

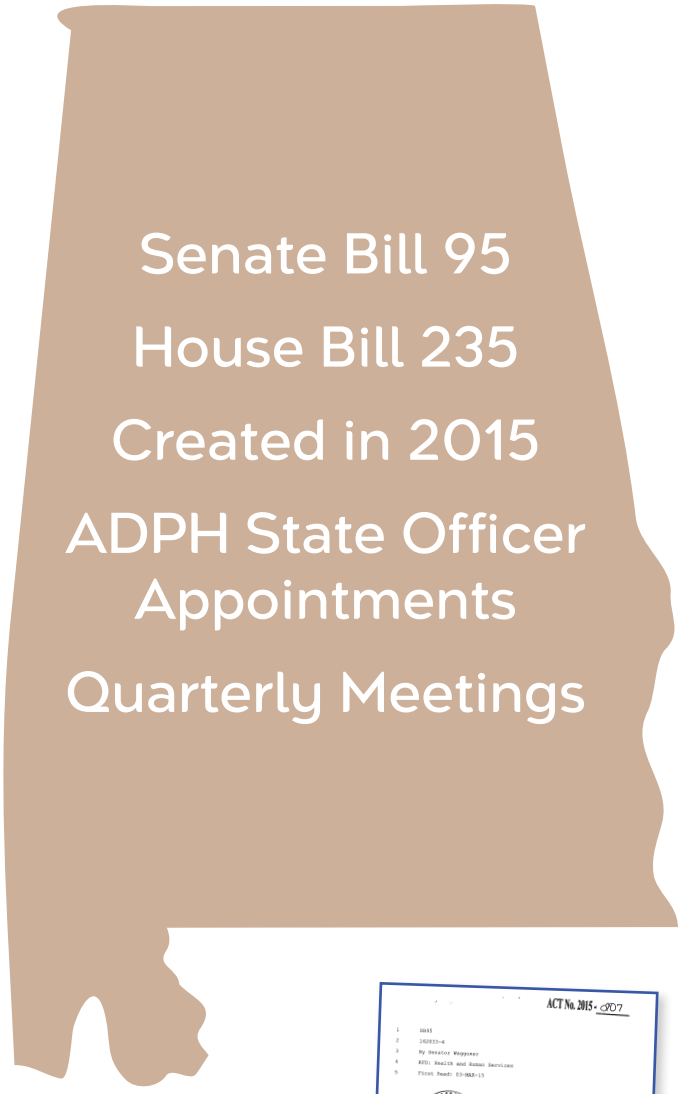
2024 State Progress Report

ALABAMA PUBLIC HEALTH

State Advisory Council on Palliative Care and Quality of Life

Background

Many states have legislatively-established Palliative Care Advisory Councils. Our State Palliative Care and Quality of Life Advisory Council was established in 2015 as a result of Senate Bill 95 and House Bill 235.

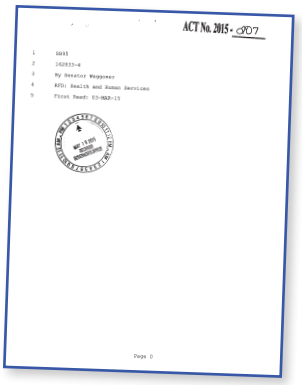


Purpose

- Establish statewide palliative care education program.
- Advise the state health officer and the department on matters related to the establishment, maintenance, and operation of palliative care initiatives in the state.
- Improve palliative care access for residents living with a serious illness.

Palliative Care Act 2015

Please follow this link to read the entire act signed into law on May 26, 2015: alabamapublichealth.gov/providerstandards/assets/Palliative_Act.pdf

