

Palliative Care Chat Episode 7
Dr. Lynn McPherson
Discussion with current MS in Palliative Care students
June 1, 2017

- Lynn McPherson: Hello. This is Dr. Lynn McPherson. Welcome to Palliative Care Chat, the podcast brought to you by the online Master of Science and Graduate Certificate Program in Palliative Care from the University of Maryland. I'm super excited because we have four guests today on this podcast. How awesome is this? We have Millie Higgins, who's a nurse. Martha Martin, who is a physician. Angela House, who is a PharmD. Kirsten Springmeyer, who is a chaplain. Ladies, why don't you each take a minute or so and introduce yourselves. Millie, I know you're recovering from laryngitis, but do your best. If you could tell us a bit about yourself.
- Millie Higgins: I'm Millie Higgins, nurse currently working with Montgomery Hospice as a Vice President of Nursing. I've been a nurse over 20 years. I'm in hospice for almost 20.
- Lynn McPherson: That's great. Obviously, the common theme with all four of my guests today is they are all enrolled in our Master of Science and Palliative Care program. They're here to talk about some of their experiences. Martha, why don't you share a little bit for us.
- Martha Martin: Okay. I'm a psychiatrist. I've been in private practice for about ... I was just trying to do the math quickly. I think it's almost 35 years now.
- Lynn McPherson: You're still 29. How is that math working out, Martha? What's with that?
- Martha Martin: I'm still making it work for me. I have always been interested in this. This has been a great opportunity for me to do this without having to turn my life upside down right now. I plan to, but right now this just fits in beautifully with being able to maintain my practice. I also do some consulting for Montgomery Hospice. This is really informing my work there.
- Lynn McPherson: That's great.
- Martha Martin: I'm excited about what I'm going to learn too.
- Lynn McPherson: Wonderful. Angela from Ohio, why don't you tell us a bit?
- Angela H.: Yeah. Hey. I've got to correct you right off the bat. I'm not a PharmD. I'm just a regular old RPH bachelors [crosstalk 00:02:20].
- Lynn McPherson: Sorry.

Angela H.: No. That's okay. We'll lead into that later about why I enrolled in this master's program. Anyway, I'm a clinical pharmacist with Optum Hospice Pharmacy Services. We provide clinical consulting for hospice patients all over the country. I have been involved with hospice, like I said, for about four and a half years, but just with Optum for almost a year now. I just live and breathe hospice every day. I'm looking for opportunities to advance my learning in the palliative care and hospice realm.

Lynn McPherson: That's great. Angela spent a week with me about a year or year and a half ago learning more about hospice and palliative care. It was our pleasure to host her in Baltimore. Kirsten, why don't you tell us a little bit about what you do?

Kirsten S. : All right. I am a pediatric palliative care chaplain at Texas Children's Hospital in Houston. We have way over 600 beds and also the clinic that is connected, as well as the pavilion for women, which is OB/GYN, and another NICU. I've been here for five and a half years. Our new service, pediatric palliative care services, started seven months ago. I was chosen as the chaplain. I'm very new to the field of palliative care. Part of my learning I wanted to explore was how I can help educate people around me when I visit patients for them to understand our role with the whole-person care.

Lynn McPherson: That's awesome. All of these ladies just finished their very first course in the program, 601, which is Principles and Practice of Hospice and Palliative Care. Kristin, since you're all warmed up, why don't we continue with you. Why were you interested in pursuing this program? I know when you posted some of your responses on the discussion questions, it literally moved me to tears. I'm curious. Why were you interested in doing this?

Kirsten S. : First off, my dad died four years ago, three years ago, in August. He had a heart attack probably when he was 60-something. He died at age 75. It was palliative. When I put the meanings together, he basically was palliative, since he had his heart attack until he died. The process, when I was reflecting after, I think one of our first journals, he didn't have good hospice care, he didn't have this, we didn't know what we were doing. That just brought out to me, when I took this position, that what is it all about to have an IDT team? What does it mean for me, as the chaplain, how I can engage with families when they have their own clergy or rabbi or imam or priest. Really for me it's kind of putting it all together, where I can be, my goal is to really be the best pediatric palliative care chaplain I can be.

