



CAPEWAYNE News



Winter 2008

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Editorial Staff

Amarinder Singh
Robert Zalenski, MD, MA
Renata Osko, MBA, HCM

Center to Advance
Palliative-Care Excellence
(CAPEWAYNE)
5557 Cass Avenue
Cohn Bld., Room 332
Detroit, MI 48202
tel.: (313) 577-0907
renatak@wayne.edu

WAYNE STATE
UNIVERSITY

From the Director

In so many ways, great things are happening in the Center's quest to fulfill its mission, to change the character and improve the quality of care given to those who are faced with dying.

We are planning our conference, Hope and Healing, and anticipate that this will bring new inspirations and vision to practitioners caring for patients with incurable illness. We have just submitted a grant on the "compassionate allies," an innovative program to bring those who need to give and those who need to receive an opportunity to meet in care-filled moments. New research is underway in the recognition of distressing symptoms of dyspnea, and of the palliative treatment of heart failure. Through a funded grant sponsored by the National Cancer Institute, a wonderful curriculum for End-of-life Care in Emergency Medicine has been created, and we will disseminate this at emergency medicine residencies programs at WSU and beyond.

Yet when I am pushed to say what defines our specialty, and our special efforts, I see something deeper and even

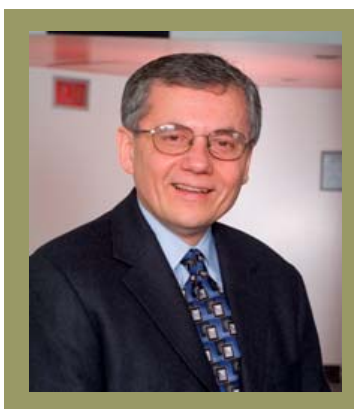
more important. Beyond symptom management, beyond increasing social supports, our greatest task is to encounter the individual and family who have been asked to face life's

we thought, whether we accepted this with awareness; we were rather forced from the womb and made to cope with the brave new world.

During the final phase of life, the veil of immortality gets stripped away by the diagnosis of "terminal illness", and we are forced to reconcile ourselves with our own lives' end. We will have to face the questions: Did our lives have value and meaning, and did we know love in our relationships? Can we feel and know the depths of all we have done, become, and given? In which ways will our life continue to matter after we die?

The ultimate and last developmental challenge is to face the eternal questions as the candle of life flickers. Perhaps the deepest level of our palliative expertise rests with the task of helping a person reconcile himself to his or her own mortality, and to help them die not just with dignity but with grace as well. How to do this well may be our greatest challenge and our greatest opportunity.

The Director



Robert Zalenski, MD, MA
Director
Center to Advance Palliative-Care
Excellence

greatest developmental challenge: to cope and even to flourish in the face of their own mortality. The grand reconciliation that all of us must do when living the final chapter of life is to be reconciled to our own mortality. When we left the security of our mother's womb, no one asked us what

EVENTS: April 25

WAYNE STATE UNIVERSITY
Save the Date for:
Hope & Healing Conference
Sponsored by the WSU Innovative Nursing Care
Friday, April 25, 2008
6:30am-5:00pm

Contact person: Renata Osko, CAPEWAYNE
Tel: (313) 577-0907
Fax: (313) 577-0907
e-mail: renatak@wayne.edu

Wayne State University
3007 Cass Ave.
Cohn Building, 1st floor
Cohn Lounge
Detroit, MI 48202

• August 11, 12 •

ELNEC/EPEC Training
August 11- 12, 2008
More information
available soon

October 23, 24

SAVE THE DATE!
FOR A 2-DAY
**Palliative Care Collaborative:
Second Annual Regional Conference**
Thursday, October 23rd, 2008
and
Friday, October 24th, 2008
The Dearborn Inn
20300 Oakwood Boulevard
Dearborn, MI 48124
Contact person: Renata Osko, renatak@wayne.edu
tel.: (313) 577-0907

Logos for various organizations: American Society of Clinical Oncology, American Society of Hematology, American Society of Palliative Care, American Society of Hospice and Palliative Care, American Society of Geriatrics, American Society of Geriatric Psychiatry, American Society of Geriatric Neurology, American Society of Geriatric Pediatrics, American Society of Geriatric Psychiatry, American Society of Geriatric Neurology, American Society of Geriatric Pediatrics, American Society of Geriatric Psychiatry, American Society of Geriatric Neurology, American Society of Geriatric Pediatrics.