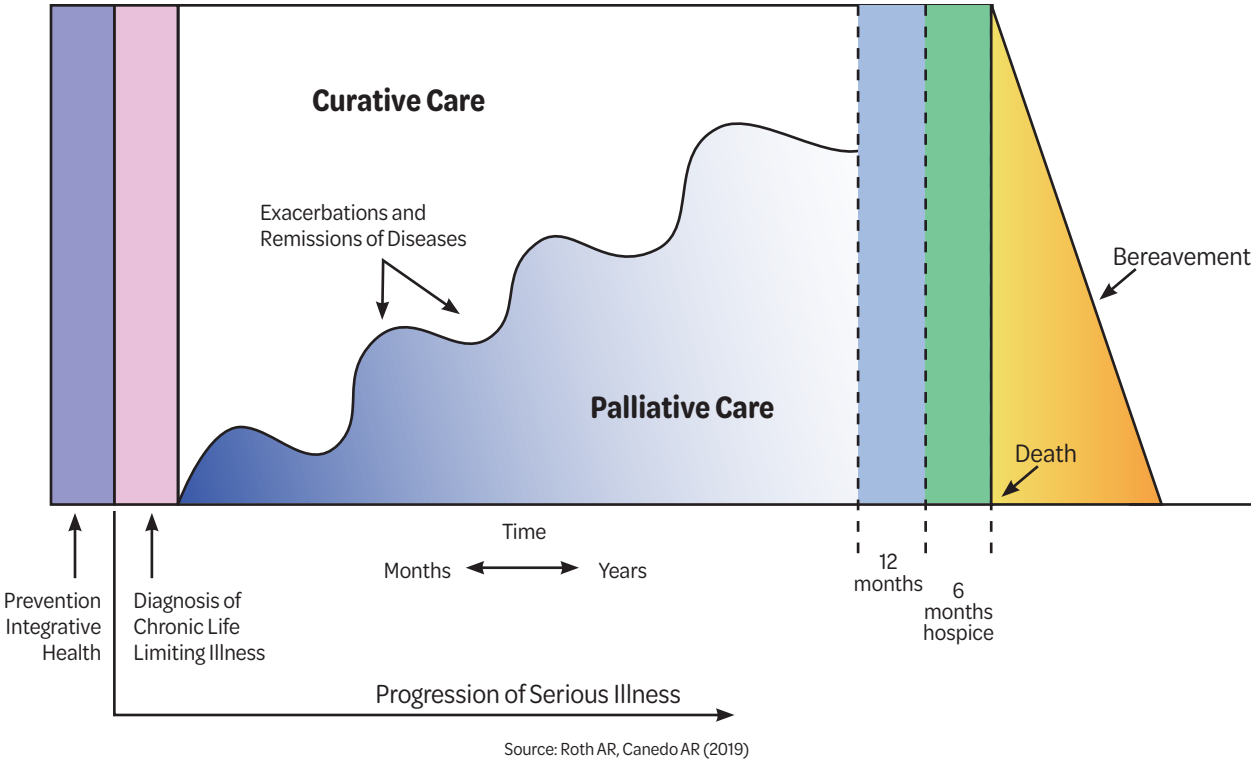


Definition of Palliative Care

Palliative care (also called palliative medicine) is specialized medical care for patients living with a serious illness that focuses on providing an extra layer of culturally appropriate care delivered by an interdisciplinary team comprised of doctors and nurse practitioners, nurses, social workers, pastoral care, chaplains, counselors, and other disciplines.

Likewise, the Center to Advance Palliative Care (CAPC) explains that Palliative Care is provided by a specially-trained team of doctors, nurses and other specialists who work together with a patient's other doctors to provide an extra layer of support. Palliative care is based on the needs of the patient, not on the patient's prognosis. It is appropriate at any age and at any stage in a serious illness (Figure 1), and it can be provided along with curative treatment.

Figure 1: Palliative Care in the Serious Illness Trajectory



Source: Roth AR, Canedo AR (2019)

The 5 W's of Palliative Care

WHO: As palliative care provides support for patients with serious and/or advanced illnesses, it considers the patient and the family as part of the care team. Delivery of specialty level palliative care is provided by a variety of professionals, including physicians who are board certified in hospice and palliative medicine, nurse practitioners who carry specialty certification and physicians who solely practice in hospice care and carry the hospice medical director board certification. Many physicians or nurse practitioners may care for patients in hospice or other programs, but may or may not carry board certification, and may not care only for patients with serious illness or whom are at end of life. Certification programs exist also for the disciplines of chaplaincy and social work. Other disciplines such as counselors and art and music therapists may also be part of the care team.

WHAT: Palliative care (also called palliative medicine) is specialized medical care for patients living with a serious illness that focuses on providing an extra layer of culturally appropriate care delivered by an interdisciplinary team.

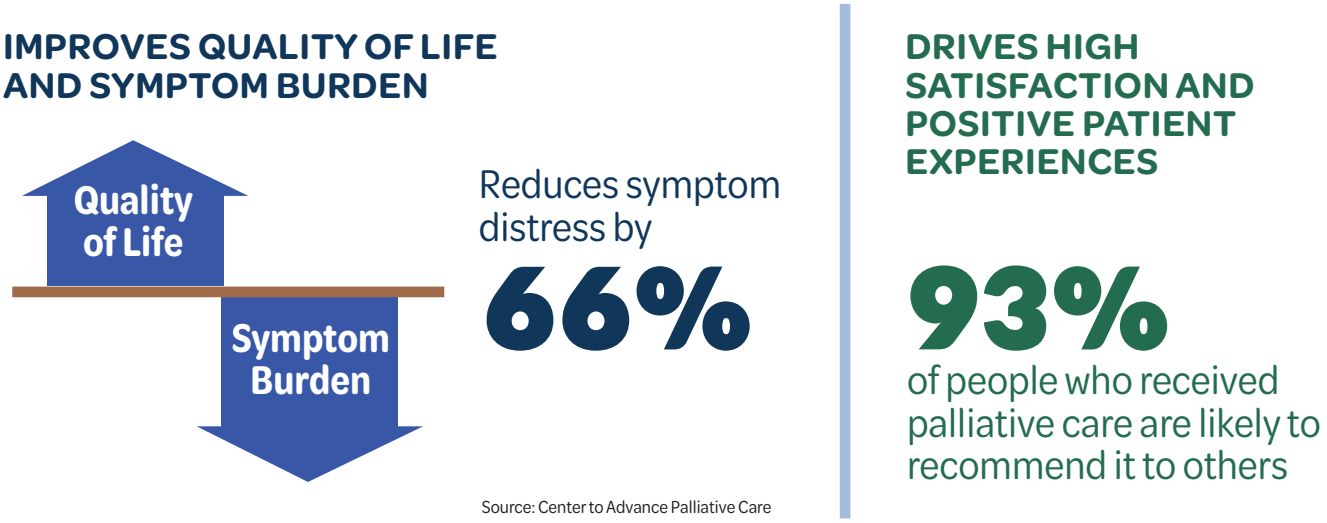
WHEN: Palliative care can be delivered alongside curative or long-term medical therapies at the time of diagnosis and can be offered at various points in a patient's illness.

WHERE: Palliative care can be offered in settings such as the home, hospital, nursing home, and ambulatory clinic. Additionally, palliative medicine consultation may be available through virtual or telemedicine mechanisms.

HOW: Palliative care helps patients and families communicate with their physicians to better understand their illnesses and how they might progress. By addressing the physical, psychological, social, and spiritual needs, the quality of life for patients and their families is optimized.

