

OPPORTUNITIES & CHALLENGES FOR PALLIATIVE CARE

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PUBLIC ENGAGEMENT: Opportunities

- **Public consensus on EOL care:**
National Journal Poll (2011)
- **Overwhelming majorities:**
 - **Support informed public dialogue**
 - **Think about end of life issues**
 - **Think palliative care is high priority**
 - **Support access to palliative care**
 - **High trust in doctor or hc provider for information**

PUBLIC ENGAGEMENT: Challenges

- **Areas of public distress: National Journal Poll (2011)**
 - **Much lower levels of trust for information**
 - **Religious leaders, service agencies, insurance companies, media, officials & candidates**
 - **Half unprepared for end-of-life experiences**
 - **1/4 believe hc reform law allows gov't panel to make eol decisions (only 40% says it does not)**
 - **Must address mistrust & misinformation**

PUBLIC POLICY: Opportunities

- **New health reform law**
 - **Assure access to quality eol care for all?**
- **New York State: Momentous year**
 - **Family Health Care Decisions Act supports surrogate decision-making (after only 2 decades!!!)**
 - **NYS DOH MOLST revised forms to comply with law**
 - **Palliative Care Information Act to promote information & dialogue on eol care**

PUBLIC POLICY: Challenges

- **Public support coverage of discussion with MDs (86%)**
- **Political leaders stoke public discomfort with serious illness & dying for political gain (“death panels”)**
- **Administration will not effectively address**
- **Legislation re standards of care pose major risks:**
 - **We don’t know what we’ll get**
 - **May be difficult to amend as standards evolve**

DECISION-MAKING: Opportunities

- Health care proxy among best options for planning
- Facilitating communications within families & health systems critical
 - Bolstered by NY Palliative Care Information Act
 - Community interventions increase planning rates
 - *Respecting Your Choices* in La Crosse, WI (85%)
 - Rochester's *Community Conversations* (47%)

DECISION-MAKING: Opportunities

- **Family Health Care Decisions Act finally empowers NY families**
- **Limitations with living wills partially addressed by POLST**
- **POLST moving forward in hospitals & nursing homes across country**
- **Ethics committees can effectively mediate conflict**

DECISION-MAKING: Challenges

- **Low advance directive completion rate, even after Terry Schiavo (still locked at <30%)**
- **Transforming POLST into national standard of care**
- **Engaging public on planning, conversations, and care**
- **Overcoming cynical political attempts to sidetrack meaningful policy & dialogue**
- **Ethics committees lack resources to fulfill goals**

PALLIATIVE SOCIAL WORK: Opportunities

- **Palliative care's commitment to addressing psychosocial concerns**
- **Growing SW interest & commitment to palliative care**
- **Increasing initiatives in professional & continuing education**
- **Higher levels of knowledge & skill**
- **Innovative models of care**

PALLIATIVE SOCIAL WORK: Challenges

- **Diminishing hospital commitment to SW**
- **Lack of funding streams for hospital-based palliative SW**
- **Inconsistent integration of SW on pall care team**
 - **High regard for psychosocial approach of sw**
 - **But frequent marginalization in practice & policy**
- **More specialized training: leadership, ethics, conflict resolution**

For more information:

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