April Events:

April 4—Palliative Care Journal Club, 2:30pm, VA Hospital, Room C1593
Contact person:
Renata (313) 577-0907
CAPEWAYNE

April 16—Living with Grief Audio Conference at Hospice of Michigan. 1:30pm broadcast, 4:00pm panel discussion
Contact person:
Karen Monts:
(313)578-6326
HOM

April 17—Palliative Care Teach-in at the Tabernacle Missionary Baptist Church in Detroit
Contact person:
Ron Beford (810) 923-6940
Interfaith Health & Hope Coalition

April 25—Hope & Healing Conference, WSU, Cohn Lounge, registration starts at 8:30am
Contact person:
Renata (313) 577-0907
CAPEWAYNE

May Events:

April 29—CAPEWAYNE General meeting, speaker: Peter A. Lichtenberg, Ph.D. *"Frailty, Comorbidity, Disability and Dying: A view of Dying from a Geriatric Perspective"* 2:00pm, COHN Lounge
Contact person:
Renata (313) 577-0907
CAPEWAYNE

CAPEWAYNE Supports Michigan Cancer Consortium End-of-Life Care Priority

The Michigan Cancer Consortium (MCC) is a statewide, broad-based partnership that strives to include all interested public and private organizations and provides a forum for collaboration (communication, coordination, and the sharing of resources) to reduce the burden of cancer among the citizens of Michigan by achieving the Consortium's research-based and results-oriented cancer prevention and control priorities. One of the 10 priorities identified in the MCC Strategic Plan is:

By 2010, prevent and reduce avoidable suffering up to and during the last phase of life for persons with cancer as measured by specified data markers. Data on outcome markers are collected in an annual Special Cancer Behavioral Risk Factor Survey and include:

Prevalence of severe pain as reported by family caregivers (2004 = 44.7%)

Proportion of cancer decedents who die at home (2004 = 44.3%)

Proportion of cancer decedents who use hospice services (2004+68.2%)

The 2004 figures are being used as baseline measures. Progress will be evaluated as more recent data become available. Objectives being pursued to achieve the EOL priority and notes on some of CAPEWAYNE's involvement in each are: #1: Establish additional indicators and useful

sources of data for monitoring EOL burden and progress related to cancer—CAPEWAYNE Associates who work as clinicians in a variety of disciplines participate in data collection and monitoring as part of their routine practice. Associates and Directors who attend MCC meetings share ideas on data sources and measurement issues.

#2: Promote system change to increase access to palliative services throughout Michigan—CAPEWAYNE Associates participated as key informants in the 2006-2007 Palliative Care Assessment conducted by Kay Presby on behalf of the Michigan Department of Community Health and MCC. Drs. Zelen-ski, Stellini, & Schim participate on the Governor's Advisory Committee on Pain Management. Drs. Briller & Schim participate on the newly-formed Palliative Care Network which provides an additional forum for palliative care services to share information and support.

#3: Increase the supply of health professionals who are trained in palliative techniques—CAPEWAYNE is very active on this objective! We have developed major ongoing programs for the training of physicians through the WSU School of Medicine and provided additional curricular activities within the College of Nursing. We operate an innovative medical fellowship program and provide a variety of seminars for professional education across disciplines. In 2006 we conducted a joint

EPEC/ELNEC train-the-trainer conference and there are plans to repeat this well-received program in early 2008. CAPEWAYNE Associates and Directors are actively engaged in public speaking both within academic and service settings and for the general public across the State of Michigan.

#4: Increase cancer patients' and caregivers' understanding of options for 1) care up to and during the last phase of life, and 2) pain and symptom relief—All of the active-practice Associates of CAPEWAYNE are engaged in expanding patient and caregiver knowledge of options and access to pain and symptom relief. In addition, many of the research and educational initiatives undertaken with CAPEWAYNE leadership address these domains.

