

# LIVING WITH GRIEF® TELECONFERENCE: Cancer and End-of-Life Care

## General Information:

**Wednesday, March 24, 2010**

*(Feel free to bring your lunch)*

**12 p.m.**.....Registration

**12:30 p.m.–3 p.m.**.....Program

**3 p.m.–3:30 p.m.** .....Discussion (local panel)

**Location:** Avera McKennan Education Center Auditorium

**Fee:** This program is free of charge.

Pre-registration is required by March 12, 2010.

## **NEW! To register for this course...**

Go to [www.AveraMcKenna.org](http://www.AveraMcKenna.org), click on "Events Calendar" found at the top right-hand corner. Click on the "Visit the Professional Education Calendar." Go to the SEARCH field and type in "Hospice."

*If you have questions or special needs, please contact Avera McKennan Education Services at (605) 322-8950.*

## Continuing Education:

Continuing Education (CE) credits are available through Hospice Foundation of America for the following:

nurses, physicians, certified nursing assistants, home health aides, counselors, psychologists, case managers, funeral directors, marriage and family therapists, clergy, employee assistance professionals, emergency medical service and social workers.

There is a \$25 online processing fee for individuals requiring continuing education credit.

Participants requesting CE credits must attend the entire program including the local discussion at the conclusion.

3 continuing education credits available for most disciplines (see registration site for full listing).

Avera McKennan offers all educational activities, materials and services to all people without regard to age, race, color, religion, sex, disability or national origin. If you require any of the auxiliary aids or services identified in the "Americans with Disabilities Act" (e.g. assistive listening devices or braille materials) please write or call Education Services at (605) 322-8950.

## Objectives:

At the conclusion of this teleconference, participants should be able to:

1. Understand how difficult it is for professionals to work with final stage cancer patients and their families when patients are transitioning to hospice and palliative care from curative treatment. Participants will also learn how to use effective communication skills, practices and protocols, while also sensitively recognizing obstacles to the transition for the patient and family. Those obstacles may involve medical, psychological, social, financial, caregiving, and spiritual needs. Participants will also validate programs that seek to bridge the move from treatment to palliative care as particularly helpful in today's healthcare environment. Cancer patients often receive curative treatment up until several days before death. Finally, participants will understand families may need help navigating the transition and will learn how they should be supported throughout.
2. Describe the range of physical, psychological and spiritual reactions that people who are dying of cancer may have and how to respond to and validate those reactions through a variety of approaches and therapies. These can include but are not limited to: effective pain management, reminiscence and life review, doula programs, dignity therapy, massage, music and meditation.
3. Assess different ways families and other caregivers cope with cancer and the imminent death of the patient. This assessment includes whether they struggle with ambivalent feelings, complicated relationships, anger or guilt and how to best intervene and provide support in a variety of situations, including those when a child or adolescent or an adult child is dying. Participants will also be able to recognize and prepare to refer patients and families to community assets available for support, including faith communities when appropriate.
4. Understand professionals, paraprofessionals and volunteers caring for cancer patients often experience occupational stress. They can be overcome in a variety of ways, including understanding the importance of intentional, focused behavior and the difference they make for patients and families.
5. Acknowledge that decisions made and events that occur during the cancer illness and dying process can change the course of bereavement; understand that grief is individual and has multiple manifestations that may or may not need professional counseling and/or support and that faith communities and other community organizations should be empowered to help give support to grieving people.
6. Share awareness that professionals working with cancer patients can also experience vicarious grief, counter-transference and transference and recognize that hospices can provide effective support to professionals as they cope with loss.

## Featured Panel:

**Yvette Colón, PhD, BCD** is the director of education and internet services at the American Pain Foundation and a clinical instructor at the Smith College School for Social Work. She has researched, published and lectured extensively on end-of-life social work practice, pain management, psychosocial oncology, technology in social work services and diversity in end-of-life care including ethnicity, gender and sexual orientation.

**Malene Smith Davis, MBA, MSN, RN, CHPN** is president and CEO of Capital Hospice, one of the first, largest and most experienced providers of hospice and palliative care services in the United States. A nonprofit organization, Capital Hospice served more than 5,000 patients in 2008 from six regional office locations in metropolitan Washington, D.C.

**Kenneth J. Doka, PhD, MDiv** is a professor of gerontology at the Graduate School of The College of New Rochelle and Senior Consultant to the Hospice Foundation of America. A prolific author and editor, Dr. Doka serves as editor of *HFA's Living with Grief®* book series, its *Journeys* newsletter and numerous other books and publications.

**Richard Payne, MD** is the director of the Duke Institute on Care at the End of Life and an internationally known expert in the areas of pain relief, palliative medicine, oncology, and neurology. A graduate of Yale University and Harvard Medical School, Dr. Payne completed post-graduate training in internal medicine at the Peter Bent Brigham Hospital in Boston and in neurology at the New York Hospital-Cornell University Medical College.

**Sherry R. Schachter, PhD, FT** is the director of bereavement services for Calvary Hospital/Hospice where she develops, coordinates and facilitates educational services for staff and families. She coordinates weekly bereavement groups for bereaved spouses/partners, adults whose parents have died and parents who have lost children.

**Brad Stuart, MD** is the primary author of *Medical Guidelines for Prognosis in Selected Non-Cancer Diseases*, used to develop the national Medicare hospice eligibility criteria. He has received the Heart of Hospice Award from the National Hospice and Palliative Care Organization and has received the California State Hospice Association's Pierre Salmon Award.