

ISHLT ACADEMY
MASTER CLASS FOR NURSES AND ALLIED HEALTHCARE PROFESSIONALS IN HEART AND LUNG
TRANSPLANTATION AND MECHANICAL CIRCULATORY SUPPORT
APRIL 21, 2020
MONTRÉAL, CANADA

CRUCIAL TRANSITIONS IN THE CARE OF HEART AND LUNG TRANSPLANT AND MECHANICAL CIRCULATORY SUPPORT PATIENTS

Scientific Program Committee

Chair: Bronwyn Levvey, RN, BEd Stu, Grad Dip Clin Epi, Lung Transplant Service Manager, The Alfred Hospital, Melbourne, Australia
Co-Chair: Samantha J. Anthony, PhD, MSW, RSW, Health Clinician Scientist, The Hospital for Sick Children, Toronto, Canada

Faculty

Moderators:

Nancy P. Blumenthal, DNP, CRNP, CCTC, Lung Transplant NP, Hospital of University of Pennsylvania, Philadelphia, PA, USA
Fabienne Dobbels, PhD, MSc, Psychologist, University of Leuven (KU Leuven), Leuven, Belgium
Michael G. Petty, PhD, RN, APRN, CNS, CCNS, Clinical Nurse Specialist, University of Minnesota Medical Center, Minneapolis, MN, USA
Melissa Sanchez, BScHons, PGDip, DClinPsy, MSc, Clinical Psychologist, Royal Brompton & Harefield NHS Foundation Trust, Harefield, UK

Case Discussants:

Mary Amanda Dew, PhD, Psychologist, University of Pittsburgh School of Medicine and Medical Center, Pittsburgh, PA, USA
John Eric Hobson, MSN, CRNP, Palliative Care NP, Jefferson Health, Philadelphia, PA, USA
Christiane Kugler, PhD, RN, Professor of Nursing Science, University of Freiburg, Freiburg, Germany
Gregory Snell, MD, Lung Transplant Physician, Alfred Hospital, Melbourne, Australia

Educational Goals

This Master Class will explore these key transitions of care and enable the target audience to share perspectives and best practices to optimize patient and family members/caregivers experiences at these times of transition.

Two of the most significant transitions of care for transplant and mechanical circulatory support (MCS) patients are entry into a transplant or MCS program and end-of-life following transplantation or MCS. Each patient and their family members/ caregivers will likely experience both transitions at some point within their trajectory of care. Care transitions are characterized with specific risks that healthcare providers need to recognize and manage.

Target Audience

This NHAH Master Class is designed for clinicians from all fields of the interdisciplinary health team with a higher level of expertise in transplant and/or MCS. The program format is intended to facilitate highly interactive discussion amongst the participants in order to explore topics relating to significant transitions in care for patients and their family members/caregivers facing transplantation or MCS or end-of-life discussion. Rather than didactic lectures, this course utilizes faculty moderators and case discussants to present real-world case scenarios to stimulate active audience participation, providing insights, strategies and skills that will address the practice gaps and learning objectives.

Learning Objectives

After completion of this program, participants will have improved competence and professional performance in their ability to:

1. Describe the key elements recommended for psychosocial assessment for transplant or MCS
2. Recognize what influences our decision-making when determining candidacy for transplant or MCS
3. Identify and describe opportunities and mechanisms to engage family members/caregivers in patient care and decision-making
4. Consider and incorporate strategies for advance care planning and end-of-life care into their clinical practice

Disclosure

Current guidelines state that participants in CME activities must be made aware of any affiliation or financial interest that may affect the program content or a speaker's presentation. Planners, Faculty and Chairs participating in this meeting are required to disclose to the program audience any real or apparent conflict(s) of interest related to the content of their presentations or service as Chair/Planner. Please refer to the Participant Notification document for a list of all disclosures. Additionally, all speakers have been asked to verbally disclose at the start of their presentation if a product they are discussing is not labeled for the use under discussion or is still investigational.

Accreditation Statement

The International Society for Heart and Lung Transplantation (ISHLT) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Credit Designation Statement

ISHLT designates this live activity for a maximum of 4.25 *AMA PRA Category 1 Credits*.™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nurses and Pharmacists



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INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, this activity has been planned and implemented by Amedco LLC and ISHLT. Amedco LLC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing

education for the healthcare team.

