# State of Ohio

# Palliative Care and Quality of Life Interdisciplinary Council

# Meeting Minutes

February 28, 2020

1. Call to order

Sarah Friebert called to order the regular meeting of the Palliative Care and Quality of Life Interdisciplinary Council at 10:03am at ODH, 246 N. High St., Columbus.

1. Roll call

Sarah Friebert conducted a roll call.

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| Jill E. Anderson | Phyllis Grauer (by phone) | Debra Oriold | Kristi Strawser |
| Mark Curtis | Gayle Greenhagen | Chirag Patel | Kathy Thornton (by phone) |
| Susanne Evans | Charles von Gunten | Paul Ray | Karen Wonders |
| Sarah Friebert | Medford Mashburn | Zach Rossfeld | Alexander Wolf |
| Jessica Geiger-Hayes | ~~Christy Michaels~~ (resigned) | Laura Shoemaker | Adonyah Whipple |

The following Ohio Department of Health members were present:

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| Selina Jackson | Heather Coglianese | James Hodge | Mark Hurst |
| Wanda Lacovetta | Shannon Richey | Other: Jill Price | Other: |

1. Approval of minutes from last meeting

Sarah Friebert referenced the minutes from the last meeting having been distributed for review. Corrections, if any, were asked for and there were none. Charles moved to approve and seconded by Gayle. The minutes were approved as distributed by voice acclamation.

1. Open issues
   1. Work Group reports
      1. Communication
         1. Global aim: all Ohio residents can communicate the value of palliative care
         2. Still working on a smart aim with regard to improvement and the work group recognizes a challenge with data acquisition
            1. Question from Susanne about timing for CAPC re-survey. Sarah informs that CAPC’s National Palliative Care Registry will collect again this year. Thereafter, disparate registry efforts will be joining to form the Palliative Care Quality Collaborative, expected to be up and running 2021 (paywall anticipated).
         3. There is recognition that the drafted smart aim overlaps to a good deal with education group. As such, a next step will be for the Communication and Education work groups to collaborate on a shared key driver diagram for education.
         4. Reviewed the primary drivers which include stakeholders (patients, caregivers, health care professionals, payers, state government), the definition of palliative care in Ohio [3712.01 (E)](http://codes.ohio.gov/orc/3712.01), and to develop a palliative care questionnaire for Ohio residents.
         5. Discussion from the group on the secondary drivers being considered by the Communication Work Group. There is a general consensus to sketch out a quality floor that the Director of Health can approach. While there is a “Wild West” situation with palliative not having Conditions of Participation in the same way that the Medicare Hospice Benefit does, let it be motivating that we are asked to draw the map. ODH staff also provide input about the final recommendations out of the PCQLIC to the Director being at a high level and not requiring primary data acquisition.
      2. Current State
         1. Kristi and Charles outline the work of this Work Group. There has been a clear narrowing of the Smart Aim:
            1. To empower the Director to initiate ongoing analysis and communication of the barriers to ensuring high quality palliative care for all Ohioans.
            2. The secondary drivers are not yet built out though a healthy start on primary drivers is underway.
         2. Sarah talks about how we expect differential amount of work, timeline for the Work Groups to exist. The Current State may be more succinct than others as our message can be shared in a collaboration/coalition-building model across the bureaucracy.
      3. Education
         1. Smart Aim is to increase the number of palliative care educational resources in Ohio for all stakeholders by (TBD) December 2020
         2. There is broad PCQLIC support for the secondary drivers (action steps) being offered by the Education Work Group.
            1. Laura asks, “review existing publicly available consumer websites…, how does that relate to the primary aim of education?” Response around knowing what messaging the public can see vs. where the conversation should be around what palliative care is and how it is provided.

