THURSDAY, OCTOBER 11

7:30 AM  Buffet Breakfast  
8:30 AM  Welcome  
8:45 AM  Opening Keynote: Daniel Johnson, MD: Harnessing the Magic of Palliative Care Education  
9:45 AM  Break with exhibitors  
10:15 AM  Concurrent Sessions: Papers, Panels, Workshops  
11:30 AM  Lunch with table topic discussions  
12:45 PM  Plenary Panel: Models to Support the Caregiver  
2:00 PM  Break with exhibitors  
2:15 PM  Concurrent Sessions: Papers, Panels, Workshops  
3:30 PM  Break with exhibitors  
4:00 PM  Plenary Session: Jeri Miller, PhD: Funding Mechanisms to Build the Science of Palliative Care  
5:00 PM  Poster Session  
5:00 PM  Reception  
6:30 PM  Adjourn

FRIDAY, OCTOBER 12

7:00 AM  Workshop: Meditation in Motion: Yoga  
7:30 AM  Buffet Breakfast  
8:25 AM  Welcome  
8:30 AM  Morning Keynote: Karen Bullock, PhD: Influence of Culture on End-of-Life Decision Making  
9:30 AM  Break with exhibitors  
10:00 AM  Concurrent Sessions: Papers, Panels, Workshops  
11:15 AM  Break with exhibitors  
11:30 AM  Plenary Session: Seed Grant Project Reports  
1:00 PM  Lunch  
1:20 PM  Karen Haynes, PhD, President, CSU San Marcos and 2018 Seed Grant Award Announcements  
2:00 PM  Break  
2:15 PM  Concurrent Sessions: Papers, Panels, Workshops  
3:30 PM  Break  
3:45 PM  Closing Keynote: Marie Bakitas, DNSc: Strengthening the Palliative Care Tapestry  
4:45 PM  Closing  
5:00 PM  Adjourn

Join the Conversation

csupalliativecare.org/symposium
#csuhpm18
Welcome to our 2018 National Symposium for Academic Palliative Care Education and Research, Quality in Palliative Care: Fusing Education, Research, and Practice. We’re thrilled to have you here, and excited about all we can accomplish together to improve care for patients and families experiencing serious illness. Our symposium theme reflects the collaborative, multidisciplinary, synergistic approach that’s vital to the effective delivery of palliative care, to expanding the evidence base that shapes best practices, and to making palliative care more accessible to the growing number of people who so desperately need it.

Our main focus says it all: QUALITY is what we strive for in all our efforts. But, the precise nature and scope of “quality” is . . . squishy. Merriam Webster says it’s “the standard of something as measured against other things of a similar kind,” and “a peculiar and essential character,” and “degree of excellence.” Thanks, Merriam, but is it a unique characteristic, a comparative feature, or a measure of superiority? Whole philosophical treatises (including, if I recall, Zen and the Art of Motorcycle Maintenance) have been written on the subject. To paraphrase Justice Potter (about something else entirely), “It’s hard to define, but you know it when you see it.” Our hope is that the sessions throughout the symposium will help us set the measure of quality and show us ways to achieve it.

Over the next two days you’ll hear from national leaders in teaching, research, and practice including Drs. Dan Johnson, Karen Bullock, Marie Bakitas, and Jeri Miller, and care giving experts and educators Dr. Jennifer Wolff, Dr. Theresa Harvath, and Kathleen Kelly. Beyond these impressive plenary presentations, you’ll participate in interactive workshops and explore new research through paper, poster, and panel sessions that put you up close with the authors and projects elevating our field. We’re especially eager to hear from the recipients of last year’s seed grant awards, demonstrating the direct effects of small investments in innovative projects in real time.

This kind of robust program, and the extraordinary work it cultivates, wouldn’t be possible without the generosity of the Gary and Mary West Foundation, which has supported the seed grant awards for the past two years and this year increased support to $50,000, and to the West Health Institute, for its ongoing support and guidance for the event overall. Our support is enhanced by our exhibitors, Perahealth, Springer Publishing, the Coalition for Compassionate Care of California, Life and Death Matters, and the Institute for Palliative Care at California State University San Marcos. We’re also very appreciative of all the members of our Symposium Planning Committee, a multidisciplinary group representing prestigious universities and organizations from across the country, whose efforts have resulted in the truly remarkable and diverse learning opportunities you’ll experience here.

I’d like to give a personal shout-out to Dr. Adam Shapiro, our director of University Relations and Research, and Maria Brown, National Symposium Administrator, for their tireless efforts to plan and execute everything from program content to CME to hotel arrangements to catering; and to our marketing staff under the direction of Steve Dahl, for their efforts to expand our reach and achieve a record-breaking registration; and to all members of our staff who have contributed their time and talents to a successful event!

Beyond that, we’re grateful to you—the educators, influencers, clinicians, and researchers whose shared passion and purpose is to manage suffering and improve quality of life for people living with serious illness. You are the instrument through which we change healthcare, and your relentless pursuit of high quality, whole-person, patient-centered care is how we make it happen.

Thank you for joining us!

