Pediatric News
An electronic newsletter from the Department of Pediatrics

November 2017

November is National Palliative Care Month!

The Hand in Hand team has been energized in the past 12 months with advocacy, research, education and presentations, quality improvement, integrative therapy, and patient care initiatives. It’s about how you live. This is the theme for November’s National Hospice and Palliative Care Month 2017.

Remember: It’s About How You Live!

Favorite the Children’s Hospital & Medical Center Omaha Hand in Hand Website: [http://www.childrensomaha.org/main/hand-in-handpalliative-care.aspx](http://www.childrensomaha.org/main/hand-in-handpalliative-care.aspx)

Advocacy

Andrew Macfadyen and Sabrina Schalley (Social Work Director) were commissioned by Governor Pete Ricketts to join the Palliative Care and Quality of Life Counsel. We honor their efforts to ensure child voice and pediatric palliative care are maintained in legislative focus.

Denice Schroeder (Hand in Hand Nurse Case Manager) received a travel scholarship to represent the Hand in Hand team at the Hospice Action Network Advocacy Intensive in Washington DC. She met with Nebraska’s congressional members and senators to urge for preserving and expanding access to pediatric palliative care services for our patient population.

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Upcoming Events
*Nov 20 | 12PM*
Pediatrics Writing Group
UNMC UT 5151

Resident Conferences
(Management Conferences)
Email Patty Davis for monthly updates at pddavis@unmc.edu.

Grand Rounds
A complete schedule for the month is located at [www.unmc.edu/Pediatrics](http://www.unmc.edu/Pediatrics)

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Newsletter Back Issues
Previous issues are available on the UNMC Pediatrics website ([Link](http://www.unmc.edu/Pediatrics)).
Meaghan Weaver remains active in the American Academy of Pediatrics Section on International Child Health (AAP SOICH) and the International Children's Palliative Care Network (ICPCN) in developing free online training modules and credentialed e-learning programs on pediatric palliative care for practitioners serving in low-resource, diverse global settings. These online courses, now available in >7 languages, advocate for access to palliative principles regardless of geographic location.

The Hand in Hand team celebrates collaborations with CHI Health Hospice, the Monarch House, the Josie Harper House, and charitable groups to have recently ensured full economic coverage of inpatient hospice services for two recent children with vulnerable immigration/refugee circumstances. The palliative care team remains inspired by the goodwill of the Omaha and Lincoln communities in caring well for all children.

**Research**

The Hand in Hand team fosters advancing not just the art of palliative care, but, the scientific rigor of the field as an evidence-based practice.

The team has partnered with pharmacist, biostatistics, and nursing research scholars to collectively author five book chapters in 2017 for a new Handbook of Supportive Care.


Accepted or published team papers in 2017 include the following (Hand in Hand team member names in bold):

- **Weaver MS.** Companion Planting: Growing symbiotic local partnerships to nurture quality pediatric hospice care in rural regions. Accepted for publication in JAMA Pediatrics - 2017.
- **Weaver MS, Rosenberg AR, Tager J, Wichman CS, Wiener L.** A Summary of Pediatric Palliative Care Team Structure and Services as Reported by Centers Caring for Children with Cancer. Accepted for publication in the Journal of Palliative Medicine - 2017.
- **Li L, Sloan DH, Mehta AK, Willis G, Weaver MS, Berger AC.** Life perceptions of patients receiving palliative care and experiencing...


**Presentations**

The Hand in Hand team attended this year's Nebraska Hospice and Palliative Care Association (NHPCA) Conference in Lincoln with a keynote talk by Dr Weaver: "Palliative Care Across Ages and Life Stages". Denice Schroeder and Katie Vail provided an additional seminar on Caregiver Resiliency. Meaghann Weaver and Sue Bace hosted a workshop on the Implementation of Needs Assessments in Palliative Care.

Hand in Hand team members presented at conferences in Scottsdale, Montreal, Denver, and Washington DC in 2017. Topics included integrative therapies; good child, good parent, good provider shared values initiatives; and advanced care planning.

