

Palliative Care Intersession 2010

						Assessment Block
		Monday	Tuesday May 25, 2010	Wednesday May 26, 2010	Thursday May 27, 2010	Friday May 28, 2010
Lectures & Small Group Learning	8:00		Course Introduction	Spiritual/Cultural Issue around Decision Making at the End of Life	Symptoms III	EXAM
	8:30		Overview Palliative Medicine & Hospice			
	9:00		Breaking Bad News	The Family Meeting	Final Hours	
	9:30				Symptoms II	
	10:00			Symptoms I		
	10:30					
	11:00					
	11:30					
12:00						
Lunch /Travel	12:30-2:00					
Afternoon Experience	2-4		Hospice Visit OR Reflection/self care OR Standardized Patient	Hospice Visit OR Reflection/self care OR Standardized Patient	Hospice Visit OR Reflection/self care	
	4-6					

Palliative Care Intercession 2010

Course Directors: Michael Carducci, MD, Grace Cordts, MD, Nancy Hutton, MD

Objectives for Course

- 1) Differentiate between palliative care and hospice
- 2) Recognize that specific skills can be acquired in order to deliver good palliative care
- 3) Outline an approach to symptom management
- 4) Establish a framework for communicating bad news to individuals and their families
- 5) Give examples of the multidimensional aspects of palliative care
- 6) Appreciate the role of the physician in the interdisciplinary team in delivering palliative care
- 7) Examine personal response to caring for the dying patient
- 8) Distinguish the expected course of normal grieving from complicated bereavement

PRE-TEST (On line multiple choice exam – must be completed prior to first session)

Day One: Tuesday, May 25, 2010

Morning Sessions (Armstrong Building lecture hall, small group breakout rooms)

8-830 Course Introduction and Goals (Joint Course Directors)

830-10 Overview of Palliative Medicine and Hospice
Cameron Muir, M.D.

Objectives:

- 1) Define palliative care, including its history and evolution
- 2) Identify distinctions that separate/define palliative care and hospice
- 3) Recognize need for specific skills in delivering palliative medicine
- 4) Appreciate that palliative care requires a inter-disciplinary team

Teaching Technique: lecture, power point, audience participation

10-11 Breaking Bad News
Michael Carducci, M.D.

Objectives:

- 1) Describe a framework for breaking bad news
- 2) Understand that what constitutes “bad news” varies across patients and situations
- 3) Explore barriers to effective communication

Teaching technique: lecture, power point, short video introduction followed by individual experience with Standardized Patient/ Family Meeting in the afternoon small group sessions

11-1230 Symptoms I
Nancy Hutton, MD

Objectives:

- 1) Recognize that common symptoms exist across varying diseases
- 2) Develop diagnostic and treatment plan appropriate to patient
- 3) Discuss potential pharmacologic and non-pharmacologic interventions
- 4) Explore management issues based on care setting of patients

Teaching Technique:

- Large Group (30 min) lecture, power point, introduction to symptom management, instructions for team-based learning exercise that continues through the 3 day course
- Small Group (team-based learning) – assigned groups work as team on one of four clinical cases, assess for symptoms, create treatment plan, create one page info sheet for classmates in other teams, prepare and present 10 minute power point to other teams on day 3.

Resources:

- Case scenarios
 - Inpatient female adult with COPD – *Dyspnea*
 - Inpatient male adult with Cancer- *Delirium*
 - Home hospice female adolescent with HIV- *Nausea/Vomiting*
 - Outpatient young male with closed head injury - *Constipation*
- *AAHPM Primer on Palliative Care*
- Faculty (physicians, nurse practitioner, pharmacist) available as learning resource during scheduled small group sessions on days 1 & 2

Afternoon Experiential Learning Activities (2 hours)

Each student will participate in each of three activities over the course of three afternoons.

❖ Hospice Patient Visits

Objectives:

- 1) Experience a patient in home or inpatient hospice
- 2) Describe benefits for provision of care in non-hospital setting
- 3) Understand the contributions of hospice team members
- 4) Understand the technology that can be provided in the home
- 5) Not all hospices are alike

Teaching technique: accompany and observe hospice nurse on patient visit (home, nursing home, inpatient hospice unit); student must arrange own transportation

❖ Reflection/Self Care

Objectives:

- 1) Recall death is a natural part of life
- 2) Recognize individual variation in personal beliefs and responses to a death
- 3) Establish one's own perception of death and dying
- 4) Appreciate impact of personal experience on attitudes/assumptions of end of life care
- 5) Provide insight into how to deal with patient death in the future