Jennifer Moore Ballentine, MA
Executive Director
California State University
Institute for Palliative Care
7:30 AM  BUFFET BREAKFAST  
BAYVIEW TERRACE

8:30 AM  WELCOME  
BAYVIEW BALLROOM

Jennifer Moore Ballentine, MA, Executive Director, CSU Institute for Palliative Care

8:45 AM  OPENING KEYNOTE  
BAYVIEW BALLROOM

Harnessing the Magic of Palliative Care Education to Awaken Joy and Meaning in Medicine

Daniel C. Johnson, MD, FAAHPM, National Physician Lead for Specialty Palliative Care, Kaiser Permanente Care Management Institute

Great teachers inspire. Their passion to transform practice infects learners with insatiable curiosity and intention. As a seasoned palliative care physician and multi-disciplinary educator in academic and community settings, Dr. Johnson will humbly share instructional feats and flails. The session will highlight: a stepwise approach to the development and delivery of palliative care curricula; strategies to integrate the arts, metaphor, and humor into teaching; and published evidence describing effective educational interventions. Dr. Johnson will challenge participants to reflect upon their own efforts to arouse compassion and competence.

9:45 AM  BREAK WITH EXHIBITORS

10:15 AM  CONCURRENT SESSIONS

BAYVIEW I

Panel: Bringing the Needs of Young Caregivers Mainstream

Sharon Hamill, PhD, CSU San Marcos; Melinda Kavanaugh, PhD, LCSW, University of Wisconsin, Milwaukee; Elizabeth Olson, PhD, University of North Carolina – Chapel Hill; and Vivian Stamatopoulos, PhD, University of Ontario, Institute of Technology

Approximately 1.4 million children and youth under the age 18 provide care to a family member. Young caregivers provide levels of care that would challenge most adults, yet they do so with almost no support, education, training, or guidance. Despite the widespread prevalence of youth caregiving, it is a role that remains largely hidden from program and policy across the U.S. However, there is a small but growing number of U.S. and international researchers actively developing and delivering services to these young people. This panel will focus on a few of the novel school, healthcare, and community-based programs and initiatives developed in the U.S. and Canada targeting young caregivers. Panelists will highlight the growing evidenced-based programs developed to bring attention to this isolated and little known caregiving population.

BAYVIEW II

Panel: Extending Palliative Care in the Ambulatory Setting

S. Liliana Oakes, MD, Margaret (Monty) LaPierre, MSN, RN, and Esmeralda Villanueva, LBSW, Wellmed Medical Management

This panel describes a home-based and ambulatory palliative care program developed for Medicare Advantage patients: how the home-based and ambulatory program was developed and sustained to serve seriously ill populations; tools developed to identify the seriously ill as well as the metrics used to measure and evaluate quality and success of the program; an advance care planning training program; and includes a discussion of current successful outcomes and challenges for a healthcare delivery network serving more than 227,000 patients, mostly Medicare-eligible seniors, in Texas and Florida.

Join the Conversation  
#csuhpm18
BAYVIEW III

Paper Session: Interprofessional Teams

Enhancing the Effectiveness of Inpatient Palliative Care Consultation Teams (PCCTs)

Meghan McDarby, MA, and Brian Carpenter, PhD, Washington University in St. Louis

In order to enhance the effectiveness of palliative care consultation teams (PCCTs), this study examined the nuances of collaboration between PCCTs and other inpatient providers. Interviews with palliative and non-palliative providers at three Midwestern hospitals were conducted to examine healthcare providers’ attitudes toward palliative care (PC) services, and to identify facilitators and barriers to meaningful collaboration. The presentation will discuss themes that emerged that may inform future efforts and interventions to enhance collaboration between PCCTs and other providers.

When the Team Acted Like a Real Team: Collaboration, Communication, Interdisciplinary Teams and Care Quality

Joy Goebel, RN, PhD, FPCN, and Sue Robertson, RN, PhD, CSU Long Beach

The aim of this study was to examine palliative care providers’ perceptions of interdisciplinary collaboration, communication and quality of care. The results add to the growing discussion of what contributes to the quality of palliative care, improving the understanding of key elements of care quality, and enabling providers to develop structures and environments to optimize effective IDT/patient/family collaboration and communication.

IPE and Palliative Care: An Alignment of Education and Practice

Nassrine Noureddine, EdD, MSN, BSN, and Darla K. Hagge PhD, CCC-SLP, CSU Sacramento

Interdisciplinary teamwork is the gold standard of palliative care, and interprofessional education is the best pedagogy to prepare a collaboration-ready healthcare workforce. This study reports on a multi-faceted IPE curriculum that introduced students to palliative care and the interdisciplinary team among nursing and speech-language pathology students, to measure their learning outcomes.

Measuring and Improving the Effectiveness of Interprofessional Teamwork

Stacy Starkka, PhD, CSU Institute for Palliative Care

Effective interprofessional teamwork has been shown to improve quality of care, safety, and other patient, clinician, and organizational outcomes. This study explored similarities and differences of interprofessional teams in various healthcare settings using survey instruments to measure the effectiveness of interprofessional teams. Discussion will include elements involved in effective interprofessional teamwork as they relate to how to build effective work among team members.
BELMONT

Workshop: Responding to Requests for Aid in Dying
Judy Knudson, MPAS, PA-C, BSN, and Rachel Revelle, MDiv, University of Colorado

Medical Aid in Dying (MAID) is a sensitive and emotionally charged topic in many respects. The ethical and legal landscape varies by state and institution, and must be given close attention. This workshop will explore MAID as part of a patient’s spiritual journey toward death, and that such inquiry will be an area of spiritual struggle for anyone involved in the process. It will provide an opportunity for participants to explore their own spiritual and emotional perspective in a safe and collegial environment, so that they will be prepared to meet patients with these questions using an authentic human connection.

