

Enhancing Educational Success Through Whole-person, Interdisciplinary Care Rounding

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Panel Presentation and Discussion Learning Objectives:

1. Describe the patient population followed by an interdisciplinary Palliative Care team and the role they play within a patient's care plan.
2. Share examples of academic success / growth attributed to the collaborative work of the interdisciplinary team.
3. Reflect on collaboratively working within an interdisciplinary team that may or may not have palliative care.
4. Describe how and why psychosocial support is vital to whole person care.

Panel Hopes and Goals

HEAL Mission

To support and connect professionals who work to improve the educational outcomes for students with medical and mental health needs

HEAL Vision

A world where students with medical and mental health needs are embraced and supported to reach their full potential



Pediatric Palliative Care

“Specialty pediatric palliative care is interdisciplinary, patient- and family-centered care that supports the physical, emotional, and spiritual well being of children with serious illness.

PPC prevents and relieves suffering in each of these domains and elicits patient hopes and values to ensure goal concordant medical care at all stages of illness.”

Pediatric Palliative Care

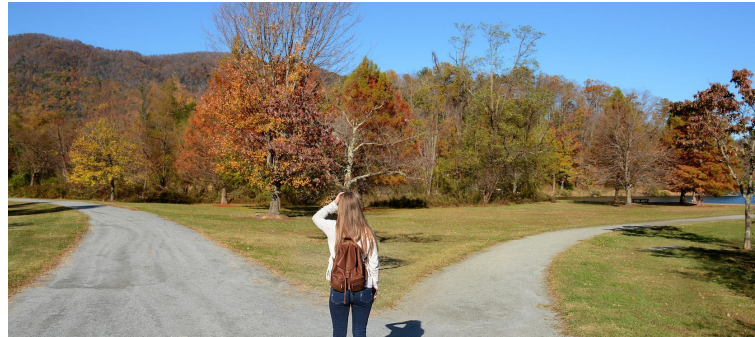
- Promotes goal concordant care, improved patient and family satisfaction
- Decreases moral distress and reduces burnout in front-line staff
- Reduces admission rates, readmission rates, ED visits; may improve length of stay; lower costs per day and lower overall costs, increases hospice referrals
- Improves quality of life scores, lowers symptom burden, may improve survival
- Provides assistance with difficult conversations, value-based medical decisions

Pediatric Palliative Care

Shared Decision Making:

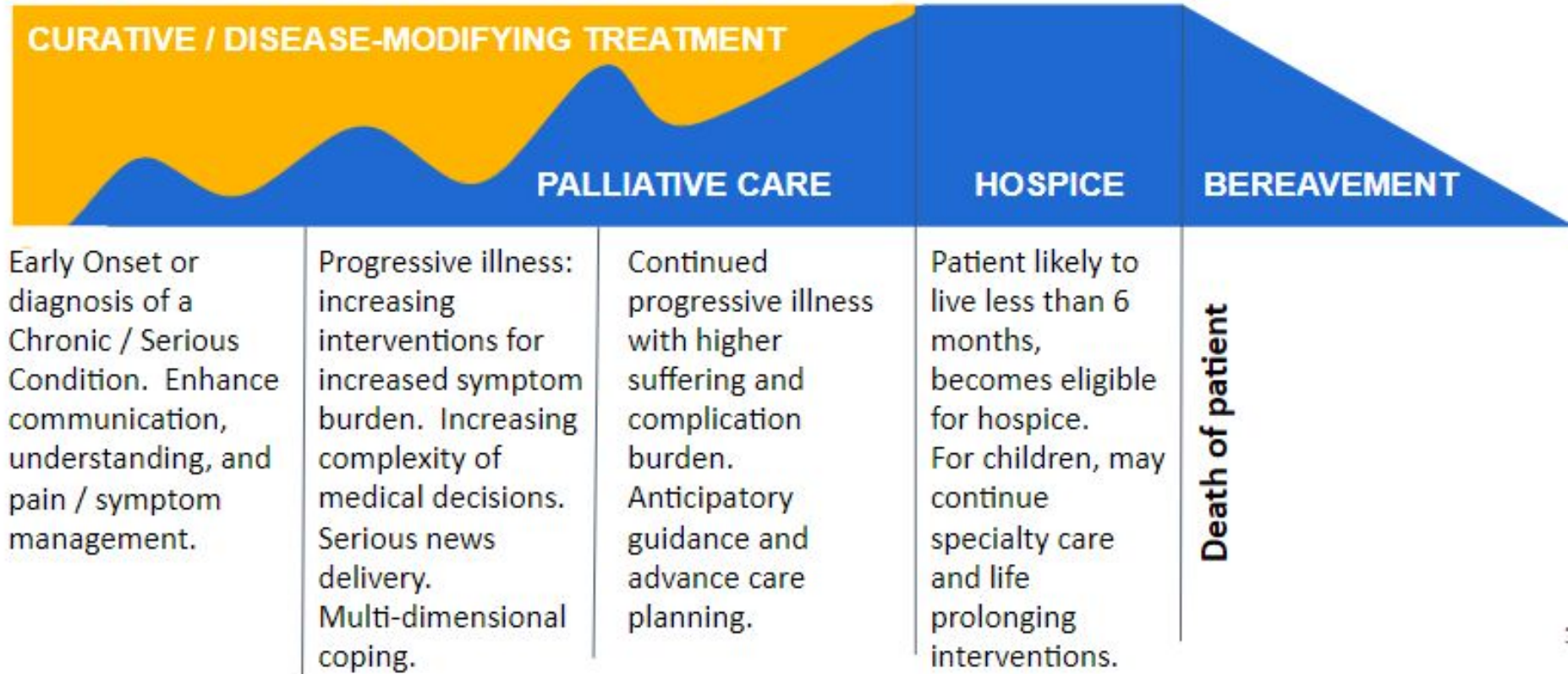
A Patient/Family Centered Approach to Decision Making

