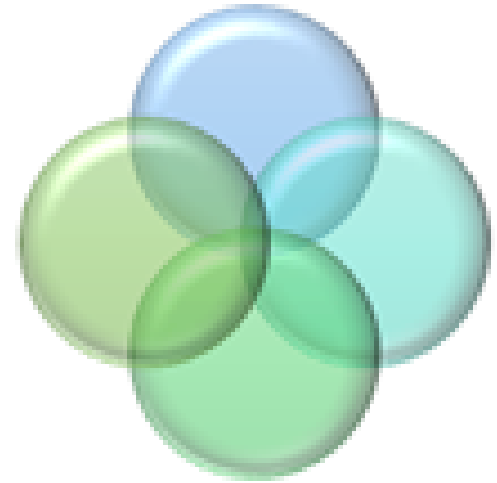


CHAMP Action Team

Wednesday, 8 October 2025



Today's Discussion

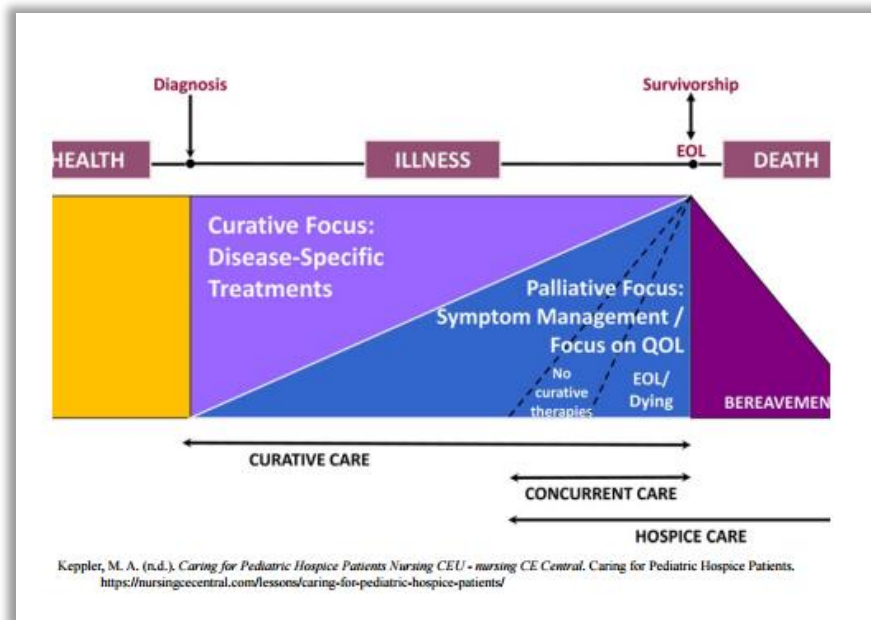
- Welcome
- Key themes/Takeaways from the Advisory Group Call
- Team discussion on developing a CT program
- Progress, Activities, Looking Ahead

Advisory Group Call Themes

Some Key Takeaways from Jessica Pope's Discussion*



- It's important to personalize the patient/family-centered care needs
 - *What are the unique needs of the child and family? How can we connect the resources needed to help the child and family with their journey?*
- If we look at Concurrent Care as a holistic approach, it can be a bridge to the full range of support (including hospice) but this requires extensive coordination, collaboration and education
 - *'The ACA opened doors to accessing concurrent care...however, it's like we were given the door but no handle.'*
 - *Offering a comprehensive approach with concurrent, palliative and hospice care comes down to the agreements between the agencies, medical practitioners, specialty clinics, case managers, insurances (Federal/Medicaid, state, private payer) and organizations*
- Barriers may come from a variety of sources, e.g., existing regulations, hospice eligibility definition, medical coding definitions, fear of the 'H' word
 - *How might a program in CT solve these issues?*