CROWN POINT

Workshop: World Wide Healing Movement: Hope Made Visible™
Alessandra Colfi, PhD, UC San Diego Health System

This workshop features a program transforming the consciousness of individuals affected by cancer from co-dependency and disconnection/isolation, to deep interconnectedness, by raising empathic awareness and restoring hope and resilience, essential qualities for humans to thrive. Through guided meditation/visualization and art making processes, participants will have the opportunity to reflect on what gives them – and the patients they work with – hope, meaning, and a vehicle for self-expression. A variety of art materials will be used: All are non-toxic and easy to use. No previous experience necessary.

11:30 AM TABLE TOPIC LUNCHEON

12:45 PM PLENARY PANEL

Supporting Family Caregivers of Seriously Ill Seniors: Research, Training, and Community Connections
Jennifer Wolff, PhD, Professor, Department of Health Policy and Management, Johns Hopkins Bloomberg School of Public Health
Kathleen Kelly, MPA, Executive Director, Family Caregiver Alliance, National Center on Caregiving
Theresa Harvath, PhD, RN, FAAN, Executive Associate Dean & Clinical Professor, Director, Family Caregiving Institute, The Betty Irene Moore School of Nursing, University of California Davis

Moderator: Zia Agha, MD, Chief Medical Officer and Executive Vice President, West Health Institute

Three experts in supporting family caregivers will highlight the struggles that family caregivers of seriously ill seniors face, and the support that is available. Drs. Wolff and Harvath and Ms. Kelly will review the current status and needs of family caregivers, and how they can connect with community resources to assist them. Panelists will discuss their views on resources and gaps that need to be addressed through research and training.

Supported by West Health Institute

2:00 PM BREAK WITH EXHIBITORS
BAYVIEW I

Panel: Palliative Care for Special Populations with Unique Needs

Julia Kasel-Godley, PhD, VA Palo Alto Health Care System; Veronica Shead, PhD, VA St. Louis Health Care System; Rebecca Allen, PhD, ABPP, University of Alabama; and Brian Carpenter, PhD, Washington University in St. Louis

In this panel session, presenters address the unique needs in palliative and end-of-life care for four groups of patients: people with serious mental illness, veterans, primary care patients in rural areas, and people with neurocognitive disorders. Each presentation begins with a review of the epidemiology and clinical characteristics of the population, followed by an analysis of key bio-psycho-social-spiritual issues that are common in palliative and end-of-life care with the group. Unique issues in access to care, assessment, and treatment are summarized, along with implications for care partners and clinicians. Each paper closes with a synthesis of research and training needs and a discussion of relevant public policy.

BAYVIEW III

Workshop: Brave New World: AI and Machine Learning in Palliative Care

Jeremy Powell, MPT, and Sangeet Sauraph, Acclevity Health Solutions

Artificial intelligence is transforming our world, and nowhere is its potential more exciting than in healthcare. Its emerging impact comes at a time when improving care for people with chronic or life-limiting disease is imperative as our country ages at historical rates. Studies suggest AI, when combined with clinical observations, can dramatically impact the early detection and diagnosis of disease, the discovery of new drugs, and the accuracy of prognostication in patients with serious illness. The latter is key to achieving timely access to palliative care. This workshop will explore relevant data on the utilization of machine learning and AI in healthcare, and look at specific applications of AI in palliative care, including identification of appropriate patients to facilitate referrals, prognostication, and collecting and analyzing outcome and quality data.

BELMONT

Workshop: Using the Rothman Index to Communicate with Patients and Families Regarding Patient Status

Olufunmilayo Ogundele, MD, MS, LifeBridge Health

This session will cover how the clinical team uses proactive rounding and the Rothman Index (RI) to help trigger palliative care consults and communicate with patients and families in the ICU. Strategies to be discussed include use of a tailored educational flier for families, and clinical surveillance protocols used among the care team. The palliative care team uses the surveillance information to support the primary clinical team in improving quality patient care.

CROWN POINT

Workshop: Palliative Care Simulation with Nursing Students: Impact on Communication Skills

Kirsten Preusse, RN, MSN, AC-CNS, CCRN, and Kevin Reilly, MSN, EdD(c), Samuel Merritt University

This workshop will demonstrate a simulation about end-of-life conversations that has been incorporated in an Accelerated Bachelor of Science in Nursing (ABSN) program and will include information on the structure of a study that evaluates the impact of an EOL seminar in combination with this simulation on students’ attitudes toward and comfort level with caring for dying patients. A debrief component provides an opportunity for students to reflect on their own experiences and personal beliefs and attitudes about EOL issues. The Frommelt Attitude Toward Care of the Dying scale is used. This workshop will utilize active learning techniques by engaging participants in the simulation, debrief, and general discussion of the experience.
**THURSDAY**