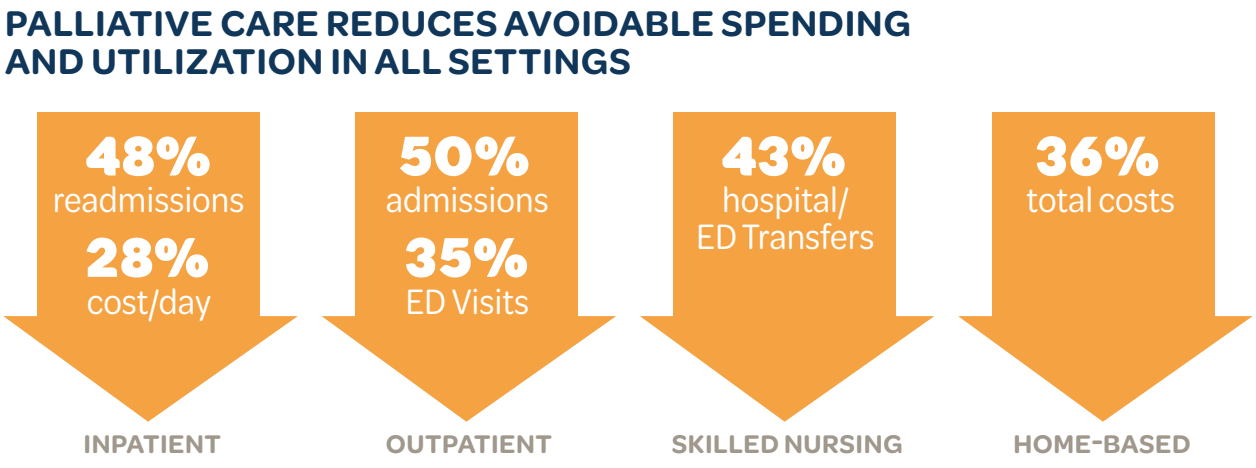
There is a strong evidence base supporting that palliative care positively impacts health care quality, patient satisfaction, and care outcomes (Figure 2).[2,3] Furthermore, by matching care to patient's goals and proactively addressing physical symptoms, it can help reduce avoidable and unwanted health care utilization (Figure 3).[4,5,6,7,8]

Figure 2: Palliative Care Impact on Quality of Life



Source: Center to Advance Palliative Care

Figure 3: Palliative Care Impact on Health Care Utilization



Source: Center to Advance Palliative Care



Our Vision

We envision that the State of Alabama will be a community where individuals with serious illnesses have awareness of and equitable access to patient-centered palliative care for themselves and their loved ones.

Our Mission



The mission of this Council is to promote Palliative Care in Alabama by improving consumer awareness of the positive effect of compassionate palliative care on the quality of life and care for individuals and families living with serious illness.

We endeavor to provide statewide consumer and professional educational programs within the Department of Public Health through collaboration among palliative care providers, organizations, institutions and individuals.

Our Values:



- Education
- Communication
- Collaboration
- Diversity
- Inclusion
- Equity



Message from the Inaugural Council Chair (2015-2022)- Dr. Rodney Tucker

I had the distinct pleasure of serving as the Chair of the State of Alabama Palliative Care and Quality of Life Council in the first six years after its establishment. One of the primary goals of the Council initially was to consolidate information about palliative care including advanced care planning into a central site as a resource for individuals in the State of Alabama. A secondary goal was to continue to educate individuals and organizations within the state about the field of palliative medicine and hospice as well. Serving with a group of interdisciplinary providers and representatives from various aspects of the healthcare system provides valuable insights into the population as a whole with serious illness. Advocating for and informing the State Department of Public Health about palliative care issues and the importance of quality of life for patients is paramount to future efforts as well.

"The State of Alabama Palliative Care and Quality of Life Advisory Council is now bringing together a diverse group of stakeholders to primarily focus educational efforts and public awareness around palliative care. With an initial focus on educational resources and access to services, the Council is poised to make a difference for our state through the partnership with the State Department of Public Health." - Dr. Rodney Tucker



Message from the Chair - Dr. Kristi Acker

Over the last few years especially, I have grown to appreciate the meaning of "community", especially while working in the sub-specialties of oncology and palliative care. I've witnessed patients rally when surrounded by "their community"; celebrated renewed health and cancer survivorship alongside patients; and mourned patient loss with other members of our community. Moreover, a community nurtures its young while investing in the future.

The connectivity of people never disappoints, and I have learned that through community comes collaboration, thus yielding a powerful force for change. Palliative care is interdisciplinary healthcare at its best and I am committed to advancing the field to improve access the quality and effective palliative care for every person with a serious illness in the state and beyond.

Through the work of an interdisciplinary palliative care advisory council, the ability to collaborate with other state and national professionals has multiplied. Through a palliative care "community" we are morphing passion into action by enabling Alabamians with resources to help foster access to quality palliative care resources, build relationships, and provide policy, community and provider awareness for the need to expand palliative care access across the state. It is an honor and pleasure to serve alongside such a dedicated group of palliative care champions.



Message from the State Heath Officer - Dr. Scott Harris

It is truly an honor to have the opportunity to work with the State Advisory Council on Palliative Care and Quality of Life. The Council has raised significantly the profile of palliative care among Alabamians and helped to ensure that compassionate and culturally appropriate care is delivered to patients in order to address those issues that are most important to them. I sincerely appreciate the tremendous work that is being done by our Council members.

