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Poster Abstracts

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ELNEC-Pediatric Palliative Care: From a Spark of Interest in End of Life Care to a Burning Passion for Pediatric Palliative Care (PPC)

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In May of 2004, ten associates from Children's Hospital of Orange County (CHOC) attended the ELNEC-PPC course. Intent to spread their passion for pediatric palliative care and armed with an evidence-based curriculum, this group taught the first CHOC ELNEC-PPC course in the fall of 2004, which coincided with the opening of the Rainbow Room. The 15 attendees from the first course created a buzz and sparked an interest in ELNEC-PPC which caused course attendance to steadily increase, resulting in over 200 ELNEC-PPC trained participants in just eight courses. In June 2006, ELNEC-PPC became a required course for hematology/oncology staff. ELNEC-PPC was also incorporated into CHOC's RN Residency program. Passionate about pediatric palliative care and ignited by the spread, one of the original ELNEC-PPC trainers, a staff RN who swore she would never speak publicly, is now the ELNEC-PPC educator! She currently coordinates, facilitates, teaches, and mentors other staff as instructors for CHOC ELNEC-PPC courses.

Susan Breakwell, RNC, DNP; Margaret Faut-Callahan, PhD, RN, FAAN; Martin Gorbien, MD, FAAC; Judith Paice, PhD, RN, FAAN; Rosemarie Suhayda, PhD, RN, CS; Monda Tareen

An Interdisciplinary Palliative Care Education Program

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Educating students in palliative care principles remains a challenge for academic and practice settings. There is clearly a need for improved access to education about caring for individuals and families faced with serious and life-limiting illness across disciplines. A National Institute of Health (NIH)-funded project to develop, implement, evaluate and sustain an interdisciplinary palliative care education program in an academic medical center was instituted. A course, comprised of online didactic and discussion components, a simulation laboratory session and clinical observation experience were developed, incorporating elements from ELNEC, EPEC and the National Consensus Project. By the end of the current academic year (spring 2008), over 200 students from graduate nursing, medicine, occupational therapy, chaplain, and ethics programs will have completed the course.

Jeri Conboy, PhD, LCSW, Sharon Olson, RN, CHPN, Beth Anderson, RN, CHPN, and Sharon Sandidge, RN

End of Life Care: A Mosaic of Approaches

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A collage is defined as a composition made of many materials incorporating diverse elements. Promoting excellent palliative care requires a collage of efforts to meet the diversity of the individuals that will both provide and receive care. Like the lives of individuals that receive care, excellent care at the end of life represents a mosaic of approaches. ELNEC provides the knowledge base and tools to create this mosaic. This poster creates a collage to highlight the first 18 months of introductory education using the ELNEC curriculum. Training presenters represent hospice, palliative care, and education staff and the disciplines of nursing, social work, and chaplain. Newsletter articles and video collages' have been developed to supplement the ELNEC curriculum, related to diversity and grief and bereavement. The approaches, audiences, and trainers are represented in this collage.

Alice Conway, PhD, CRNP and Patricia Nosel, MN, RN

Journey of One University in Providing Interdisciplinary Graduate Palliative and EOL Care Education

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In 2005, two ELNEC trainers on faculty at a large state system university decided to develop an interdisciplinary graduate certificate program in palliative and end-of-life care. Graduate programs in social work, counseling, and speech and language pathology expressed interest and willingness to assist in this development. Since this was a new university initiative, many people and committees had to approve of this program. In order to reach interested professionals in this mainly rural state, the decision was made to offer the courses online. Keeping a sense of humor was a critical element to the program's development. Some people inquired about the "afterlife" program while others called it the "death curriculum." The journey of the challenges and successes in the development of the program to actually offering the courses to the first class will be described.

Pat DeBusk, RN and Yvonne Blevins, RN

"ELNEC-SuperCourse:" Meeting Specific Needs of Specialty Groups

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Harris Methodist Fort Worth hosts an ELNEC-SuperCourse to incorporate the ELNEC-Core curriculum with specialty discipline breakout sessions. This program was developed because of small classes when a specific specialty ELNEC course was offered. With the SuperCourse, the two morning Core presentations are applicable for all participants. To address the specific needs of the specialty groups, the afternoon breakout sessions zero-in on situations unique to pediatrics, oncology, critical care, medical/surgical, and hospice caregivers. Enrollment improves, and greater attendance encourages more discussion and experience-sharing. End of life situations for both new and experienced nurses are discussed by hospital staff and community hospice

providers. This mixture of participants encourages information exchange, and reviews many unusual circumstances that present themselves at the end of life.