2:15 PM  **CONCURRENT SESSIONS**

**BAYVIEW II**

**Paper Session: Communication**

*Practicing Difficult End-of-Life Conversations Using Mixed-Reality Simulation*

**Jaime Hannans, PhD, RN, CNE, and Ben Hytrek, BA, CSU Channel Islands**

Nursing students may have the opportunity to observe difficult conversations, such as end-of-life discussions, in experiential learning courses; however many times, the first experiences navigating difficult conversations with patients, family, or other colleagues occur in the work environment long after graduation. A mixed-reality virtual simulation allows the opportunity for students to engage in a safe environment, while practicing important communication skills and responses. This paper reports on a dual-campus partnership where undergraduate nursing students piloted a mixed reality virtual simulation focused on end-of-life care as a high-impact teaching-learning practice.

*Palliative Care Information to Support Practice – A Web-Based Program*

**Raeann LeBlanc, DNP, AGPCNP-BC, CHPN, University of Massachusetts Amherst**

Recently passed policies mandate access to information about palliative care among those persons that may benefit, requiring hospitals, clinics, and long-term-care providers to disseminate information about palliative care to patients selected as being in need of this level of care. This workshop describes an open-access educational program created to equip healthcare providers with the right language to effectively communicate about the benefits and availability of palliative care, and reports on knowledge and satisfaction of participants.

*Challenges in Symptom Reporting by Cancer Patients*

**Teresa Deshields, PhD, Washington University School of Medicine**

Previous research with cancer survivors indicated that many with bothersome symptoms complained their symptoms were not addressed, supporting previous findings that symptom burden can be a long-term problem, in addition to being an issue during treatment. Many symptoms are subjective in nature, making the clinician and researcher dependent on patient self-reporting. In order to better understand gaps in communication about symptoms, this study examined patients' perspectives on symptom distress, intention to discuss symptoms, and actual symptom discussion with healthcare professionals (HCPs) in medical oncology visits, and provides insights about symptom communication in the oncology setting.

3:30 PM  **BREAK WITH EXHIBITORS**

4:00 PM  **PLENARY SESSION**

**Funding Mechanisms and Opportunities: Building the Science of Palliative Care**

**Jeri Miller, PhD, MS, MSc, Chief, Office of End-of-Life and Palliative Care Research, National Institute of Nursing Research, National Institutes of Health**

Dr. Miller will discuss the interplay of research with clinical practice, why research is mutually important to scholars and practitioners at all levels, and avenues for obtaining funding for palliative care research.
Advance Care Planning and Proxy Decision-Making Preferences Among Persons with Dementia and Caregivers
Jung Kwak, PhD, The University of Texas at Austin

A Health Plan’s Approach to Providing Palliative Care Everywhere
Kristen Vallone, BS, and Kimberley Beverly, MSW, Blue Shield of California

Curricular Mapping to Incorporate Palliative Care Training into a PA Program: Keep It All Together!
Nadya Dimitrov, DPM, PA-C, Stony Brook University

Death Anxiety Among Chinese Older Adults with a Religious Affiliation
Mandong Liu, MSSW, University of Southern California

Developing Inpatient Palliative Care Champions: The SJMC Model
Brittany Hagge-Langevin, RN, BSN, SCRN, St. Jude Medical Center; and Darla Hagge, PhD, CCC-SLP, California State University Sacramento

Efficacy of Physical Activity After Death of a Loved One
Amber Derksen, PhD, RN, OCN, CHPN, CNE, Georgia Southern University – Armstrong Campus

End-of-Life Education in Nurse Residency: Providing the Tools for Success
Kathleen Murphy, DNP, MSN, BSN, Fox Chase Cancer Center

Ethical Needs Assessment of Associate Degree Nurses Seeking a Bachelor’s Degree
Annie Huynh, DNP, RN, PHN, FNP-BC, CNOR, and Heidi He, DNP, MSN, FNP-C, RN, FNP, CSU Bakersfield

Following Advance Care Plans for Patient Preferences at End of Life
Savitri Singh-Carlson, APHN-BC, PhD, FAAN, San Diego State University

Frank Sinatra Captivates College Students to Work in Hospice Care
Lori Montross Thomas, PhD, LightBridge Hospice and Palliative Care, and Katrina Boltz, Student, CSU San Marcos

Getting What You Want as You Age: Advance Care Planning Learning Program
Sheri Mauk, BS, and Teresa Cooney, PhD, University of Colorado Denver

Hope Made Visible™: A World Wide Healing Movement Sharing Flags
Alessandra Colfi, PhD, UC San Diego Health System, San Diego Cancer Research Institute

Moving Forward: Improving Access of Palliative Care Services of Indian Migrants with Terminal Illness
Sujatha Shanmugasundaram, PhD, GCTE, MACN, California State University Fresno

Narrative Medicine for Healthcare Providers: Improving Practices of Advance Care Planning
Cara Wallace, PhD, LMSW, Saint Louis University
5:00 PM  POSTER SESSION  REGATTA PAVILION

New Nurse’s Experiences Caring for Patients and Their Families at the End of Life
Bethany Nasser, PhD, RN, Endicott College

Outcomes Associated with a Nurse-Driven Palliative Care Protocol in the ICU
Kim Martz, PhD, RN, Boise State University