Teaching Technique: facilitated small group discussion, reflective writing, personal advance directive (Five Wishes); Armstrong Building

❖ Standardized Patient

Objectives

- 1) Practice breaking bad news, communication skills with standardized patient
- 2) Utilize SPIKES framework for delivering bad news
- 3) Integrate feedback into practice
- 4) Reflect on one's own emotional response to giving bad news
- 5) Develop skills to provide peers and other professionals feedback

Teaching technique: Formative Small Group Learning with Feedback, oncology patient scenario with key diagnosis, relapse, and prognosis milestones for sequential student-standardized patient communication training for discussing serious information; Simulation Center JHOC

Day Two: Wednesday, May 26, 2010

Morning Sessions (Armstrong Building lecture hall, small group breakout rooms)

8-930 Cultural and Spiritual Issues around Decision Making at End of Life
Grace Cordts, M.D. Moderator
Panel of invited speakers representing major faith traditions

Objectives:

- 1) Be able to describe how to take a spiritual history
- 2) Describe different religious perspectives on end of life care
- 3) Discuss cultural influence on dying rituals

Teaching Techniques: Large group, panel members present, audience interaction

Resources/Reading:

- Brown AE, Whitney SN, Duffy JD [The physician's role in the assessment and treatment of spiritual distress at the end of life](#). Palliat Support Care. 2006 Mar; 4(1):81-6. Review
- Fast Facts: Physicians and prayer requests; Taking a spiritual history

930-11 The Family Meeting

Sydney Dy, M.D.

Objectives:

- 1) Recognize triggers to call/conduct a family meeting
- 2) Identify a strategy to run a family meeting
- 3) Identify roles of the different team members in a family meeting
- 4) Summarize potential objectives and next steps/goals resulting from a family meeting

Teaching Technique:

Large group (45 min) – lecture, power point, video, introduction to conducting family meetings

Small groups (45 min) – skills practice, role play, faculty facilitator

11-1230

Symptoms II

Student teams meet again to continue work on their clinical case and plan team presentation to classmates for day 3; resource faculty available

Afternoon Experiential Learning Activities (2 hours)

Each student will participate in each of three activities over the course of three afternoons.

- ❖ Hospice Patient Visits
- ❖ Reflection/Self Care
- ❖ Standardized Patient

Day Three: Thursday, May 27, 2010

Morning Sessions (Armstrong Building small group breakout rooms, lecture hall)

8-930

Symptoms III

Student teams present their clinical case, symptom assessment, and treatment plan to three other teams and faculty facilitator (four different symptom cases presented within each of three larger groups so that all students learn from peers about each symptom)

930-1030

Final Hours

Danielle Doberman, M.D.

Objectives:

- 1) Describe the physiology and progression of death
- 2) Determine and declare death/ pronouncement
- 3) Recognize skills to communicate that an individual has died
- 4) Understand how to complete a Death Certificate

Teaching Technique: lecture, power point, video clips, audience participation

Resources/Reading: *Gone From My Sight*

1030-1130 Grief and Bereavement
Elizabeth Keene, MA, CTC

Objectives:

- 1) Define loss and bereavement
- 2) Distinguish between normal and complicated grief/bereavement
- 3) Appreciate the physician's role in bereavement care
- 4) Recognize professional grief that many result from repetitive loss

Teaching Technique: lecture, power point, audience participation

1130-1230 Ethical and Legal Issues in End of Life Care
Mark Hughes, M.D.

Objectives:

- 1) Be able to discuss advance directives
- 2) Discuss the ethical and legal aspects of discontinuing medical treatments
- 3) Understand state definitions of futility

Teaching Technique: lecture, power point, audience participation

Afternoon Experiential Learning Activities (2 hours)

Each student will participate in each of three activities over the course of three afternoons.

- ❖ Hospice Patient Visits
- ❖ Reflection/Self Care

Day Four: Friday, May 28, 2010

Assessment Block

8-11 Computer-based final exam: multiple choice questions on course content and essay reflection on hospice patient visit – tie is at least one principle of palliative care

Grading Matrix:

- Attendance & participation in small group activities
- Faculty assessment of team product (symptoms TBL) – presentation and handout
- Peer assessment by team members of individual participation and contribution (symptoms TBL)
- Multiple choice exam – proportion correct
- Exam essay (2 faculty readers for each essay) – describes patient and identifies one or more palliative care principles

Student Course Evaluation (Blackboard)