The goals of the Michigan Cancer Consortium and the Center to Advance Palliative-Care Excellence are closely aligned. Although the CAPEWAYNE mission extends well beyond the concerns of cancer patients to include all who need palliative and end-of-life care, we are pleased and honored to be able to contribute to the exceptional state-wide initiatives of the MCC.

To learn more about the Michigan Cancer Consortium visit their web-site at

<http://www.michigancancer.org>

-by Stephanie Myers Schim, PhD, RN, APRN-BC



BOOK REVIEW

The Great Mortality by John Kelly New York: Harper Perennial (2005)

Two of the great delights of my Fall 2007 sabbatical leave were the expanded opportunities to travel and to read. As I

indulged in an afternoon at the bookstore browsing for something to read on the long plane ride to Ireland, I picked up The

Great Mortality by John Kelly. The cover promised that this

(Continued on page 3)

Book Review—cont.

would be "An intimate history of the Black Death, the most devastating plague of all time" and I was intrigued both from the perspective of my end-of-life interests and a background in public health nursing. I was not disappointed.

Kelly manages to give a lot of details about the origins and epidemiology of the medieval bubonic plague. "Apocalyptic in scale, the Black Death affected every part of Eurasia, from the bustling ports along the China Sea to the sleepy fishing villages of coastal Portugal, and it produced suffering and death on a scale that, even after two world wars and twenty-seven million AIDS deaths worldwide, remain astonishing." (p.xii) However, he relates the details of the spread and impact of the disaster in the context of narratives of individual people, families, and communities that allow the reader to put a personal face on events. As the author points out, "a lot has changed since 1347, but not human nature." (p. PS7) Kelly

relates tales of specific individuals including a larcenous old Marseille peasant by the name of Jacme de Podio who worked to benefit financially from the loss of his entire family, and Queen Joanna of Naples and Sicily who survived a public scandal and trial in the midst of devastating death and destruction. By highlighting the meaning and impact of the population-level events on individuals and families, Kelly allows us to feel a degree of connectedness to long-ago events that seem, to most people, quite remote and perhaps now irrelevant.

What Kelly does in *The Great Mortality* goes beyond history and epidemiology to speak to some of the disaster and terrorism concerns in society today. As you read accounts of how the Black Death was interpreted and dealt with in medieval times, the parallels in response to modern disasters such as the Indian Ocean Tsunami and Hurricane Katrina are apparent. In medieval

Europe, South Asia, and New Orleans, wealth and privilege influenced who lived and who died, who got care and who suffered, and who could escape to less threatened locations. Amid the tales of death and destruction, greed and avarice, wealth and poverty, the capacity for human resilience is also apparent in the book. Although the Black Death (and other more-recent disasters) caused unimaginable loss, nowhere did it shatter the fabric of civilization. In every instance, a cadre of men and women have stepped up to begin the business of recovery: to bury the dead, nurse the sick, and find ways to go on living.

The Great Mortality is now available in the CAPEWAYNE collection as well as area bookstores, libraries, and on-line sources. I recommend it for anyone with interest in end-of-life issues, humanities, public health, history, or just passing time on a long flight.

—by Stephanie Myers Schim,
PhD, RN, APRN-BC

Clinical Practice News

The Southeast Michigan area is a leader in providing palliative care to hospitalized patients. While less than 30% of hospitals nationwide have an in-patient palliative care service, every hospital system in the Detroit Metro area, Pontiac and Ann Arbor has a service in at least one of its hospitals.

There is a growing collaborative network of palliative care providers from these institutions and others throughout the state. Evidence of this collaboration includes the first annual Palliative Care Collaborative conference sponsored by CAPEWAYNE and several partners in Dearborn last October, as well as a series of Palliative Care Networking Dinners, the third of which was held March 6 at Wyandotte Hospital, after two pre-

vious successful meetings in Ann Arbor and Lansing.

The second annual Palliative Care Collaborative meeting will be held this October. This year's meeting will be two days long and a large number of excellent submissions for plenary sessions, workshops and posters have been submitted from experts across the region.

The newest in-patient palliative care service is led by Dr. Robert Zalenski and Jeri Burn, NP at Sinai Grace Hospital in Detroit. Wayne State medical students and Palliative Care fellows have already rotated through that service.