Principles of Palliative Radiotherapy: Didactic Training for Hospice and Palliative Medicine Fellows
Emily Martin, MD, University of California, San Diego

Problems and Prospects in Providing EOL Care for Older Adults in Allahabad, India: Physician’s Perspective
Rashmi Gupta, PhD, San Francisco State University

Service Providers’ Perceptions of Pain Management Needs Among Rural Older Adults
Hyunjin Noh, PhD, MSW, University of Alabama

Teaching Undergraduate Nursing Students About Serious Illness: An Alternative Course Design
Amy Beasley, RN, DNP, University of Alabama

The “D-Word” – An Undergraduate Learning Experience in Talking About Dying
Raeanne LeBlanc, PhD, DNP, AGPCNP-BC, CHPN and Maureen Groden, MS, RN, CHPN, University of Massachusetts Amherst; and Olga Ehrlich, PhD, RN, CHPN, Dana-Farber Cancer Institute

The Impact of Lay Navigators on Access to Cancer Services in a Pacific Islander Community
Corina Penaia, MPH, and Diana Tisnado, PhD, California State University Fullerton

Understanding and Measuring the Experience of Symptom Burden in Heart Failure
Macy Stockdill, The University of Alabama at Birmingham

What Gives Your Life Meaning (WGYLM™): Increasing High School Students’ Awareness of Palliative Care
Kathy Givens, MS in Gerontology, CSU Long Beach

When Crucial Conversations Become Critical: POLST? Code? What’s That?
Hannah Farquharson, MD, Watsonville Community Hospital; Jack Belshe, Student, University of Southern California; and S. Xavier Cortes, Student, Cabrillo Community College

5:00 PM  RECEPTION  BAYVIEW TERRACE

6:30 PM  ADJOURN

Continuing Education for the Symposium: 13.5 hours

CME Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of The Doctors Company and California State University Institute for Palliative Care. The Doctors Company is accredited by the ACCME to provide continuing medical education for physicians.

The Doctors Company designates this live activity for a maximum of 13.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.
**FRIDAY, OCTOBER 12**

**7:00 AM  WORKSHOP**

**PALM BALLROOM I**

*Meditation in Motion: Yoga*

Alessandra Colfi, PhD, UC San Diego Health System

Join in for a restorative, soothing, focused yoga session as a meditation in motion set to music that will relax your body and sharpen your mind. This session will be an easy and relaxing process with guided self-awareness through music, blending asanas and spontaneous, intuitive movements, ending with a deeper guided meditation. Meditation in Motion offers participants direct experience of yoga as a set of tools/modality with research and evidence-based applications and benefits in palliative care.

**7:30 AM  BUFFET BREAKFAST**

BAYVIEW TERRACE

**7:30 AM  BREAKFAST FOR CSU FACULTY**

MARINER POINT ROOM

**8:25 AM  WELCOME**

BAYVIEW BALLROOM

Adam Shapiro, PhD, Director, University Relations & Research, CSU Institute for Palliative Care and Professor of Sociology, CSU San Marcos

**8:30 AM  MORNING KEYNOTE**

BAYVIEW BALLROOM

*Accessing Hospice and Palliative Care: The Influence of Culture on End-of-Life Decision Making*

Karen Bullock, PhD, LCSW, Professor and Department Head, Department of Social Work, and John A. Hartford Faculty Scholar, North Carolina State University

Medical advances have made it possible for people to live longer with chronic and terminal illnesses. Hospice and palliative care have become the gold standard for a good death, treating patients’ symptoms, while eliminating protracted, painful, end-of-life experiences. Data show racial and ethnic differences in the utilization of hospice and palliative care, across groups.

Expected to be the majority by 2050, people of color are more likely to experience greater chronic disease-related mortality and morbidity rates. While people in the U.S. are living longer with chronic/noncurable illness and disease, the disparity in health service access and utilization for all people is of concern for those of us who spend our entire careers searching for answers that will lead to the elimination of barriers and improve the quality of life, until the end.

This lecture identifies numerous challenges that palliative care practitioners confront as the U.S. becomes increasingly more diverse, and more especially, for those of us who see cultural competence as a tool for improving access to resources across groups, and across practice paradigms and populations. Finally, it examines the complexities of cultural diversity and explains how lack of inclusiveness and attention to diversity affect all aspects of our lives in practice and in our communities.

**9:30 AM  BREAK WITH EXHIBITORS**
10:00 AM CONCURRENT SESSIONS

BAYVIEW I

Workshop: Mindfulness: Integrating Mind, Soul, and Neuroscience in Education and Practice
Jerome Front, LMFT, Pepperdine University

Serious illness, transition, and loss are often an emotional roller coaster for the entire family, as well as the helping professionals involved. These situations are not only when a family needs their most effective coping skills, but also a time of high stress risk for clinicians and caretakers, which can lead to burnout, emotional fatigue, and shutting down. This educational workshop will review recent research on mindfulness and summarize several practical ways mindfulness can be taught to palliative care staff and integrated into therapy. Participants will learn how mindfulness can be used for therapist self-care, and how a clinician’s own mindfulness builds essential, relational/clinical qualities. This workshop involves both a didactic and an active, experiential learning process that serves as a clinical foundation for both practicing and teaching mindfulness in palliative care.