- Looks at the 30,000 foot view with the patient and family
- Brings together medical information, family make-up, and values/goals to assist with making a decision(s) for the child
- Uses whole-person / whole-family approach (which speaks to interdisciplinary PPC approach)
- Present honest information and explore quality of life as defined by the family



Pediatric Palliative Care

Palliative care supports patients across all stages of their diagnosis.



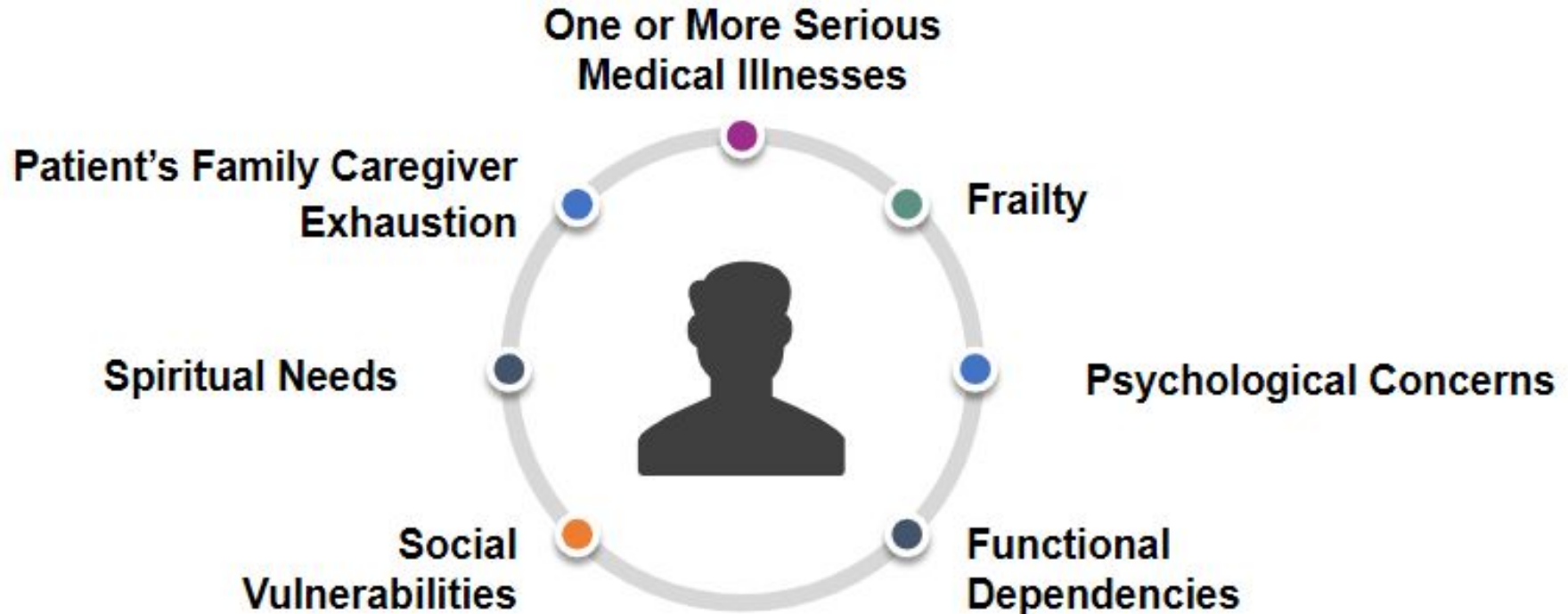
Pediatric Palliative Care

Palliative Care is for those living with serious illness. Hospice is for those living out their last 6 months of life.