The Wayne State University Palliative care fellowship is in its third year and has three fellows in the current class. The

Ann Arbor VAMC currently is training its first fellow. These two programs are among a relatively small number of programs nationwide which provide this training. Because there has been no regular federal funding for these fellowships, programs have to be creative in funding and staffing.

The Hospice of Michigan, Veterans Administration, Angela Hospice the Karmanos Cancer Institute, and Children's Hospital of Michigan have all been generous in supporting these fellowships. With new rules being promulgated by the American Council on Graduate Medical Education this year for training programs in the newly recognized sub-specialty of Hospice and Palliative Medicine,

(Continued on page 4)



CAPEWAYNE's

WHO'S WHO

Robert (Rob) Zalenski, M.D.
Director
School of Medicine
rzalensk@med.wayne.edu
(313) 966-7679

Margaret (Meg) Campbell, Ph.D., R.N., M.S.N., F.A.A.N.
Associate Director for Research
Detroit Receiving Hospital
mcampbe3@dmc.org
(313) 745-3271

Richard (Dick) Raspa, Ph.D.
Associate Director for Humanities
College of Liberal Arts
and Science
aa2267@wayne.edu
(313) 577-6578

Stephanie Myers Schim, Ph.D., R.N., C.N.A.A., B.C., A.P.R.N.
Associate Director for Education
College of Nursing
s.schim@wayne.edu
(313) 577-4034

Michael (Mike) Stellini, M.D.
Associate Director for Practice
School of Medicine
mstellini@med.wayne.edu
(313) 577-0773

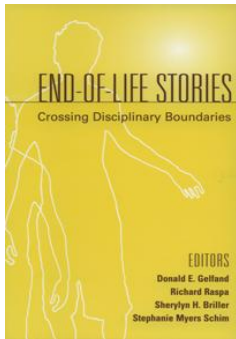
Denise Waselewsky, M.T.
Executive Facilitator
School of Medicine
dwaselew@med.wayne.edu
(313) 745-4350

Renata Osko, M.B.A./H.C.M.
Program/Project Coordinator
renatak@wayne.edu
(313) 577-0907

ADVISORY BOARD

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*Please make checks payable to **Wayne State University**, designating **Palliative Care** in the memo line.

CLINICAL PRACTICE NEWS—cont.

the two current fellowship programs are busy preparing to apply for accreditation by ACGME in the first cycle.

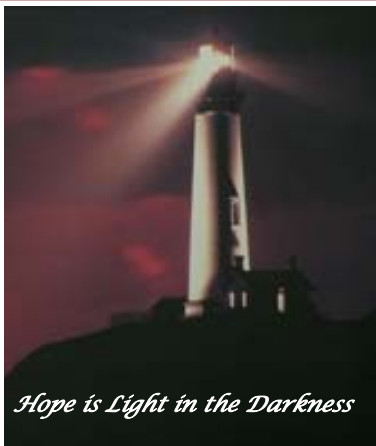
Other local institutions are gearing up to start programs to continue Michigan's tradition of leadership in Palliative Care. The two previous WSU fellows,

Dana Buick and Nadia Tremonti have started successful careers and are contributing greatly to their institutions, Providence Hospital and Children's Hospital of Michigan respectively.

Please keep CAPEWAYNE informed about good work, especially new and inno-

vative programs at your institutions. We will be happy to highlight them in our newsletters.

—by Michael Stellini, MD, MS



Hope & Healing Conference

Friday, April 25, 2008

Registration Fee: \$10 (includes breakfast,
lunch, and parking)

Students: Registration Free of Charge

For Additional Information, please
contact:

Renata Osko, MBA, HCM

Center to Advance Palliative-Care Excellence
Wayne State University
5557 Cass Ave, Cohn Bld., Room 332
Detroit, MI 48202

Tel.: (313) 577-0907, Fax: (313) 577-0940

e-mail: renatak@wayne.edu

Conference Location:

Cohn Lounge
5557 Cass Ave
(1st floor of Cohn Bld.)
Detroit, MI, 48202

Please use this link to see the building location:
<http://www.campusmap.wayne.edu/location/COHN>

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Please park free of charge at the Law School Parking lot#32

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