"With the posting and promotion of two new educational resource videos and the recently created Portable Physician Do Not Attempt Resuscitation (DNAR) form to the "Palliative Care and Quality of Life" section of the ADPH website, the Council is opening up the dialogue both between family members and between physicians and their patients about the meaning and importance of advance care planning. Additionally, the new DNAR form is providing families with peace of mind that their loved one's wishes will follow them regardless of a change in facility." - Mary Ann Somers

Who We Represent

- **Palliative Care Physicians**
- **Nurses**
- **Pharmacists**
- **Chaplains**
- **Social Workers**
- **Caregivers**
  (including Community Representation, Hospitals, Hospices, Nursing Homes, Home Health, and Durable Medical Equipment)

Populations We Serve

- **Pediatric**
- **Youth**
- **Adults**

2019 CAPC State-by-State Report Card on Access to Palliative Care in our Nation's Hospitals

The availability of palliative care services in U.S. hospitals varies widely by state and region. The following table compares availability in your state to regional palliative care availability, broken out by hospital size.[1] The majority of large hospitals - those with 300 or more beds - now report availability of palliative care. A much lower percentage of smaller hospitals report meeting the standard of a full palliative care interdisciplinary team due to resource constraints.

Location	2019 Grade*	By Hospital Size			
		< 50 beds	50-150 beds	151-299 beds	300+ beds
State	39.3% D	18.5% (5/27)	15.6% (5/32)	40.0% (4/10)	92.9% (13/14)
Region	48.2% C	31.3% (40/128)	23.6% (21/89)	52.0% (26/50)	86.5% 45/52)
National	71.5% B	36.3% (557/1535)	51.1% (474/928)	75.6% (578/765)	93.7% (671/716)

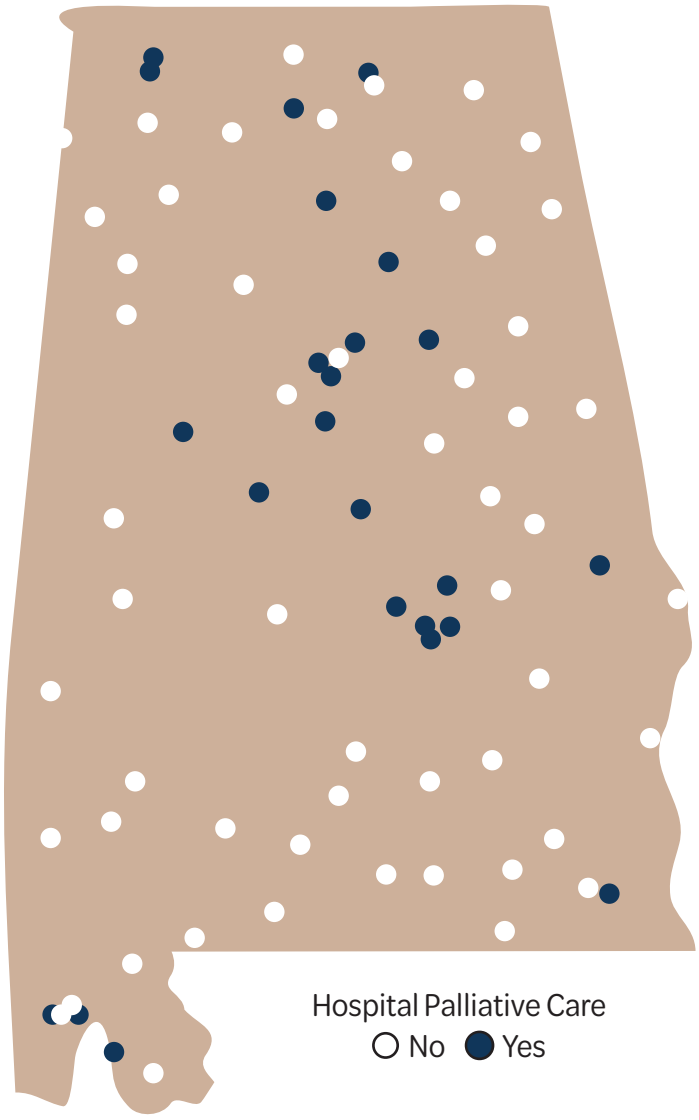
East South Central Region = AL, KY, MS, TN

*The 2019 State-by-State Report Card on Access to Palliative Care in Our Nation's Hospitals grade excludes hospitals that have fewer than 50 beds.
Report Card grades are as follows: A (80% or more of hospitals with 50+ beds have palliative care), B (60-79%), C (40-59%), D (20-39%), F (less than 20%)

Hospital Palliative Care Availability in Alabama

The map below (figure 2) shows all Alabama hospitals that report palliative care, and include hospitals of all sizes.[1] Solid dots indicate hospital that report palliative care programs and empty dots indicate hospitals that do not currently offer palliative care.

Figure 2: Availability of Hospital palliative Care in Alabama



For more information visit reportcard.capc.org/state/alabama.