PALLIATIVE CARE		HOSPICE
<ul style="list-style-type: none"> Based on patient and family need, not prognosis 	<p>Eligibility for Services</p>	<ul style="list-style-type: none"> Prognosis of < 6 months
<ul style="list-style-type: none"> Any stage of serious illness, including prenatal Bereavement for families 	<p>Timing for Services</p>	<ul style="list-style-type: none"> Life expectancy \leq 6 months (median LOS = 24 days) Bereavement for families
<ul style="list-style-type: none"> Concurrent with all appropriate treatments and services 	<p>Concurrent Treatment</p>	<ul style="list-style-type: none"> <i>Adults: Must waive "curative" care for terminal illness</i>
<ul style="list-style-type: none"> Fee-for-service - Medicaid Part B, Contracts with payers using a range of payment models 	<p>Payment for Services</p>	<ul style="list-style-type: none"> Defined Medicaid and other payer benefit
<ul style="list-style-type: none"> Available in acute setting Growing presence in outpatient and community settings 	<p>Prevalence of Services</p>	<ul style="list-style-type: none"> Available in community and institutional settings

Identifying Patients who Benefit from Palliative Care

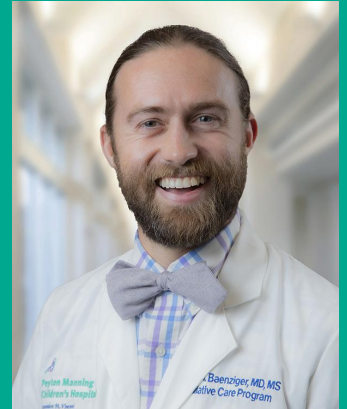
Palliative Care may be beneficial for patients with one or more of the following situations/conditions:



Pediatric Palliative Care Provider

— Peter H. Baenziger, MS, MD

- Role within interdisciplinary team
 - Provides expert management of symptoms (pain, nausea, anxiety, feeding tolerance, *et cetera*).
 - Establishes through discussion, the patient's / family's values and goals to inform complex medical decisions.
 - Provides anticipatory guidance including sharing serious news in a compassionate, authoritative manner.
- Training:
 - A physician (MD, DO) or advanced practice provider (NP, PA, *et cetera*)
 - Trained in a primary specialty like pediatrics, family medicine, or surgery
 - Board Certified in Hospice and Palliative Medicine



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Ascension St. Vincent

Pediatric Palliative Care Social Worker

— Alisha McGuire, MSW, LCSW, APHSW-C

Role within interdisciplinary team

- Meeting the needs of where the family is at
- Emotional and tangible support including adjustment to illness/new diagnosis/change in prognosis, shared decision-making, anticipatory grief, and bereavement
- Is oftentimes the “conduit” in involving/rounding with interdisciplinary team members
- Offer support to staff in processing and debriefing challenging cases (w/ assistance from Chaplaincy)

Training

- Master in Social Work
- Certification in Palliative and EOL Care (Smith School of Social Work)
- Advanced Certification in Hospice and Palliative Care Social Work
- Ongoing continuing education in hospice and palliative care



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Education Liaison

— Stacy Willett, BS

Role within interdisciplinary team

- Serves as an advocate for educational support for patients
- Supports patient's educational plan throughout hospitalization, treatment, and long-term needs
- Promote continuity in learning to ensure a smooth transition from the hospital setting back to home and school
- Bridges communication between family, healthcare team, and school to provide high quality educational support for patients

Training

- Bachelor of Science in Education, K-12th grade special education license
- Riley School Program Education Liaison 2003-present



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Indiana University Health

Hospital Teacher / Academic Liaison

— Heather Wiselogle, MEd

Role within interdisciplinary team

- serves as inpatient hospital teacher supporting patient academic goals while navigating an extended hospital stay/diagnosis
- provides liaison and advocacy support for patients, families, and schools while inpatient and outpatient
- collaborates with other family/patient support services (Child Life, Healing Arts, Pet Therapy) to provide whole child, family centered care

Training

- Bachelor of Science in Education
- Master of Science in Education
- Classroom Teacher 2003-2018
- PMCH Hospital Teacher/Academic Liaison 2018-present



**Peyton Manning
Children's Hospital**

Ascension St. Vincent

Certified Child Life Specialist

— Courtney Lyon, BS, CCLS

- Role within multidisciplinary team
 - Bring a multifocal lens to pediatric patients and their families
 - Rooted in developmental theory
 - Communicate and advocate effectively with other members of the healthcare team
 - School, Art, Music, Palliative Care, Chaplaincy
 - Minimize stress and anxiety for children, families, and support systems
- Training
 - Bachelor's of Science in Child Development and Child Life
 - 500 hour clinical Child Life Internship
 - Certified through the Association of Child Life Professionals
 - Over 8 years of experience working with Cardiac, PICU, Burn, Acute Care, Interventional Radiology, and Adult patients



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Chaplain

— Hannah Ervin, M.Div

Role within interdisciplinary team

- Chaplains address the spiritual, emotional, existential, and religious needs of patients and families while hospitalized. (Kiddos included!)
- Offering a space to explore spirituality can support in meaning making and coping while in the hospital.
- Chaplains also work alongside the interdisciplinary team in supporting families with medical decisions and collaborate for religious and culturally sensitive care.