BAYVIEW II

Workshop: Where Do We Start? Preparing for Interprofessional Education in Palliative Care
Tara Schapmire, PhD, MSSW, CSW, OSW-C, FNAP, Barbara Head, PhD, RN, CHPN, FPCN, ACSW, and Mark Pfeifer, MD, University of Louisville

This workshop will provide methods and tools for building interprofessional faculty teams and planning interprofessional education (IPE) offerings in palliative care. A faculty team experienced in the development of a mandatory IPE curriculum in oncology palliative education will lead this interactive workshop. It will explore the definition and core competencies for IPE as a basis for designing activities and curricula, how to evaluate their own and their institution’s readiness for participation in IPE using standardized tools and an evaluation process, the importance of faculty development, and examples of activities for such development. Common barriers to IPE will be delineated and solutions offered. Methods for designing IPE activities will be presented and attendees will be able to develop a draft plan for an IPE activity by the end of the session.

CROWN POINT

Workshop: Ethical Challenges in Palliative Care Research
Jennifer Moore Ballentine, MA, CSU Institute for Palliative Care

Academic researchers are forging partnerships with inpatient and community-based palliative care and hospice services to gain access to a research population. As the palliative care academic and clinical communities advance the evidence base for effective care on behalf of all our current and future patients, we must also consider the particular vulnerabilities of seriously ill and dying patients and their families, the burden of additional work placed on already overextended clinical staff, and the complicating clinical and administrative realities in which we operate. This workshop will explore the current “research landscape” in palliative care, examine the ethical objections to and justifications for participating in clinical research projects, and engage participants in an interactive exercise to develop organizational strategies – or “ethics infrastructure” – to guide research-oriented activities and respond to potential dilemmas and conflicts.

Join the Conversation
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BELMONT
Panel: Elevating Awareness of Palliative Care through Humanities
Michael McDuffie, PhD, Allison Merrick, PhD, and Marion Geiger, PhD, CSU San Marcos

This panel brings together colleagues from different disciplines to explore how teaching the medical humanities can enhance the quality of student response to palliative care themes, issues, and concepts, across curricula for different student audiences. Panel members share examples of classroom discussion strategies, prompts, and assignments, demonstrating how they use the medical humanities to introduce students to topics of serious, chronic illness, mortality, and the ethics of providing care for those in need.

The goal of the panel is to illustrate how classroom discussion of narrative, dramatic, and visual texts, in various mediums, can elevate the quality of student reflections on issues of embodiment, illness, aging, decline, dying, interdependence, and other features of human existence. In turn, these reflections lend greater depth and personal interest to more focused discussions of quality of life, pain and suffering, and the goals of medical, nursing, and spiritual care---concepts fundamental to the professional education of (palliative) healthcare providers.

BAYVIEW III
Paper Session: Palliative Care Practice in Diverse Settings
Using Big Data to Trigger Palliative Care in the ICU and the Step-Down Unit
Rebecca Gagne Henderson, APRN, ACHPN, PhDc, Yale New Haven Health Systems

Despite the increased number of palliative care teams in the U.S., access to palliative care in the hospital ICU continues to be inadequate. A barrier to access may be the difficulty in identifying those patients with palliative needs using a simple method. A pilot was conducted to determine the efficacy of using the Rothman Index (RI) and a predetermined length of stay (LOS) as an automatic trigger for a palliative care consultation, and to measure outcomes for patients who receive a palliative consultation using the trigger as criteria and compare them with those who meet criteria and do not receive a palliative consultation.

Comparing the Effectiveness of Strategies for Delivering Home-Based Palliative Care
Huong Nguyen, PhD, RN, Jason Ngo, MD, and Nicki Vathalani, MD, Kaiser Permanente

Palliative care clinician leaders and health systems such as Kaiser Permanente, which has nearly 10 years of experience providing home-based palliative care (HBPC), need research guidance to determine how best to refine HBPC services to meet the rapidly growing demand for HBPC while preserving its effectiveness and affordability. This study compares a standard HBPC model that includes routine home visits by a nurse and provider with a more efficient tech-supported HBPC model that promotes timely interprofessional care team coordination via synchronous video consultation with the provider while the nurse is in the patient’s home.

See p. 10 for Symposium CE and CME information
**Cardiac ICU Family Members’ Opinions Regarding Common Components of Bereavement Support**

Alyssa Erikson, RN, PhD, CSU Monterey Bay, and Jennifer McAdam, PhD, RN, Samuel Merritt University

Because of the high potential of death in an intensive care unit (ICU), incorporating bereavement support is strongly recommended by critical care consensus groups. Despite these recommendations, limited research exists on what type of bereavement support is needed by cardiac ICU families. This study reports on the opinions of family members of deceased cardiac ICU patients regarding common components of bereavement support, and may guide future clinical interventions to help support bereaved ICU family members.