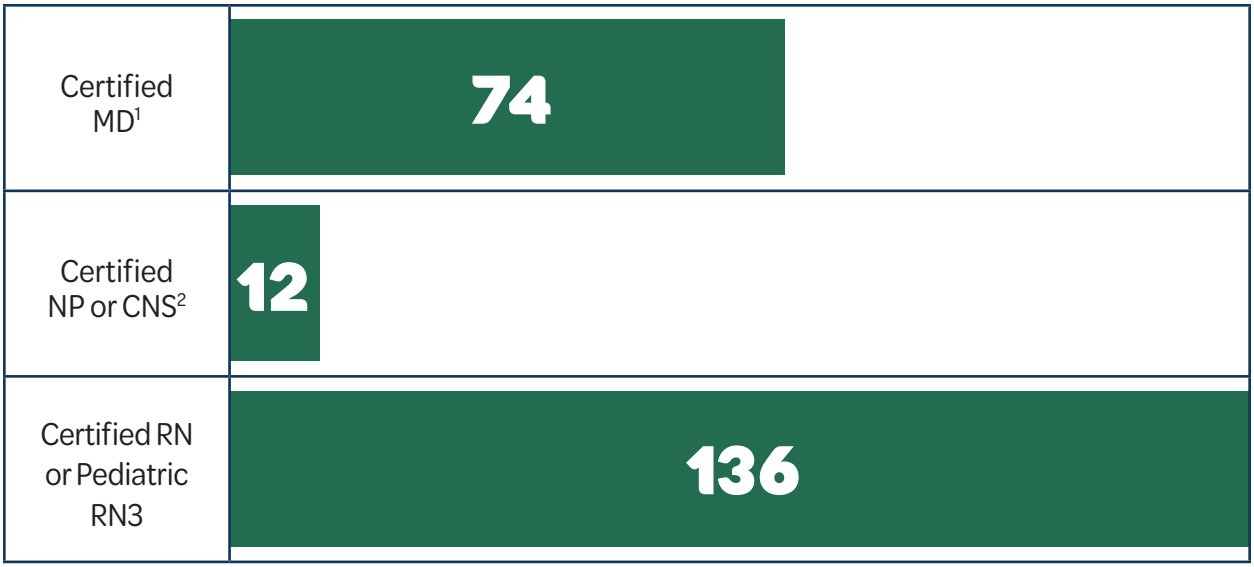
Certified Palliative Care Clinicians in Alabama

Physicians, advanced practice registered nurses, registered nurses, social workers, and chaplains can all pursue specialty certification in palliative care. Not all who work on palliative care teams have received palliative care certification, and there may be some palliative care–certified clinicians who work in other capacities.

The graph below (figure 3) shows the numbers of MDs, APRNs, and RNs who have received specialty certification in palliative care or pediatric palliative care.[4] A number of palliative care–certified doctors of osteopathy (DOs), social workers, and chaplains may be providing care in your state, but these numbers were either unavailable or too low to be included at the state level. Additional members of the palliative care interdisciplinary team include physician assistants, pharmacists, and other health professionals as needed, although specialty palliative care certification does not currently exist in these fields.

There are 1.8 certified prescribing palliative care providers (MDs or APRNs) per 100,000 residents in your state.[5] This capacity is likely insufficient to meet the needs of your state. Building the skills of all clinicians caring for people with serious illness may be an important strategy to complement the specialty palliative care workforce.

Figure 3: Palliative Care-Certified Physicians, Advanced Practice Registered Nurses, and Registered Nurses in Alabama



1. Certified Physicians (MD): American Board of Medical Specialties (ABMS) Subspecialty Certification in Hospice and Palliative Medicine (including Pediatrics)
2. Certified Advanced Practice Nurse (NP or CNS): Advanced Certified Hospice and Palliative Nurse
3. Certified Nurse (RN or Pediatric RN): Certified Hospice and palliative Nurse & Certified Hospice and Palliative Pediatric Nurse



Spotlight - Tim Mayhall Palliative Care and Spiritually

Spiritual beliefs are core values and sources of meaning (beliefs, relationships, vocations, etc.) that assist the person in negotiating the gains and losses of the medical journey. Palliative Spiritual Care is particularly concerned with how patients and their loved ones seek meaning and experience relationships as they encounter life altering or life-threatening disease and illness. Patients who receive spiritual support are more able and likely to preserve a higher quality of life and to incorporate palliative medical resources and principles as needed into their plans and goals of care. In providing Spiritual Care as a critical component of the interdisciplinary team, Palliative Care upholds sources of meaning that are independent of the patient's physical status and support effective frameworks for the management of stresses associated with illness, resulting in higher levels of patient participation and significantly improved outcomes.

"Due to the work done with the council, I have been able to see firsthand the impacts this group has made. AHPCO is currently in the process of revising their website to help be more of an education tool for the public, and to help advance palliative and hospice care in Alabama." - Stormy Dismuke

Key Partnerships

Alabama Department of Public Health

Alabama Durable Medical Equipment Association

Alabama Nursing Home Association

Capstone College of Nursing, University of Alabama

Center to Advance Palliative Care

Center for Palliative Care, University of Alabama at Birmingham

Coalition to Transform Advance Care

Harrison College of Pharmacy, Auburn University

"Being surrounded by greatness as a member of the dedicated, hardworking, and inspiring members of the State Council on Palliative Care and Quality of Life is a true honor. The Council's work in framing issues, finding solutions, educating the delivery system, and enlightening our state's elected leaders is bearing nourishing fruit that is now being harvested by those Alabamians who, upon finding themselves or a loved one with a serious illness, have more and better opportunities to receive much needed palliative care." - Richard Brockman

Our History

2015

Council Established

2016

Amendment to the Alabama Natural Death Act for providing an avenue to transfer DNAR records across multiple health care settings

2017

Spoke at the State Survey Agency Director's Meeting

2020

Quarterly RN residency program on Palliative Care

Served on Interdisciplinary Grief and Bereavement Task Force for MICU(Medical Intensive Care Unit) Grief Pilot Program and created Bereavement Packet to send to families post-discharge

2021

Designed and implemented 4 Patient and Family communication courses required for Critical Care Nurses