Training

- Master of Divinity
- Completion of 4 units of Certified Clinical Pastoral Education (CPE)
- 2000 hours post-CPE clinical work
- Certification as a Board Certified Chaplain



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Art Therapist

— Megan Hicks, MEd, LMHC, ATR-BC

Role within interdisciplinary team

- Offers short and long term therapeutic counseling and crisis intervention focusing on the psychotherapeutic needs and emotional adjustment of patients and families at Riley
- Offers bereavement support and memory making services to families
- Educates staff on the availability and provision of art therapy services
- Advocates for patients and their families (*typically around themes of mental health, agency, and autonomy*)

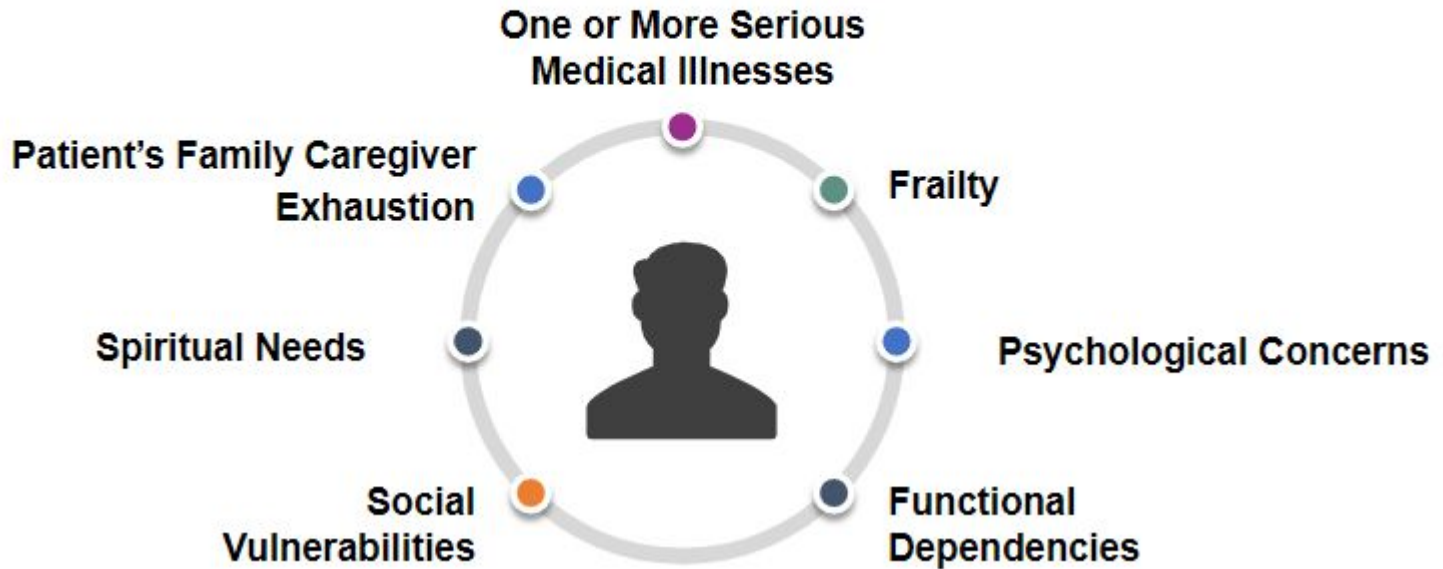
Training

- Masters of Education in Counseling and Personnel Services with a concentration in Art Therapy
- Board Certified Art Therapist (ATR-BC)
- Licensed Mental Health Counselor (LMHC)
- Formally trained in Parent-Child Interaction Therapy (PCIT) and Trauma Focused Behavioral Therapy (TF-CBT)
- Practicing full time as a therapist for 7 years



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Panel Questions/Discussion



Audience Participation



Closing Thoughts



Resources to Share

- [Center to Advance Palliative Care](#) (advocating for PC at your institution)
- [Compassionate Friends](#) (bereavement support for families after loss of a child)
- [The Conversation Project](#) (guides for hard conversations with kids about their illness)
- [Courageous Parents Network](#) - [NeuroJourney](#)
- [The Dougy Center](#)
- [National Alliance for Children's Grief](#)
- [Pediatric Palliative Care Coalition](#)
- [The St. Jude Global Palliative Care Program](#)
- [VitalTalk](#) (serious communication expert training)



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