

Small Communities, Great Impact: WASHINGTON RURAL PALLIATIVE CARE INITIATIVE





Presenters

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- No disclosures



Objectives

- 1) become familiar with LAN
(learning action network) as a model
for state-wide palliative mentorship
- 2) articulate why rural health care is
a DEI issue
- 3) explore resources to support rural
clinicians in dementia care

DEI

The rural urban divide

More than one in every seven Americans lives in a rural place. Rural residents, in general, are disadvantaged by place—facing geographic barriers to services, resources, and opportunities. Within the rural population, there also are wide disparities in health and mortality among socioeconomic groups. Worse health is consistently associated with lower education or income

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- As compared to their urban counterparts, rural residents are disproportionately impacted by preventable cancers, severe maternal morbidity, opioid misuse, and they are less likely to receive critical healthcare services such as cancer screenings and childbirth care.





Low-income rural people of color are multiply disadvantaged by place, race, and class. Adult AI/AN, non-Hispanic Black, and Hispanic adults living in rural areas self-reported higher rates of fair or poor health compared to non-Hispanic White adults.

From Disparity to Collaboration

WRPCI developed a **Learning and Action Network (LAN)** emphasizing peer-to-peer mentoring. While providing expert access, we recognize local communities' deep knowledge of their local culture brings depth and meaning for other participants .



Cancer doesn't happen to a patient; it happens to the community.”

Rural Palliative RN

- LAN's underlying assumptions

- Every rural healthcare organization and community is best equipped to set their own goals and pace.
- Any progress is a success.
- The initiative is intended to be supportive but not prescriptive.
- Everyone teaches, and everyone learns. This model allows for diverse groups of caregivers, no matter their geographic location, to collaborate and share best practices.

Washington Rural Palliative Care Initiative (WRPCI)

- Founded 2016 by Pat Justis, executive director WA DOH's Office of Rural Health
 - Public-private partnership of >24 organizations
- Objectives:
 - Assist rural health systems and communities to integrate palliative care in multiple settings, to better serve people with serious illness in rural communities
 - Decrease transfers to distant urban tertiary services
 - Move upstream to serve people with serious illness earlier in their illness experience
 - Develop models for sustainable services

- Each cohort group (local community) has been supported in developing community specific goals and set a pace that is realistic for them. Any growth is celebrated as the Initiative recognizes that each program is the expert in their own community. All communities involved in the initiative acknowledged the WRPCI has served as a lifeline in this overwhelming work.



WRPCI Model

- Multiple disciplines and a purposeful mix of rural health, specialty palliative care, primary care, and telemedicine expertise
- Addresses stakeholder engagement, clinical training, and assistance for communities developing palliative care programs
- Four basic realms of intervention:
 - community engagement
 - clinical skills
 - culture change
 - a combination of telehealth case consultation and direct clinical telemedicine delivered to patients and families by palliative care experts

Program elements

Taking Initiative



- Community health assessments
- Mentoring
- Office hours
- Monthly case collaborative
- Didactic offerings
- Curbside consults
- Site visits

Some Resources

- Gregg's interview on rural palliative care
<https://www.youtube.com/watch?v=0-9HQyfDQUk&t=1s>
- CAPC's announcement of the 2023 Tipping Point Award
<https://tippingpointchallenge.capc.org/winner/washington-state-department-of-health/>
- Visit the portal:
<https://waportal.org/partners/home/washington-rural-palliative-care-initiative>

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