2023

Involved with AlaHA's initiative to engage community hospitals in advance care planning in preparation for Healthcare Decisions Day (April 16, 2023)

Partnered with BCBS AL Serious Illness Program: a public awareness campaign regarding Palliative Care. Provided expert knowledge and content

Current Palliative Care Landscape in Alabama

Our Strategic Priorities

- **Education**
- **Advocacy**
- **Communication**
- **Research**
- **Quality**
- **Payment**

Council Member Impact Exemplars

- **Education**
  - Scholarship articles/Textbooks/ Newsletters/Conference speakers including plenary sessions/Presentations/ Competency Modules/Community and organizational course development specific to advancing palliative care
- **Advocacy**
  - Committee/Taskforce/Policy initiatives (state and National levels)
  - Requested Congressional Support for passing bipartisan PCHETA Legislation - HB 191, Natural Death Act Amendment
- **Communication**
  - Letters
  - Developed Palliative care specific communication workshops/Simulations for leading difficult conversations. Leading Public palliative care awareness and messaging initiatives.
- **Research (future) CTAC/AHA**
  - Improving Quality of Life for People with Heart Failure through Integration of Palliative Care Services (The Palliative Care Pilot is a collaborative effort of the Coalition to Transform Advanced Care (C-TAC) and the American Heart Association that seeks to align clinical and administrative standards and to expand the evidence on delivering interdisciplinary palliative care services to heart failure patients)
- **Quality**
- **Payment**
  - BlueCross and BlueShield Serious Illness Program (Advocacy and Support). For more information, visit bcbsal.org/web/serious-illness



Other impacts

Outcomes:

- Provided grief and bereavement support for fetal demise and infant death.
- Provided grief and bereavement support programs for regional medical facility.
- Cooperated with local and state agencies to promote organ donation and procurement.
- Provided Palliative and Support Care Services rotation for transitional year medical residents.
- Consulted with clinical ethics committee in resolving complex medical narratives and end-of-life issues.
- Engaged with local media to promote advanced care planning in rural communities.
- Provided education regarding culturally and spiritually appropriate medical and end-of-life care to medical students and residents.
- Facilitated Faith and Medicine Seminar connecting local Spiritual Community Leaders with Hospital Physicians to create cross-educational opportunities.
- Engaged local business leaders in educational opportunities emphasizing employee resilience and recovery during novel coronavirus pandemic.
- Pioneered distance communication strategies for families of palliative care patients unable to visit loved ones during novel coronavirus pandemic.
- Assisted with the revamping of the AHPCO Website directly due to our knowledge of how important this educational platform is.
- During Covid, we worked to provide advocacy to the nursing home industry for less stringent visiting guidelines for those suffering with life limiting illness. We also drafted letters to AHPCO in support of vaccination efforts.
- Worked with the council in the efforts to disseminate information of the Portable DNAR forms to hospitals, nursing homes, and hospices.
- Council representation on the following:
  a. Advisory Board for UAB Center for Palliative and Supportive Care
  b. Alabama Coalition for Advance Care Planning
  c. AlaHA Community Coalition

Challenges in Expanding Palliative Care

- Payers
- Access
- Workforce
- Awareness
- HC PC skills training
- Misinformation
- Culture
- Consistency of definitions
- Future Council Activities and Recommendations
- Formal education
- PSA
- Resources
- Policy

About Our Council Members

Kristi Acker, DNP, PhD, FNP-BC, AOCNP, ACHPN (chair)



Kristi Acker, PhD, DNP is a Family Nurse Practitioner and holds specialty certifications in both Oncology (AOCNP®) and Hospice and Palliative Advance Practice Nursing (ACHPN®). She maintains her clinical practice with Oncology Associates of West Alabama at the Manderson Cancer Center @ DCH (Fayette campus) and is a Clinical Associate Professor at the University of Alabama- Capstone College of Nursing. Dr. Acker is a Fellow of the American Association of Nurse Practitioners and currently serves as co-chair for the American Association of Nurse Practitioners Oncology Specialty Practice Group, Chair of the State Advisory Council on Palliative Care and Quality of Life and was recently appointed to the Alabama Board of Nursing, representing Advance Practice Nursing.

Karen Marlowe, PharmD, BCPS, CPE (co-chair)



Karen F. Marlowe is the Associate Dean for Academic Programs and Davis Professor in the Department of Pharmacy Practice. After serving as the Assistant Dean for the Mobile Campus since its inception in 2007, she was selected for the Associate Dean for Academic Programs role beginning July 1, 2022.

Marlowe joined the Harrison College of Pharmacy faculty in the Department of Pharmacy Practice in 2000. Since 2007, she has served as associate department head and assistant dean of the Mobile Campus.

As associate dean for academic programs, Marlowe oversees a broad portfolio that includes recruiting and admissions, student services, curricular planning, academic policies and procedures, student organizations, budgeting and personnel management, among other areas. In addition, she serves as a member of the college's senior leadership team and advises the Dean in all aspects of the day-to-day management of the college.

Marlowe is a 1993 graduate of Auburn, earning a bachelor of science in pharmacy. She remained at the Harrison College of Pharmacy and completed her doctor of pharmacy in 1995. She completed her pharmacy practice residency at Egleston Children's Hospital, now Children's Healthcare of Atlanta. After completing her residency Marlowe initiated a practice in the cardiac intensive care and cardiopulmonary transplant units at Egleston, serving as a pharmacotherapy specialist in pediatric, neonatal, and cardiac intensive care until 2000.