Suggestion not to compare but rather compile a list such that PCQLIC could reach out to the websites in recommending ideal messaging

This list will also inform the stakeholders for palliative care in Ohio

This suggestion around narrowing scope to a higher level by eliminating, “determine consistencies and discrepancies,” extends to another secondary driver

* + - 1. The group will change “endorse” to “recommend” throughout.
    1. Payment
       1. Smart aim to recommend sustainable reimbursement models for palliative services delivery for all Ohioans
       2. Discussion around defining the denominator and whether codes are also paid in addition to providing tracking/utilization information
       3. Recommendation to also include waiver programs crosstalk to gap analysis of financially sustainable care models
       4. Further discussion around unintended consequences of palliative payment reform as it relates to workforce, impact on other care revenues including hospice
       5. “Recommend outcome measures” is a part of the Group’s plan to build in a plan to monitor accountability
    2. Policy
       1. Zach had to leave early and minutes are not available here.

1. New business
   1. Ohio’s Comprehensive Cancer Control Plan 2021-2030
      1. Briefed today by Jill Price from the Bureau of Health Improvement and Wellness
      2. The 2015 Cancer Control Plan is due to be updated. This will now be a 10-year rather than 5-year Plan.
      3. Ms. Price invites the PCQLIC for input on the 2021-2030 Plan:
         1. Complete a survey
            1. 3-5 minutes, seeing input on, “hot button needs”
            2. <https://my.evalsurvey.com/ohiocancerplan>
         2. Two key meetings in March
            1. March 11 – ODH Cancer Briefing, 9am – 12pm at ODH 246 N. High St., Columbus

Adonyah and Zach to attend

* + - * 1. March 12 – Ohio Partners for Cancer Control (OPCC), 9am – 3pm at Ohio Center for Occupational Safety and Health in Pickerington

Gayle and Kristi to attend

* + - * 1. It is not necessary to attend both meetings
      1. Consider a role leading the development of Cancer Plan objectives related to Palliative Care (as chair or co-chair)
      2. Questions from the group:
         1. A roster of current members will be helpful, Ms. Price will send.
         2. More background on the origin of the Cancer Control Plan, please

Ms. Price provides a brief organizational overview at ODH for cancer control. Comprehensive Cancer Control is funded by CDC and is charged with creating a statewide coalition, with broad representation, to develop a cancer plan

Wide breadth as to what the Cancer Plan can include

is volunteer-based and meets three times per year

There are subcommittees that meet more often

* + - * 1. Who has responsibility for implementation of the OPCC?

Not necessarily ODH though what is included in the Plan carries the approval of ODH

Clarification as to what accountability pieces come with the OPCC.

Discussion around the OPCC as a guide or metric or best-practice repository which functions as a guideline and reference without, necessarily, authority over something like accreditation

* 1. PCQLIC Annual Report 2019
     1. Motion to approve by Charles, seconded by Paul, and approved by voice acclamation!
  2. Filling a Vacancy
     1. Selina has reached out to legislative liaison to replace Christy Michaels, who has resigned, with a fellow social worker
  3. Future Meeting Dates
     1. Sarah proposes amending future schedule such that work group meets for roughly thirty minutes before a large group meeting. Also, moving to every other month schedule.
        1. Discussion around every other month vs. quarterly. Sarah directs us toward every other month as a step-wise approach to balancing our council’s progress and our day jobs.
        2. Next meeting will be April 24th at ODH, 246 N. High St.
        3. Each Work Group can decide whether to have a check-in call rather in the interim to support work on the key drivers in context of Open Meetings regulations.
  4. Advocacy
     1. Zach asks about our ability to “advertise” to our state or regional professional organizations and local news outlets? The spirit here being to get the message out about palliative care and highlight that our Council exists rather than discussing our current work in specific detail as that is what our Annual Reports will reflect.
     2. Heather will discuss with Communications and report back

1. Adjournment

Sarah Friebert adjourned the meeting after 1 PM.

Minutes submitted by: Zach Rossfeld

Minutes approved by: Vote of the PCQLIC April 9, 2021