Credit Designation Statement – Amedco LLC designates this live activity for a maximum of 4.25 contact hours for nurses. Learners should claim only the credit commensurate with the extent of their participation in the activity.

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MASTER CLASS FOR NURSES AND ALLIED HEALTHCARE PROFESSIONALS IN HEART AND LUNG
TRANSPLANTATION AND MECHANICAL CIRCULATORY SUPPORT
APRIL 21, 2020
PRELIMINARY SCIENTIFIC PROGRAM SCHEDULE

2:00 PM – 2:05 PM

WELCOME AND OVERVIEW

Bronwyn Levvey, RN, Grad Dip ClinEpi, The Alfred Hospital, Melbourne, Australia

Samantha J. Anthony, PhD, MSW, RSW, The Hospital for Sick Children, Toronto, Canada

2:05 PM – 3:10 PM

SMALL GROUP INTERACTIVE DISCUSSION A: A COMPREHENSIVE PSYCHOSOCIAL ASSESSMENT Moderator:

Fabienne Dobbels, PhD, MSc, University of Leuven, Leuven, Belgium

2:05 PM

Summary of the state of the science of the session topic and the most pressing challenges relevant to the session topic

Fabienne Dobbels, PhD, MSc, University of Leuven, Leuven, Belgium

2:10 PM

CASE SCENARIO A1: To Transplant or Not? The Importance of a Comprehensive Psychosocial Assessment

Mary Amanda Dew, PhD, University of Pittsburgh School of Medicine and Medical Center, Pittsburgh, PA, USA

Teaching/Discussion Points

This case presentation will:

1. Highlight the importance of a comprehensive psychosocial assessment
2. Explain what a comprehensive psychosocial assessment entails, using the framework presented in the Consensus document (Dew et al. 2018)
3. Discuss how the results of a psychosocial assessment could guide the decision-making process on transplant listing
4. Help the target audience identify what areas of psychosocial assessment can be improved within their own clinical practice

2:40 PM

CASE SCENARIO A2: Isolated, Lonely or Ill-Supported? The Role of Social Support

Fabienne Dobbels, PhD, MSc, University of Leuven, Leuven, Belgium

Teaching/Discussion Points

This case presentation will:

1. Discuss what is meant by the term 'social support'
2. Show that social support cannot be disentangled from the other components within psychosocial assessment e.g. adherence, health behavior, psychological functioning, and resilience
3. Help the target audience identify gaps and opportunities for assessment and enhancement of social support of patients within their own clinical practice
4. Showcase which supportive mechanisms could be offered in case of poor social support

3:10 PM – 4:15 PM

SMALL GROUP INTERACTIVE DISCUSSION B: PROCESS OF TEAM DECISION-MAKING: DETERMINING CANDIDACY SELECTION

Moderator: Nancy P. Blumenthal, DNP, CRNP, CCTC, Hospital of University of Pennsylvania, Philadelphia, PA, USA

3:10 PM

Summary of the state of the science of the session topic and the most pressing challenges relevant to the session topic

Nancy P. Blumenthal, DNP, CRNP, CCTC, Hospital of University of Pennsylvania, Philadelphia, PA, USA

3:15 PM

CASE SCENARIO B1: The Frail Patient

Nancy P. Blumenthal, DNP, CRNP, CCTC, Hospital of University of Pennsylvania, Philadelphia, Pennsylvania, USA

Teaching/Discussion Points

1. Review elements of frailty and methods of measurement
2. Identify and describe the multi-disciplinary perspectives on frailty
3. Describe strategies used in optimization pre-listing/pre-implantation
4. Discuss the influence of patient's reported quality of life as a listing criterion

3:45 PM

CASE SCENARIO B2: Re-Transplantation after Failure of Self-Care

Gregory Snell, MD, Alfred Hospital, Melbourne, Australia

Teaching/Discussion Points

1. Explore the impact of developmentally reasonable behaviors that constitute transplant non-adherence
2. Recognize the ethical constructs associated with re-transplantation
3. Identify strategies to support multi-disciplinary team members at risk for moral distress
4. Describe the elements of a credible argument when supporting literature does not exist