Teresa Howell, MSN, RN, CNE and Nathania Bush, RN

Camp Smile: Service Learning

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Camp SMILE (Sharing Memories in a Loving Environment) is the collaborative effort of Morehead State University Department of Nursing and St. Claire Regional Medical Center Hospice. The Department of Nursing course (NUR 385) was designed to increase students' understanding and appreciation of caring for bereaved adolescent and school age children who have experienced the loss of a loved one within the past year. It is designed to foster critical thinking, intellectual, and creative development of the pre-licensure nursing student with an emphasis on community-based nursing through service learning. This course incorporates an opportunity for students to learn, critically think, explore current literature and meet challenges involved in caring for bereaved children while serving the community in a collaborative effort with the local hospital and hospice organizations. This course was taught in the Spring Semester through seminar and is Blackboard web-enhanced to prepare students for the camp experience in the summer of 2008.

Karen Kavanaugh, PhD, RN, FAAN, MaryBeth Tank Buschman, PhD, RN, C, Gloria Henderson, RN, MSN, Vicki Andreoni, MS, RN, CPNP & Sandra Burgener, PhD, APRN-BC, FAAN

Developing Courses on Palliative and End-of-Life Care for Undergraduate and Graduate Nursing Students

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The standard curriculum in nursing programs contains little content on palliative and end-of-life care. Therefore, our goal was to develop elective courses in this area for upper division undergraduate and graduate nursing students. Two separate courses were developed: NUSC 494; Palliative and End-of-Life Care and NUSC 520: Dying, Loss, and Grief (This course was supported in part by the Advanced Practice Palliative Care Training Grant; Department of Health and Human Services Administration; 1 DO9HPO2996). For both courses, learning consisted of a combination of internet-based and in-person class sessions. NUSC 494 was developed directly from the ELNEC-Core modules. NUSC 520 includes content from ELNEC-Graduate modules. To date, each has been delivered two (NUSC 494) or three (NUSC 520) times to a total of 116 learners (69 undergraduate students, 43 graduate students; 4 non-student auditors). Course evaluations have been overwhelmingly positive. Our experience demonstrates the success of developing courses on palliative and end-of-life care for nursing students.

Carol G. Kelley, PhD, RN

Promoting Palliative Care in Advanced Practice Nursing (APN)

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An eight-hour ELNEC course, “Promoting Palliative Care in Advanced Practice Nursing” has been incorporated as a requirement for selected MSN specialties at the Frances Payne Bolton School of Nursing, Case Western Reserve University. These specialties included acute care, adult, family and geriatric. The course has also been offered to the preceptors of APN students and advertised on the ELNEC website. Since the summer of 2006, the course has been offered twice each semester with seven participating faculty. Faculty members enact a role play that includes a wife, her children, an APN and physician. The role play takes place at a family meeting, which concerns an elderly man in the ICU on mechanical ventilation, and encompasses a “bad example” and a “model example” of an APN who is facilitating a conversation with the family about the patient’s condition and goals of care. The role play is rated highly by participants and generates much discussion about barriers and facilitators to good communication and the role of the APN in end of life situations.

MariJo Letizia, PhD, CNP

Palliative Care Education: Innovative Strategies

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On-line courses have been developed in order to provide accessible learning for students across the country. The distance learning format is responsive to varying learning styles and provides great opportunity for active and interactive learning. Online courses accomplish critical thinking and reflection, as well as increased faculty-to-student and student-to-student interaction.

Distance learning programs can contribute to efforts at expanding end-of-life care education across the nation. Palliative care courses offered in this format enable students to become more competent and prepared for professional practice in caring for the dying and their families. This poster outlines components of an on-line graduate level palliative care course. Results of student course evaluations will be provided, along with faculty appraisal regarding the strengths and challenges of teaching palliative care using a distance learning format.

Dawn McKay, RN, MSN, CCRN

Sharing the Burden: Teaching Nursing Students About a “Good Death”

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Although nurses arguably have the most intimate relationships with patients and families, nursing curricula has failed in the past to provide adequate preparation for nurses to cope with the one inevitability in our patients’ lives—death. Using the principles and core knowledge developed by the End-of-Life Nursing Consortium (ELNEC), Liberty University has taught approximately 60 undergraduate and 25 graduate students over the past 7 years to deal with this difficult path in our patients’ lives and in our own. In an atmosphere where intimacy and sharing are possible, “the stories related here, stay here,” graduates and undergraduates learn and express in the safe community of the classroom. Tears are common, frustration and sadness are evident as students relate their experiences to date with death in today’s technologically-driven health care system. Students are encouraged to share thoughts and strategies for coping with burnout and compassion fatigue. Movies, a master case and story-telling provide the backdrop for this compelling course.

