

**NWIHCS Palliative Care Team**  
**September 29, 2007**  
**Pictel Sites: Omaha-2, Lincoln-1, Grand Island-1**

**Members present:**

Omaha- Cathie Schmit, RN, Karen Maulsby

Lincoln- Kelly Schneider, RN, Tracy Rathe, Colleen Nielsen, RN, Jennifer Eurek, Joan Hult, Amy Shrum, Aloha Schmid, LaDonna Vanengan

GI- Colleen Donovan, RN, Kellie Geis, Vickie Yarda, Janelle Brock, LCSW, Lu Ann Carraher, RN, Cynthia Hansen, RN

<b><u>AGENDA</u></b>	<b><u>DISCUSSION</u></b>	<b><u>ACTION/FOLLOW-UP</u></b>	<b><u>STATUS</u></b>
Review Minutes May 26, 2007	Approved		Closed
Website	Karen Maulsby and Aloha Schmid are unable to access website.	Tracy Rathe will research the problem.	Closed
NE HVP update	Jennifer Eurek- Jonathan Krutz resigned in July. Pat Snyder is the new interim Director and will attend meetings as her schedule allows. The long range plans under Management Contract is active through July 2008.		Closed
Strategic Planning	Kelly Schneider- Partnership- will address in the coming year. <ol style="list-style-type: none"> <li>1. Veteran End of Life care issues facing all Partnership stakeholders</li> <li>2. Address needs through Partnership sub-committees</li> <li>3. Look at what Hospice agencies, SVHs and VA need from each other</li> </ol>		Open
Brainstorming ideas for the NE HVP to address	Kelly Schneider asked those present to write down areas of concern and need. Summary: <ol style="list-style-type: none"> <li>1. Education for: <ol style="list-style-type: none"> <li>a. Veterans</li> <li>b. Clinical staff (affordable) <ol style="list-style-type: none"> <li>i. When to start the HPC discussion</li> </ol> </li> </ol> </li> </ol>	Kelly Schneider and Jennifer Eurek will prioritize the suggestions.	Open

	<ul style="list-style-type: none"> <li>c. Residents</li> <li>d. VA 101 is beneficial- keep updated</li> <li>e. New veteran orientation packet.</li> </ul> <ul style="list-style-type: none"> <li>2. Communication/Coordination of Care between: <ul style="list-style-type: none"> <li>a. Primary Care Providers, Oncology, staff. <ul style="list-style-type: none"> <li>i. Struggles between providers</li> </ul> </li> <li>b. Early referrals.</li> <li>c. Orders lost, or unsigned</li> <li>d. Hospices to ask which clients are veterans</li> <li>e. Patient folders containing medicine, prosthetics, pace maker information, special equipment needs.</li> <li>f. Veteran specific needs assessment tool.</li> <li>g. Agency input.</li> <li>h. Pharmacy concerns.</li> <li>i.</li> </ul> </li> <li>3. Resources: <ul style="list-style-type: none"> <li>a. Bed availability</li> <li>b. Tools for clinical staff</li> <li>c. Visibility, clinical liaison</li> <li>d. Advanced care planning clinics.</li> <li>e. Payer source.</li> </ul> </li> <li>4. Marketing: <ul style="list-style-type: none"> <li>a. State Wide awareness with Veteran Interest groups</li> <li>b. Honor veterans on special days/promote end of life care</li> <li>c. Market unique needs of veterans <ul style="list-style-type: none"> <li>i. Ads, articles, news clips, newspapers.</li> </ul> </li> </ul> </li> <li>5. Grant funding.</li> <li>6. Data collection.</li> </ul>		
<p>Ideas Addressing needs</p>	<ul style="list-style-type: none"> <li>1. Education: <ul style="list-style-type: none"> <li>a. Brochure racks in waiting rooms</li> <li>b. Workshops, brochures</li> <li>c. Amy Shrum willing to serve as</li> </ul> </li> </ul>		

	<ul style="list-style-type: none"> <li>consultant</li> <li>d. New employee orientation</li> <li>e. Bill board flyers</li> <li>f. New veteran orientation to address EOL care</li> <li>g. Comprehensive education program</li> <li>h. Keep VA 101 and Hospice 101 up to date</li> </ul> <p>2. Communication/Coordination of Care between:</p> <ul style="list-style-type: none"> <li>a. Coordination with new residents</li> <li>b. Champion VA MD for coordination</li> <li>c. Create veteran folder for transport between services</li> <li>d. New admission forms for Hospices- asking are you a vet</li> </ul> <p>3. Resources:</p> <ul style="list-style-type: none"> <li>a. FTEE needed</li> <li>b. Telehealth for veterans in remote areas</li> <li>c. Medical Directors on board</li> <li>d. Expand awareness to new VA Community Outpatient Clinics.</li> </ul> <p>4. Marketing:</p> <ul style="list-style-type: none"> <li>a. Web site marketing</li> <li>b. List VA contacts</li> <li>c. List VA contracted facilities</li> <li>d. List VSO's</li> <li>e. Speakers circuit</li> <li>f. Did you know briefs- at meetings and on calendars.</li> </ul> <p>5. Grant writing</p> <ul style="list-style-type: none"> <li>a. Funding for education</li> </ul> <p>6. Data collection</p> <ul style="list-style-type: none"> <li>a. Monitor growth in uses</li> <li>b. Provide incentives to Hospices to collect data</li> </ul>		
Budget	Kelly Schneider reported NE HVP has money in the bank from the "Dying Healed" conference in GI and the Mental Health Care Needs of Veterans conference.		
Annual Meeting	No date has been set yet.		Open

Next meeting	Friday November 30, 2007 from 10am to 1130am		