**Advance Care Planning in a Skilled Nursing Facility: A Quality Improvement Project**

Dane Shoemaker, DNP, NP-C, CSU Fullerton

Demand for higher quality care at the end of life calls for improvements in bedside nursing related to palliative care (PC) including advance care planning (ACP). A centerpiece of ACP is the completion of the Physician’s Orders for Life-Sustaining Treatment (POLST) form. This project undertook improvement ACP activities in a large post-acute care facility located in Southern California through development and implementation of a PC-centered training program for licensed and non-licensed nurses, and evaluation of the effectiveness of the intervention.

**Practice Makes Perfect: Ed-Tech for Communication Skill Training On-Line**

Lynee Sanute, MLIS, MA, and F. Amos Bailey, MD, University of Colorado Denver

Communications training/skills acquisition for providers is critical to extend high-quality palliative care services. Communication education is limited by the need for opportunities to practice, receive feedback and apply new skills in realistic simulations. Face-to-face communication training faces financial and logistical barriers for time, travel, and space. Augmenting communication education with on-line technology allows students to practice and perfect communications skills asynchronously and receive expert/peer feedback as needed to extend education and training to more providers. This grant supported the evaluation of the feasibility, acceptability, and potential effectiveness of YouSeeU™ software in PC communication training on-line.

**Enhancing Palliative Care Knowledge Through a National Lifelong Learning Network**

Brian Carpenter, PhD, Washington University in St. Louis

Members of this project created a palliative care educational program for adults that includes a discussion and framework for advance care planning. The results of the project will be discussed.
Developing Culturally Based Communications Tools with African American Community Members
Ronit Elk, PhD, The University of Alabama at Birmingham

The goal of this three-phase study is to determine the feasibility of developing, implementing, and delivering a culturally based communications training program for nurses caring for southern African Americans with a serious illness. This report describes Phase 2, the development of a training program by adapting an evidence-based communication tool to fit the culturally based preferences and values of rural Southern African Americans. This study is guided by principles of Community-Based Participatory Research, a collaborative approach between academia and community, used to address health disparities.

Increasing Palliative Care Within the Latino Community
Joy Goebel, RN, MN, PhD, FPCN, and Mara Bird, PhD, MA, CSU Long Beach

Building on prior work, this project aimed to create and deliver education to members of the Long Beach area Latino community on chronic disease, understanding medications, and getting the most out of their doctor and their life. The report will discuss the results.

Somatic Movement with Music Protocol Development and Implementation for Seniors in Hospice Care
Wendell Hanna, PhD, San Francisco State University

In this project, a program of music and exercise was created for bedridden, wheelchair, and ambulatory seniors in hospice to ease pain and improve joint motion. The report will discuss the results.

3 Wishes: Creating a Meaningful End-of-Life Experience in the Intensive Care Unit
Thanh Neville, MD, MSHS, and Peter Phung, MD, MBA, University of California Los Angeles

Although the intensive care unit (ICU) is where clinicians combat critical illness with advanced technology and invasive procedures, it is also frequently the location where end-of-life care is delivered and where many families will spend their final days together. The study by Cook and colleagues, “3 Wishes,” demonstrated that a humanized death experience could be achieved in their ICU by having the clinical team elicit and implement a dying patient’s 3 final wishes. This project reports on the pilot of “3 Wishes” in the UCLA medical intensive care unit for patients over the age of 65 and evaluates the interventions’ effect on patient and clinician satisfaction.

Symposium Presidential Address
Karen S. Haynes, PhD, President, California State University San Marcos

Awarding of 2018 Seed Grants
Brenda Schmitthenner, MPA, Program Officer and Senior Director, Gary and Mary West Foundation

Seed Grants Generously Funded by the Gary and Mary West Foundation
Redesigning Stroke Rehabilitation: Applying Palliative Care Concepts
Nidhi Mahendra, PhD, San Jose State University
Stroke is among the leading causes of death and long-term disability in the United States, with nearly 800,000 Americans experiencing a stroke each year; an estimated 7 million Americans live with the long-term effects of a stroke. A seriously disabling consequence of stroke, aphasia, a language disorder that severely impairs communication despite the person’s intellect being spared, is insufficiently prescribed rehabilitation. This individual paper presents the design, development, and first-year outcomes of a new stroke rehabilitation program that provides stroke and brain injury survivors a higher dosing of rehabilitation that focuses on improving life participation, reducing disability, and optimizing wellbeing and quality of life of patients and their families.

Changing the Culture of Pediatric Palliative Care at the Bedside
Susan Shields, MSN, ARNP, CPNP, Johns Hopkins All Children’s Hospital
To provide quality care at the bedside, it is necessary to engage frontline staff in the delivery of palliative care; however, nurses report a lack of knowledge and confidence in providing the essential components of palliative care.

The paper describes a program that was designed to identify and train palliative care experts at the bedside, incorporating interdisciplinary provision of care, collaboration between the palliative care team and unit staff, and education to train and provide ongoing support to staff.

What’s in the Syringe? Examining Dose in Palliative Care Psychoeducational Interventions
Rachel Wells, MSN, RN, CNL, and Marie Bakitas, DNSc, CRNP, FAAN, The University of Alabama at Birmingham
Many palliative care interventions can be categorized as psychoeducational interventions, designed to influence certain behaviors. Most psychoeducational interventions are based on health behavior theories that prescribe approach, but not amount or “dose” to be administered. This study identifies how “dose” is a fundamental component of intervention quality and success in psychoeducational interventions, and discusses methodological and quality issues in intervention design and comparative effectiveness research.