Katie Vail (Hand in Hand Nurse Practitioner) has championed "butterfly teams" as a palliative care mentorship program for nurses. Based on a staff survey completed in April 2015, it was determined that 90% of pediatric nurses in Omaha expressed distress regarding end of life care in pediatrics. The mentorship program was initiated with nurse managers and clinical educations on each unit in December 2016. A total of 3-4 nurse mentors per unit attended a two full-day course. The Hand in Hand team provided monthly meetings with the "butterfly team" mentors throughout the year. This year's first graduating class of mentors represents compassionate, experienced nurses who are able to now nurture and guide new nurses. The incoming "butterfly team" mentor class will begin in February 2018. True to the analogy, the next initiative is a "caterpillar champion" mentorship program for social workers and case managers.

The Hand in Hand team hosts a monthly resident education curriculum called "Pal Care Power Hour" on the third Thursday of each month; hosts incoming training on palliative care for nursing students, nursing residents, and new nurses in the transitions program; and teaches a social work hospice class.

Omaha was selected as a site for the national ELNEC (End of Life Nursing Education Consortium) this year! Hand in Hand congratulates
Children's Hospital star nurses Michaela Ranallo and Sarah Vetter for their selection in receiving scholarships to attend.

The Hand in Hand team fosters a pilot bimonthly "E-Journal Club" for five subspecialty divisions and the hospitalist service - whereby recent or relevant articles on symptom management, quality of life, patient-provider communication, or medical ethics are electronically distributed and made available in a shared folder. Article selection is based on a pre-intervention survey on division interest.

There are now curriculum-committee approved clinical rotations in pediatric palliative care available at the medical student, resident, and fellow training level.

**Quality Improvement Initiatives**

Here is a list of the current "Top Five" Hand in Hand Quality Improvement initiatives - each uses a Plan-Do-Study-Act (PDSA) cycle approach.

1. Anesthesia Whispers, Love Shouts (in collaboration with anesthesia team) - Parents write a message of encouragement to their child pre-surgery which is shared with the child at time of anesthesia induction. Impact to parent, child, and provider outcomes measured using validated scales.
2. Pneumo - which means life vitality - (in collaboration with the Omaha Integrative Care Center and the respiratory therapy team) - A mindfulness based stress reduction longitudinal curriculum for respiratory therapists with validated resiliency and burnout scales pre- and post-intervention.
3. Elucidation of home health nursing shortage on children and families receiving palliative care - A measure of financial, relational, familial, psychosocial, and employment impact based on home health nursing access.
4. Impact of palliative care curriculum on trainee knowledge and competence in palliative care domains
5. Participatory Approach to Integrating Calming Apps in Patient Care (in collaboration with behavioral health and child life teams) - Completion of a review of calming/relaxation apps for children with use of validated metrics to determine impact of these apps on child and family care experience

**Written Resources**

The Hand in Hand team has created a "Transitions" binder which is a collection of support materials for families of children reaching natural end of life.

The Hand in Hand team has created a home nursing support brochure called "Establishing a Relationship with Home Healthcare: Your guide to a positive partnership" to encourage families in the transition to home care nursing - describing practical realities and evidence-based recommendations for a successful transition home.

The Hand in Hand team has partnered with the Child Life team (championed by Nikki Walker) to create a collection of "All About Me" introduction sheets which personalize the patient; this is for patients to
share with new care providers at time of transitions to help the providers learn about the family in a de-medicalized, personalized way.

Pediatric and adolescent advanced care planning documents such as "Voicing My Choices", "Five Wishes", and "My Voice, My Choice" are available in the Hand in Hand office as are Tracheostomy Decisional Algorithms and Goals of Care Guides.

Patient Care

The Hand in Hand program includes inpatient consultation services, outpatient clinic availability at Children's Hospital, and is now trained in telehealth with intention to start to offer patients and families care via American Well Telehealth visits. Here comes telepalliative care! Telehealth utilization will be studied via quantitative and qualitative metrics.

Three divisions within the department of pediatrics have now identified automatic trigger diagnoses as a pilot approach for pre-established Hand in Hand care interventions specific to that diagnosis or decision.