Denise Mitchell, MN, APRN, Tanya Schreiber, MSN, APRN, BC-PCM and Dr. Shirleen Lewis-Trabeaux, PhD, RN

Student Nurses Work with Our Most Vulnerable Population: Assisting Children With Grief

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Senior students in the Baccalaureate Nursing Program at Nicholls State University experience hands-on service learning while providing follow-up bereavement care and compassion for children through guided group activities, under the supervision of ELNEC-trained nursing faculty. The students recognize the value of providing community, family, and peer psychosocial support by assisting children through this difficult time. “Camp Brave Heart” is a one-day bereavement camp which provides a safe and wholesome environment of fun-filled activities for children, from South Louisiana, who have experienced the loss of a loved one, as well as the loss of property and other possessions (i.e. Hurricanes Katrina and Rita). Community partnerships were developed through this project (i.e. Bayou Region Hospice, LA State Police, “Grant-A-Wish”). A technical college assists the children in making “memory boxes.”

Betty D. Morgan, PhD, RN, CS

The Use of ELNEC in Educating Mental Health Nurses

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Nearly one in 20 people in the US experience a mental illness. Of those, 6% suffer from a serious mental illness. Adults with serious mental illness have at least double the risk of dying, compared to the general public. This increased risk of dying is due to diseases such as unexplained injuries, cardiac, respiratory, GI illnesses and neoplasm, as well as the increased risk of suicide and homicide. Additionally, people with addictive disorders have an additional risk of medical problems and related mortality. The number of people with dual or triple diagnoses (mental illness, addictive disorders and co-morbid medical conditions) is growing. Despite the increased numbers, there are few educational programs and little research addressing palliative and end of life care for those with mental illness and addictive disorders. Use of the ELNEC curriculum in providing nursing education for staff caring for this population is helpful, but nursing staff needed additional information in managing communication, pain management, and family communication issues. A proposal for offering a specific ELNEC program designed to meet the needs of those caring for this specialized population will be presented.

Ayda G. Nambayan, DSN, RN

ELNEC-PPC Goes International: Curriculum Placed on the World-Wide Web

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At St. Jude Children’s Research Hospital, we have developed the ELNEC-PPC as a course for our education website, www.Cure4Kids.org. Our goal is to provide an educational medium for the nurses in our international partner sites. The Cure4Kids team closely collaborated with the ELNEC-PPC team to develop the course that can be used either as a self-paced, independent study or as a resource for institutional training. The course was also translated in Spanish. Since inception on August 2004, the course has been accessed 22,800 times not only by nurses, but

also by other health care providers in several countries. Evaluation ratings related to topic appropriateness, level of presentation and usability rank between 90 to 100%. The usage pattern indicates the international need for palliative care education in all levels of providers.

Rita Stern, RN

Legacy Projects: Creating Physical Remembrances For Loved Ones

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A common fear expressed by patients nearing the end of their lives is that they are leaving behind unfinished business. As a means of alleviating such fears, patients were engaged in task oriented projects termed “*Legacy Projects.*” Patients created physical remembrances such as letters and recordings that would be shared with loved ones after the patient’s death. Such projects allowed patients to preserve their identity and share their knowledge and wisdom, thus helping them to perceive meaning in their deaths. When possible, family members were involved in these projects, or were given separate projects and tasks, helping to facilitate a good death. Patients reported that their projects allowed them to come to terms with the unavoidable future with comfort and peace. Many felt the projects completed their life stories. Families described the projects as a journey of healing through reminiscing. Families also said the projects lessened the sense of loss and provided on-going comfort.

Linda K. Strodman, PhD, RN and Maureen Goode Giacomazza, MA, RN

Can There be a Good Death?: Evaluation of an End of Life Educational Intervention

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In today’s highly technological health care system there are times when the trajectory of life-threatening illness shifts from a curative to comfort focus as the patient approaches death. This shift is often the hardest decision-making process that health professionals face in their interactions with patients and families. It is further complicated by the fact that most healthcare professionals lack basic end-of-life education in their professional training. Consequently, they are not comfortable with matters related to death and dying and experience discomfort with providing care for the dying. This adversely affects the quality of end-of-life care. “Evan Mayday’s Good Death” is a highly emotional, educational, life-affirming documentary that illustrates how one team and one family confronted and collectively granted a dying patient’s last request. Through this story about a 63-year-old man who chooses to have life-support withdrawn, health professionals and students learn about collaborative care and the creativity that evolves in providing an individualized and personal “good death” experience. There is recognition not only of the suffering and struggles of the patient and family but also those that the health professionals face in caring for dying patients. (Note: This documentary was co-produced by Linda Strodman and Maureen Goode Giacomazza, both ELNEC trainers).