Palliative Dialysis in Older Adults with ESKD
Debra Hain, PhD, ARNP, AGPCNP-BC, FAANP, FNKF, Florida Atlantic University
This presentation will discuss dialysis as palliative care to achieve a goal or be present for an older adult population with ESKD. The presentation will include communication strategies regarding treatment options, symptom management, transitioning to hospice and withdrawal from dialysis. Quality process and outcome measures will be discussed. In addition, educational, practice and future research implications will be presented.
Belmont Workshop: Using Digital Story-Telling to Make Meaning About Loss and Grief

Raeann LeBlanc, DNP, AGPCNP-BC, CHPN, and Maureen Groden, MS, RN, CHPN, University of Massachusetts Amherst; and Olga Ehrlich, PhD, RN, CHPN, Dana-Farber Cancer Institute

In this interactive workshop, participants will explore digital story-telling and its application to teaching, learning, and group work of all kinds, to explore meaning-making from loss and grief through the use of this medium. Digital story-telling is a method of storytelling that expands narrative into the digital realm with select images, music, and art resulting in videos of three minutes or less.

The background of digital story-telling, its use in promoting effective learning and reflective listening, and research on approaches and learning outcomes in a range of applications in teaching and learning across disciplines, software selection, copyright issues, and more, will be discussed.

Resources, including rubrics and assignments related to digital story-telling as a classroom learning activity, will be included. Participants will create a single-image digital story using their own image, brought to the workshop, as part of the experimental approach to learning.

Crown Point Workshop: The Case for E-Learning in Palliative Care

Jill Guffey, BA, CSU Institute for Palliative Care

The CSU Institute for Palliative Care produces interactive courses that strive to efficiently convey the person-centered approach that is integral to palliative care.

This workshop will use examples from the Institute’s courses to demonstrate the process of writing course material and how it is then translated to become interactive and meaningful online content for healthcare providers, students, and educators. Interactive features used in courses and a brief explanation of the course building process will be demonstrated, using case studies, learning activities, learning reinforcement scenarios, and review activities.

Research on the efficacy and adoption of online learning, along with open source tools that can be used in building elearning, will be discussed. Participants will build an interactive case study in the Institute’s template, and discuss.
FRIDAY, OCTOBER 12

2:15 PM CONCURRENT SESSIONS

BAYVIEW I

Workshop: Integrating Spirituality into the Education of Palliative Care Professionals

Helen McNeal, BBA, CSU Institute for Palliative Care; Trace Haythorn, PhD, Association for Clinical Pastoral Education (ACPE); and Jamie Beachy, PhD, MDiv, CSU Institute for Palliative Care

Spirituality is a vital ingredient in the provision of palliative care. For those educating palliative care professionals in their various disciplines, it can be challenging to integrate spirituality at the level of quality and excellence it deserves. This workshop will provide participants with a deeper understanding of the importance and demonstrated impact of spirituality on care as well as proven practical approaches to engaging expert spiritual care providers into their curriculum and clinical experiences. Using resources to equip academic educators with clarity on the standards for excellence in chaplaincy generally, and in palliative care specifically, examples of academic collaborations that are successfully integrating spiritual care will be discussed.

BAYVIEW II

Workshop: Preparing for the Changing Expectations of Patient 2.0

Judy Thomas, JD, and Kristine Wallach, BA, Coalition for Compassionate Care of California

The core principles of palliative care lay the foundation for the delivery of person-centered care, yet are not routinely taught in professional education, nor well understood by the general public. In this interactive workshop, we will discuss the changes in healthcare that are being driven by engaged, educated, and empowered patients (e-Patients), and the rise of patient experience as a measurement in healthcare. No longer are patients willing to be passive recipients of healthcare. Patient 2.0 has created an environment that changes the traditional power balance by developing previously unheard of tools and support networks for patients. Embracing this movement of patient empowerment will be discussed as a way to increase consumer awareness and accelerate public demand for palliative care.

3:30 PM BREAK

3:45 PM CLOSING KEYNOTE

Strengthening the Palliative Care Tapestry with the Essential Threads of Culture and Diversity

Marie Bakitas, DNSc, NP-C, FAAN, Professor, Marie L. O’Koren Endowed Chair, School of Nursing, and Associate Director, Center for Palliative and Supportive Care, The University of Alabama at Birmingham

In this year’s closing keynote, Dr. Bakitas will weave together the threads of the conference theme – quality in education, research and practice – with the threads of her own work which for the span of her career has been the embodiment of the symposium’s theme. She will describe essential elements of quality in palliative care education, research, and practice; offer innovative methods to ensure representation of diverse populations in palliative care; and share with attendees her thoughts on the work that remains to be done to extend palliative care everywhere.

4:45 PM CLOSING ANNOUNCEMENTS

5:00 PM ADJOURN

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HELP PLAN NEXT YEAR’S PROGRAM

Interested in helping shape the 2019 National Symposium’s program? We are seeking accomplished academic palliative care professionals to join our 2019 Program Committee. Please contact Adam Shapiro, PhD, Director of University Relations and Research at the CSU Institute for Palliative Care at ashapiro@csusm.edu for more information.

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