To foster "one-stop, whole-child care" a Hand in Hand team member is now physically embedded in four interdisciplinary outpatient clinic settings with collaborating subspecialty teams - oncology clinic, neuromuscular clinic, CDC clinic, and the new neuro-oncology clinic.

Dr Weaver now holds a weekly clinic within the oncology clinic at the University of Nebraska Medical Center.

Integrative Therapies - modalities currently only available at Children's Hospital Omaha

The Hand in Hand team warmly welcomed Beverly Riley to our team as a massage therapist and Beth Staenberg to our team as a Tai Chi/Yoga Instructor thanks to generous funding from the Each One Counts Foundation.

The Hand in Hand team warmly congratulates Sheila Mee for completion of her Healing Touch Instructor certification! Sheila offered over 642 Healing Touch treatments in the past year at Children's Hospital. We encourage interested parties to register for Course 1 (March 3-4, 2018) and Course 2 (April 14-15, 2018) training by contacting Sheila at smee@childrensomaha.org.

The Hand in Hand team has developed a hospital policy and patient education materials on aromatherapy, massage therapy, tai chi/yoga/qigong at Children's Hospital Omaha. Integrative therapies are part of a Hand in Hand research initiative with measurement of impact on patient's symptoms (pain, nausea, sleep pattern, emotions) and the proxy's experience.

Abby Wolfe, the Hand in Hand summer scholar presented her research summary at the University of Nebraska Research Day: "Kneading Care: The impact of experiential massage therapy on staff wellness."

The Hand in Hand team is grateful to have partnered with the Chaplain team at Children's to invest in a walking labyrinth for patients, families,
and staff at Children's Hospital. The labyrinth, an interactive and walkable winding path, serves as a physical meditation map which leads the participant in one direction towards the center with the same path leading out of the labyrinth. The labyrinth is not a maze or a test or a puzzle; there is no wrong way to go. The labyrinth walk is an ancient construct intended to help those journeying to engage in personal, interactive process to examine concerns, release tensions, explore possible paths, and reach a central solution. Printed hand-labyrinths are also available from the Hand in Hand team.

**New Book Explores Generational Differences in Education**

Geoff Talmon, M.D., listened as a colleague shared how he'd gone from winning teaching awards each year to receiving ho-hum evaluations, despite the fact that he had "changed nothing."

Dr. Talmon wondered: What happened? Had students changed? Had the professor's, or the student's, expectations changed?

Intrigued, he approached his College of Medicine colleague Gary Beck Dallaghan, Ph.D., about co-editing a book.

The result is "Mind the Gap: Generational Differences in Medical Education," which is offered through the [Alliance for Clinical Education](https://ui.constantcontact.com/visualeditor/visual_editor_preview.jsp?agent.uid=1129234178013&format=html&print=true).

"There's no book out there like this," Dr. Talmon said.

The 160-page book, which discusses the generational differences that play a role in medicine, may be ordered online.

From baby boomers to Generation Z, five generations make up today's health care arena, Dr. Beck Dallaghan said. Understanding differences among each is critical, he said, to creating more cohesive and productive environments. "If you want to have cohesion, you need to know how to navigate the waters with multiple generations."

Understanding that intergenerational differences exist benefits everyone, Dr. Talmon said. "Perspectives may be different," he said. "And, it's helpful to remember that before you ascribe something as a character flaw, consider it may be a generational perspective."
Dr. Beck Dallaghan agrees. "With any type of characterization there are stereotypes involved, but there's a lot that hits the nail on the head. I've learned a lot just from editing the book. It's been extraordinarily helpful to me."

About the book
Nearly 30 authors, representing different medical disciplines across the country, contributed chapters that address the different stages of health care from preclinical years to rotations, residencies and early years in practice. Centered around vignettes, the conversations will sound familiar to, and provide practical tips for, any health care provider, Dr. Talmon said.

Chapters are "short and to the point," Dr. Beck Dallaghan said, noting they can be read in 15 minutes and provide quick insights that can enhance understanding and positively impact learning and clinical relationships.

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