Initially coming to HCOP as an assistant professor, she was promoted to associate professor with tenure in 2006 and was named Davis Professor in 2015. She was promoted to associate department head and assistant dean of the Mobile campus in 2007. Since 2019, Marlowe has also served as the founding director of the Auburn University Center for Opioid Research, Education and Outreach.

Dr. Marlowe has been engaged in the design of the HCOP Practice Ready Curriculum. She teaches in the HCOP curriculum in all three years as well as offering two electives focused on end of life and pain management.

As a practitioner, she has served as an adjunct faculty member in the University of South Alabama College of Medicine's Department of Internal Medicine since 2000. She is board certified in pharmacotherapy by the Board of Pharmaceutical Specialties and is credentialed in pain management by the American Academy of Pain Management. She is a certified pain educator and provides care for inpatient internal medicine patients, and maintains a consult service and patient advocacy program for patients with chronic pain or terminal illness.

Her areas of scholarship and research include pain management, ethics and professionalism related to pain management, patient attitudes and success of pain management strategies, patient acceptance of non-medicinal strategies for pain management in combination with their medication, current state of medical education related to pain management and pharmacokinetics.

Professionally, she is a member of the American Association of Colleges of Pharmacy, American College of Clinical Pharmacy and the Alabama Pharmacy association. She has also served as an accreditation site visitor for the Accreditation Council for Pharmacy Education.

Gregory Ayers, MD. FACP, FAAHPM

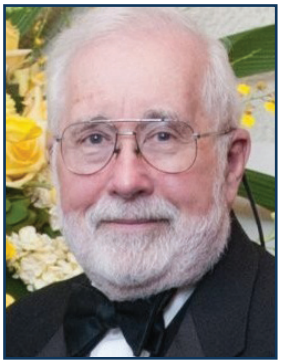


Dr. Ayers is CEO of Cadenza Health and has been providing Utilization Review for over eight years. A Georgia native, Dr. Ayers graduated from Mercer University School of Medicine where he was inducted into the Alpha Omega Alpha honor society. Following his residency at Baptist Health Systems, he served as Chief Resident and Instructor in Internal Medicine as well as a member of the teaching faculty for the residency program. He has developed and implemented successful programs for inpatient palliative consult services at both Princeton Baptist Medical Center and Brookwood Baptist Medical Center and is the Director of Palliative Medicine at both institutions.

Dr. Ayers is an accomplished leader in the state and local medical community. Having completed a 5-year term on the Jefferson County Board of Health with one year as its Chairman, he now serves as the Vice-Chairman of the Alabama State Committee of Public Health. Elected by his peers, he also serves as a board member of the Alabama Board of Medical Examiners and the Medical Association Board of Censors. Dr. Ayers speaks frequently at local, regional, and national conferences on the topics of controlled substances and Hospice and Palliative Medicine.

In his spare time, Dr. Ayers enjoys outdoor activities and working on his farm in his hometown of Bowdon, Georgia. He resides in Vestavia Hills with his wife, Jeanie, and their four wonderful children.

John Beard, MBA, JD



John G. Beard has demonstrated a lifetime commitment to healthcare in Alabama, particularly palliative and hospice care. For over 40 years, he has been affiliated with Alacare Home Health and Hospice, where he is chairman and president.

Although not a nurse, he has contributed greatly to the profession of nursing in Alabama through his support of nursing practice and nursing education. Among his many contributions, Mr. Beard is a member of the board of the Alabama Nurses Foundation, which promotes recognition of the nursing profession.

He is a valued partner with nursing education programs throughout Alabama. Mr. Beard was instrumental in forming The University of Alabama Capstone College of Nursing's Board of Visitors, and has served on that board in multiple capacities. He is a member of the Auburn School of Nursing's Community Advisory Board, and he is the chair of the school's Capital Campaign Committee. He also serves on the Community Advisory Board for the Center for Palliative and Supportive Care at the University of Alabama at Birmingham. Through Alacare, Mr. Beard provided funding to support a first ever Nursing Simulation Laboratory at Jacksonville State University. He partners with the Ida V. Moffett School of Nursing at Samford University to provide scholarships for nursing students to attend its Faith Community Nurses Foundations Course.

John Beard has received multiple honors, including the Alabama State Nurses Association's D. O. McCluskey Award, all of which demonstrate his tireless efforts on the behalf of nursing and nursing education in Alabama.

Richard Brockman, JD



Richard J. Brockman is the Alabama Nursing Home Association's appointed member to the State Advisory Council on Palliative Care and Quality of Life. He is both an attorney and licensed nursing home administrator. As counsel with the law firm of Burr & Forman LLP, he is a member of the firm's Health Care Practice Group. His firm is outside general counsel for the Alabama Nursing Home Association. In addition, he also owns and operates nursing facilities and assisted living in Alabama and Pennsylvania. Richard has been active in drafting and responding to national and state legislation affecting health care providers and consumers. He was one of the principal authors of legislation amending the Alabama Natural Death Act and Durable Powers of Attorney Act, as well as a host of other health related legislation.

He is a founder, a director, and chair of Simpra Advantage, Inc., an Alabama statewide based Medicare Advantage Special Needs Plan, and its sister company, Alabama Select Network, LLC, which contracts with Medicaid as its sole statewide primary care case management plan for nursing home and home and community based service beneficiaries. He is a member of a number of state and national health care related organizations, and frequently speaks, both locally and nationally, on a variety of health care matters. Richard holds a B.A. in accounting from Huntingdon College, a doctor of jurisprudence degree from the Cumberland School of Law, Samford University, and a masters of law in taxation from New York University School of Law.