4:15 PM – 4:45 PM

COFFEE BREAK

4:45 PM – 5:50 PM

SMALL GROUP INTERACTIVE DISCUSSION C: FAMILY MATTERS: STRATEGIES FOR ENGAGEMENT

Moderator: Michael Petty, PhD, RN, APRN, CNS, CCNS University of Minnesota Medical Center, Minneapolis, MN, USA

4:45 PM

Summary of the state of the science of the session topic and the most pressing challenges relevant to the session topic

Michael Petty, PhD, RN, APRN, CNS, CCNS University of Minnesota Medical Center, Minneapolis, MN, USA

4:50 PM

CASE SCENARIO C1: Let's Not Talk About It, Just Do It: Promoting Dialogue Between Patient, Family Caregivers, and the Healthcare Team to Optimize Decision-Making and Outcomes

Christiane Kugler, PhD, RN, University of Freiburg, Freiburg, Germany

Teaching/Discussion Points

1. Identify methods to ensure that patient and family members/caregivers have similar understanding of current state and expected outcomes
2. Discuss ways to uncover varying expectations between patient, family members/caregivers, and healthcare team
3. Consider strategies to harmonize expectations between team members
4. Review processes for engaging patient and family members/ caregivers in “the long run”

5:20 PM

CASE SCENARIO C2: Now You See Me, Now You Don't: Coping with a Change in Caregiver Ability to Provide Support

Michael Petty, PhD, RN, APRN, CNS, CCNS, University of Minnesota Medical Center, Minneapolis, MN, USA

Teaching/Discussion Points

1. Outline potential backup strategies in the event a caregiver becomes ill or unable to provide expected support
2. Define the boundaries of when requirements to have a caregiver can be abandoned
3. Discuss community resources that can successfully assist a transplant/MCS patient to success
4. Review current data on impact of lack of caregiver on outcomes and patient experience

5:50 PM – 6:55 PM

SMALL GROUP INTERACTIVE DISCUSSION D: GOOD LIVING, GOOD ENDING: ADVANCE CARE AND END-OF-LIFE PLANNING (PEDIATRICS AND ADULTS)

Moderator: Melissa Sanchez, BScHons, PGDip, DClinPsy, MSc, Royal Brompton & Harefield NHS Foundation Trust, Harefield, UK

5:50 PM

Summary of the state of the science of the session topic and the most pressing challenges relevant to the session topic

Melissa Sanchez, BScHons, PGDip, DClinPsy, MSc, Royal Brompton & Harefield NHS Foundation Trust, Harefield, UK

5:55 PM

CASE SCENARIO D1: The Young Transplant Patient in Palliative Care

Melissa Sanchez, BScHons, PGDip, DClinPsy, MSc, Royal Brompton & Harefield NHS Foundation Trust, Harefield, UK

Teaching/Discussion Points

1. Highlight the issues for a young person in a palliative care setting including advance care planning
2. Present the challenges of transitioning from a transplant/MSC to palliative care environment
3. Discuss who has the responsibility to talk to young people about their end-of-life wishes
4. Explore way to engage family members/caregivers in the end-of-life care for young people

6:25 PM

CASE SCENARIO D2: Integrating a Palliative Care Approach into Care of Transplant and MCS Patients

John Eric Hobson, MSN, CRNP, Jefferson Health, Philadelphia, PA, USA

Teaching/Discussion Points

1. Highlight the importance of early engagement of the palliative care team
2. Discuss the different aspects of ‘emotional homework’ – e.g. advance care planning legal documentation, last wishes, memory boxes

3. Present some of the challenges in supporting family members/caregivers and working with 'complex' family or support units
4. Discuss the importance of self-care when working with transplant/MCS patients in the end-of-life phase

6:55 PM – 7:00 PM

CLOSING REMARKS

Bronwyn Levvey, RN, BEdStu, GradDip ClinEpi, The Alfred Hospital, Melbourne, Australia

Samantha J. Anthony, PhD, MSW, RSW, The Hospital for Sick Children, Toronto, Canada

7:00 PM

ADJOURN