Concurrent Care

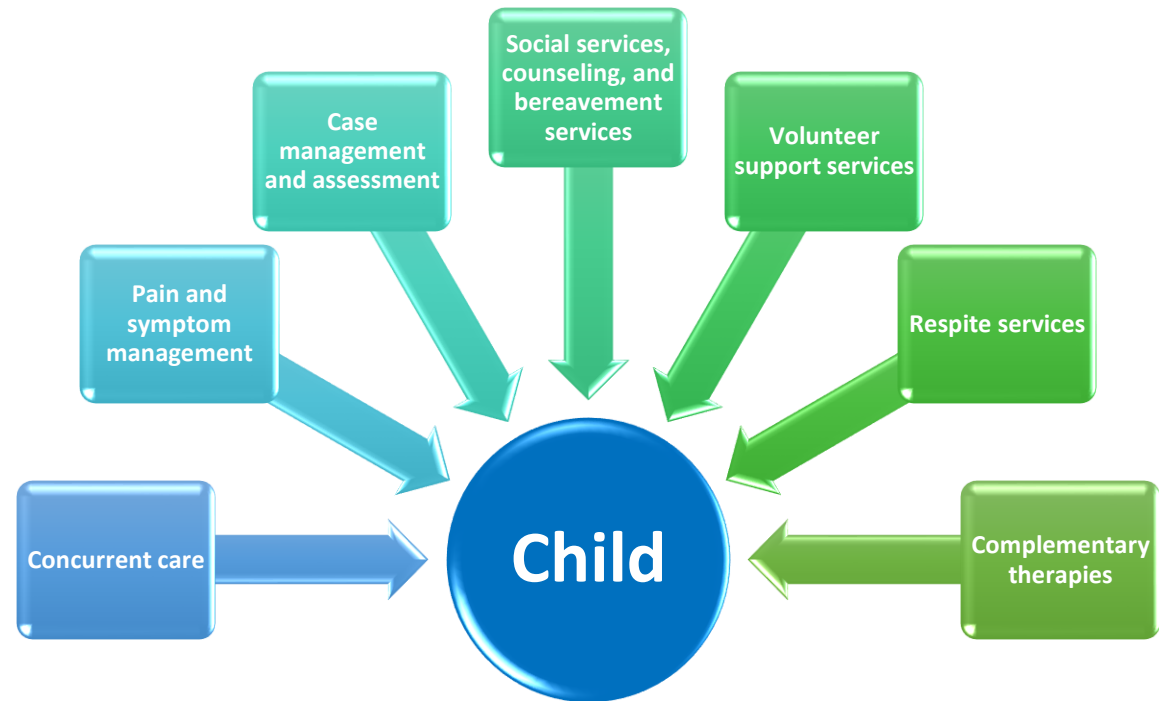
"Concurrent care allows select disease-directed therapies to facilitate transitions to hospice, with the aim of promoting goal-concordant care. In collaboration with specialists, hospices oversee treatment plans, which are adapted to meet patient goals. Concurrent care may act as a bridge for patients and families, allowing them to begin hospice services without fully stopping treatment that they have come to depend on for prolonging life." (JAMA, 2023)

Action Team Discussion

Confirming our original goal of creating a child-centric service model



- Are these still our priorities for a CT program?
- Do we think we know what the barriers are?
- Is there important information from our recent speakers that have helped us reshape our vision and program elements?
- Are we missing any key information?
- Before we proceed further, we need to understand what elements should be included, gain consensus across our team, and refine our vision for what we want our program to encompass.



Progress & Activities

Early Goals – Progress Updates – Looking Ahead



Theme	Actions/Objectives	Input & Considerations
Action Team information	<ul style="list-style-type: none"> ○ Identify other speakers to share best practices with Action Team to continue to shape CT model 	<ul style="list-style-type: none"> ➤ Who should be featured on our next Action Team call on Oct 22? What will we learn from them to shape our recommendations?
Exploring Best Practices	<ul style="list-style-type: none"> ○ Analyze MA model to consider best practices to help build a model that reflects CT's unique needs 	<ul style="list-style-type: none"> ➤ Host separate call with MA representative and interested Action team members to gather data and begin to define elements for CT
Personalizing the need	<ul style="list-style-type: none"> ○ Create examples of patient scenarios to help shape our CT program 	<ul style="list-style-type: none"> ➤ Per Dr Moss's goal on the importance of personalization, begin to design straw models of patient situations to help design a framework for a CT program and reflect the unique needs of patients and families
Using data to support need	<ul style="list-style-type: none"> ○ Extract and compile data/metrics from existing resources, reports, practitioners 	<ul style="list-style-type: none"> ➤ Team to Identify all existing sources to allow us to begin to 'mine' data to support need for program and consider impact on proposed services, costs, resources, etc
Ensuring quality	<ul style="list-style-type: none"> ○ Develop & propose baseline recommendations for facilities'/programs' licensure and certification 	<ul style="list-style-type: none"> ➤ Barbara Cass to advise on recent State committees' discussion on proposals and baseline recommendations. What might be next steps in CT? When might they be implemented?
RN Training for more skilled resources	<ul style="list-style-type: none"> ○ Continue to build RN curriculum and codify RN certification to increase access to skilled pediatric hospice practitioners 	<ul style="list-style-type: none"> ➤ Input from Eileen O'Shea on whether/how this Action Team can support Fairfield Univ/EGAN School of Nursing education and certification. Is there anything this team can do to offer help/support?
Advisory Group awareness	<ul style="list-style-type: none"> ○ Focus larger Advisory meetings on best practices to share expertise by thought leaders 	<ul style="list-style-type: none"> ➤ Who should be our next speaker on Oct 29? What objectives are we trying to accomplish with this speaker?

Today's Discussion

Questions, Comments, Recommendations



Upcoming Meetings

October Calls

(Calendar Invitations & Links Forthcoming)

Action Team

- *October 22nd - 1-2p ET*

Advisory Committee

- *October 29th - 1-2:30p ET*