Dena Jean Sutermaister, RN, MSN, CHPN

HPNA Partners With Long-Term Care Nurses to Improve Palliative Care

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In April 2004, HPNA presented the ELNEC curriculum to dyads of hospice and long-term care nurses in Arlington, TX, thanks to a grant from the Project on Death in America (PDIA). This was the first of twelve ELNEC programs presented in different cities over the next four years. HPNA Chapters were assisted with the planning of each of the programs. Over 150 nurses attended these ELNEC programs. HPNA has an on-going objective to reach out to long-term care nurses. By hospice nurses inviting long-term care nurses, HPNA was able to educate these nurses about the care of persons with life-limiting illness. Following the program, all participants were invited to participate in an online forum or geriatric special interest group. It was through the Communities of Practice that we heard stories of how the nurses were able to improve care.

Katherine Tardiff, MSN, GNP-BC

ELNEC Curriculum Provides Foundation for the Design of Class and Clinical Graduate Nursing Courses

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Several factors impact the need for highly skilled advanced practice nurses specialized in palliative care, including the aging of the US population, increases in the numbers of those living with chronic illness, and the technological advancements that have shifted the goals of modern healthcare from care to cure. In response to this demand, the Palliative Care Program (PCP) at the William F. Connell School of Nursing at Boston College was developed in 2006/2007 with Health Resources and Services Administration grant funding. ELNEC materials formed a foundation for the design of the three 3-credit theory-based courses and two clinical courses. These courses were then integrated into the existing Master's curricula. Focusing on high-risk populations, with emphasis on ethnic and racial minorities, the PCP reflects the specialized needs of adult and older adult patients and families undergoing treatment for life-threatening illness, those facing death, and those with chronic illness requiring quality of life interventions. The program prepares advanced practice nurses in the Adult, Gerontological, and Community Health specialties to deliver patient and family centered care with the goal of improving quality of life and comfort for those with serious illness.

Vidette Todaro-Franceschi, RN, PhD

End of Life Education Via On-Line Community Blackboard

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This poster details the creation of the Hunter-Bellevue School of Nursing End of Life Care Online Community Blackboard at CUNY and how it fosters teaching-learning and communication about end of life care among all of the undergraduate generic nursing students. On this unique community board, the students can access a plethora of materials related to end of life care as well as share their reflections and experiences on the various discussion forums that have been implemented by faculty. Perhaps the greatest consequences of this innovative community board is the ongoing open support that flows between students and how it allows faculty to assist in the learning process relative to this critical content as needed, during the entire program.

Laura Urquhart and Louise Meyer
ELNEC Trainers Learn From the Trainees

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End of life issues continue to be of critical importance for oncology nurses and patients. The majority of those dying from cancer still encounter under-treatment of physical and emotional symptoms. Our primary aim in becoming ELNEC trainers was to enhance our knowledge of palliative care and disseminate that knowledge to our colleagues in a rural area. Upon completion of training, a needs assessment conducted with the local ONS chapter members, identified ethics as the topic that was most needed. This was offered to the membership. Several education approaches were used. Both single modules and a series of programs offering the ELNEC curriculum were presented in key rural areas of New Hampshire and Vermont. Since 2005, this curriculum has been disseminated to 160 participants from 6 northeastern states, from various disciplines and settings. Participants were extremely responsive in providing case studies and real life situations for discussion. Based on feedback, a regional information guide to services with key contacts was developed.

Diane M. Yorke, RN, MSN, CPNP, MBA

Parents' Reflections on the Quality of the Dying and Death of Their Children in Pediatric Intensive Care

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Most children who die in the hospital often die in the PICU. Little is known about what parents remember about this experience. Parents who had a child die in one PICU during 2004 and 2005 (84 children, one set of twins) were asked to share their memories of their child's death and to rate the quality of their experience using a modified version of the Quality of Dying and Death Questionnaire. Nineteen parents, one foster parent, and three grandparents of 14 children participated. The structured interviews were audio-taped and addressed informants' recollections about maintaining family roles, establishing relationships with health care providers, communicating information, pain and symptom control, and support offered by the health care team. Participants were also asked for recommendations to improve this experience with the goal of answering "What is essential to enabling a good death in the PICU?" The aim was to obtain information from parents about certain modifiable aspects of end of life care for children in the PICU. Results suggest that parents of dying children want more direct communication, to remain involved in caring for their child until and after they die, and they want and need follow-up contact after their child has died.