  
and trauma.

Get [immediate help](#) if you are i

### Coping in Crisis <sup>NEW</sup>

Strategies for resiliency during COVID-19



### Clinician Grief <sup>NEW</sup>

Grief resources for health care workers



### Team Health <sup>NEW</sup>

Strategies for supporting team health during COVID-19



### Organizational Wellness <sup>NEW</sup>

Resources for supporting health professionals org-wide





# NEW: Training to Facilitate Well-Being Debriefings

## WEBINARS

### Part 1: Learn How to Facilitate Well-Being Debriefings within Your Organization

#### WHEN

Wednesday, March 3  
noon - 1 p.m. ET

REGISTER

#### Presented By



Victoria Leff, MSW, LCSW, BCD,  
APHSW-C

Executive Director, Advanced  
Palliative Care & Hospice  
Social Work Certification  
Program  
Adjunct...

The COVID-19 pandemic is taking a stunning toll on the emotional well-being of health care workers. Many of us are looking for proven strategies to mitigate the natural stress, empathy strain, and moral distress that we are experiencing.

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workers; how to get buy-in from leadership; the debriefing format and role of the facilitator; how to validate the normal, expectable stress that accompanies our work; and how to navigate challenging group situations.

## WEBINARS

### Part 2: Learn How to Facilitate Well-Being Debriefings within Your Organization

#### WHEN

Thursday, April 1  
noon - 1 p.m. ET

REGISTER

The COVID-19 pandemic is taking a toll on the emotional well-being of health care workers. Many of us are looking for proven strategies to mitigate the natural stress, empathy strain, and moral distress that we are experiencing.

**Key Finding:** COVID-19 has underscored the benefits of palliative care.

# The impact of palliative care

“We didn’t realize that someone still provided medicine that spoke to the experience of the patient and family.”

“You have been a bright spot in a dismal time.”

“My only regret is that we did not engage them much, much sooner.”

“You were the only ray of light.”

“Thank you for advocating for me.”

“I feel less alone.”

“We didn’t feel like anyone was hearing us before you talked to us today.”

“I always feel more comfortable when I know palliative care is involved.”

# 6 Key Findings

1. Many new COVID-related responsibilities
2. Increase in volume
3. Some adverse effects on program function
4. High confidence in future viability
5. Worry about team well-being
6. Value of palliative care much more visible

# Take home messages

- Grief is all around. Refer people for bereavement support. Local hospices may be able to help.
- Never let a crisis go to waste - become best friends with your C-Suite, ask for their advice and counsel
- Your team is -- by far -- your most precious resource. Invest in their well being. Learn to lead Clinician Debriefings.

# Questions for you

- What's one word that describes how you are feeling about your work?
- Have there been any silver linings of this pandemic?
- What's one thing you will never take for granted again after this is over?
- How can we help?

# CAPC Resources

## Upcoming Webinars:

- [3/1 Part 1: Learn How to Facilitate Well-Being Debriefings within Your Organization](#)
- [4/1 Part 2: Learn How to Facilitate Well-Being Debriefings within Your Organization](#)

## On-Demand Webinars

- [Managing through COVID-19](#)
- [The Impact of COVID-Related Grief on Palliative Care Clinicians](#)
- [Managing Expectations in Uncertainty](#)

## Virtual Office Hours

- [Managing Through the COVID-19 Crisis](#)
- [Improving Team Effectiveness and Resilience](#)

# CAPC Resources

## COVID-19 Rapid Response Resources Hub

- Communication, Symptom Management, Emotional PPE, Health Equity, etc. *FREE to all*

**Toolkit:** [Planning Forward in the COVID Era](#)

**Clinical Training:** [COVID-19 Response Training](#)

**Tool:** [Understanding Distress in the COVID-19 Pandemic](#)

## **Blogs**

- [Top 10 Resources to Help You Through the COVID-19 Surge](#)
- [How to Plan for Your Program in Periods of Uncertainty](#)
- [How to Support Your Organization's Emotional PPE Needs during COVID-19](#)
- [Using Palliative Care to Support Equitable Care in the Midst of COVID-19](#)