Stormy Dismuke, RN, MSN, NP-C



Stormy Dismuke, RN, CRNP is a family nurse practitioner who currently serves as the Chief Executive Officer of Shepherd's Cove Hospice. Stormy has had the privilege to work with SCH for 23 years, where she has helped with the formation of Shepherd's Cove's own 501 C3 Palliative Care program. Stormy serves on the executive committee for the Alabama Hospice and Palliative care Organization (AHPCO). She serves as AHPCO's representative on the State Advisory Council on Palliative Care and Quality of Life.

Leigh Ann Matthews RN MSN CRTS ATP



Leigh Ann Matthews RN MSN CRTS ATP works at Complete Care, Inc in Fort Payne Alabama for over 30 years. Since 2008 she has served as an Assistive Technology Professional. In addition, she works in reimbursement issues, patient education, and day to day business operations.

Leigh Ann has been the President of the Alabama Medical Equipment Association (ADMEA) for over 20 years. Leigh Ann currently serves on the Region C Council, Region C POE Advisory Group, BCBS of Alabama Advisory Group, Alabama Medicaid, Advisory Group, and the Alabama State Advisory Council on Palliative Care and Quality of Life. Leigh Ann also served on the Board of the Alabama Board of Home Medical Equipment for 12 years. After working as a clinical nurse in several areas. She obtained her Master of Science in Nursing from the University of Alabama in Huntsville and worked as a nurse educator.

Leigh Ann is also involved in the community. She participates in health fairs, and local events. Members of the Fort Payne Chamber of Commerce. Complete Care, Inc as name the 2024 Small Business by the chamber. She is also involved in her church serving on the leadership committee, Church Hostess and participates in mission trips.

Leigh Ann was a finalist for the VGM Women of the Year 2019.

She has 2 adult children Robert and Alex.

Timothy Mayhall, MDiv, BCC



Timothy Mayhall, M.Div, BCCi, is a clinical chaplain and Director of Spiritual Care at Southeast Health Medical Center in Alabama. A graduate of Beeson Divinity of Samford University and the Ingalls Center for Pastoral Ministry, Timothy has specialized spiritual care to patients, families and caregivers in the areas Emergency and Palliative Medicine. Timothy also serves as the Spiritual Care expert to the Alabama State Council on Palliative Care and Quality of Life. In daily practice, Timothy is particularly interested and engaged in promoting long-term resilience and recovery among caregivers in repetitively stressful careers and environments. Timothy is married to Tamara, a Nurse Educator, and is the father of two sons, Thomas and Foster.

Mary Ann Somers, MAEd



Mary Ann Somers, MAEd serves as the Patient and Family Caregiver Representative on the Council. As the caregiver during her mother's Alzheimer's journey, she experienced the need to improve the quality of life for those living with severe illness and their families. Mrs. Somers also currently serves on the Advisory Board for UAB Center for Palliative and Supportive Care and has formerly served on the Programmatic Task Force for the Southeast Regional Wellness Center and the Alabama Coalition for Advance Care Planning. She is a retired elementary school teacher.

Sarah Pederson, PhD



Sarah Pederson, PhD serves as a Palliative Care Coordinator for a regional hospital system in North-Central Alabama. She earned her doctorate in 2012 in Health Communication at the University of Iowa. Her published research focuses on cultural understandings of death and dying and identity constructions in illness narratives. She is also currently completing a master's degree in Social Work. Dr. Pederson has created and led several community and health professional trainings in palliative and hospice care, health communication, and advance care planning.

Annie Hinson, LBSW



Annie Hinson, LBSW has worked with the Palliative Care team at Southeast Health Medical Center Since July 2019. Her daily goal is to advocate for and provide compassionate psychosocial support to palliative care patients and their loved ones. She was an ethics committee member at Southeast Health since June 2017 and was appointed to the Alabama State Advisory Council on Palliative Care and Quality of Life June 2022.

ADPH Team

Dr. Scott Harris; Dr. Amber Clark-Brown; Dr. Landers; Denise Milledge, Yumicka Smith

Palliative Care Resources for Healthcare

- UAB Center for Palliative and Supportive Care
- American Academy of Hospice and Palliative Medicine (AAHPM)
- Center to Advance Palliative Care
- National Hospice and Palliative Care Organization
- Get Palliative Care
- Alabama Hospice & Palliative Care Organization
- Medicare's Role in End-of-Life Care
- Advance Directives/Portable Physician Do Not Attempt Resuscitation Orders
- Advance Directives/Portable Physician Do Not Attempt Resuscitation Orders (Spanish)
- Form 1: Alabama Portable Physicians Do Not Attempt Resuscitation Order
- Form 2: Certification of Health Care Decision Surrogate
- Advance Care Videos: Power Point for Physicians | Video for the Patients
- FAQ and Answers for Portable Physician's DNAR Orders and Rules
- Video - UAB Center for Palliative and Supportive Care
- CAPC Patient & Family Information
- Palliative Care Medication - PDMP Patient Fact Sheet
- PPEL Order Form
- National POLST Form
- AD Planning Toolkit
- BCBS resources
- Alabama Hospital Association Advance Directive Toolkit

References

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"Palliative Care understands that patients and families are central to illness experiences. It is through a palliative perspective that we understand that the people living with illnesses are the ones who determine how quality of life is defined." - Sarah Pederson

"As an in-pt palliative care social worker, being a part of the State Advisory Council on Palliative Care and QOL has been a wonderful opportunity to be involved and work with so many other disciplinaries and agencies with the same goals. We have so many different views and outlooks of ways to better education, dispersion, and advocacy in Palliative Care. There are more great things to come from this council full of talented and caring professionals." Annie Hinson