Lynn McPherson: That's awesome. You thought this program would help you do that?

Kirsten S. : Yes, and it is. When I sit in our meetings, in fact I've been asked to lead a couple of the family meetings. When this is discipline and sit down and talk about the body. I'm able to ask what is the goal for the patient and the family, instead of oh, we can do that and we can do that.

Lynn McPherson: That's wonderful.

- Kirsten S. : It's been a little contentious sometimes, but to get the message out there to get the focus of what we're doing, I think is really important.
- Lynn McPherson: That's wonderful. You're leading by example. I think all of you know that I'm a very strong believer in the trans-disciplinary team where Angela might be the pharmacist, but by golly, she's going to be 10% chaplain and 10% social worker and Millie's going to be 10% pharmacist before we're done with her, and so forth. I feel pretty strongly about that. How about Millie? What brought you to our program? What interested you?
- Millie Higgins: I got into hospice palliative care just by being on the job. There were some GIP beds on my unit. I kind of just watched how the interaction of the hospice nurse was so different from us on the floor. So, I got drawn into, but never really got into the whole science behind this whole practice on palliative care. You just got on the job training and you keep going. Always longing to ... there should be a school where you could actually learn the background and the foundation of the whole palliative care. But it was never available until now.
- Lynn McPherson: Is it fair to say that, from what you've seen of our program so far, this would be appropriate for people who want to gain a deeper understanding of what they're already doing, as well as people who are new to the field?
- Millie Higgins: Yes, for both. It's very, very helpful.
- Lynn McPherson: That's great. That's awesome. Let's see, who haven't we heard from? Martha, how about you? What drew you to our program?
- Martha Martin: I was looking at my essay a little while ago to remind myself how I've been thinking about it. It was fate that brought me to the program. I had been so interested in hospice care after it was really beginning when I was in medical school. It was beginning in the United States and I got so interested in medical school, how people were dealing with their illnesses. But, I started thinking psychiatry must be [inaudible 00:08:07] in for because I wanted to talk with people about how they were experiencing their illnesses and adjusting to them. I had been able to circle back now that I've had enough of [inaudible 00:08:28] psychiatry and wanted to do something more deep with the very profound questions and issues that people are dealing with as they face life-threatening illnesses.
- Lynn McPherson: And that's great.
- Martha Martin: So it seemed like a very logical thing to do.
- Lynn McPherson: That's wonderful. I know in the first course, I was most struck by, number one we enjoyed such diversity in the disciplines of the students who enrolled in our very first course. And how that was really reflected in the discussions. It was such a rich discussion, what everybody brought to the table. I found that to be a real

strength of the program that we had doctors, nurses, social workers, chaplains, integrative medicine specialists. I think just having all those different inputs really made for such a valuable experience. I know a lot of people ask me, oh I'm concerned about this or concerned about that, I'm concerned about how much time it will take me. I'm concerned about can I use the computer or the learning management system. Angela, you told us a little bit about why you wanted to do this. Any more comments on that and any thoughts on concerns people might have coming into this?

Angela H.: Sure. I have been looking at getting some advanced training just to ... seems like every graduate now has the PharmD because they have to. I've become the minority in the workplace and it makes me feel a little inferior. If I was going to get some extra training, why not have it be in the field that I work in? I was just thrilled to see the University of Maryland was coming up with the online Master's program. When I knew I was in touch with you, seems like a year or two ago, and I first caught the inkling that it was coming along ... like you have to let me know when this is going to happen because I am totally going to do this!

My husband is an educator and he's done several online Master's degrees, so I was familiar with the layout of how it works, but I was concerned about the course load. I thought, how many hours am I going to have to devote to this every week? How many, am I going to have to have a whole day where I sit down and block out certain hours? Or Mom's going to have to be shut in the den? Because, I am a wife. I'm a Mom of two. I work full time, so this was a valid concern, I thought. Or I'm going to have to give up my weekends for the eight weeks that the course is. But, that's not the case at all. It puts that to rest.

Everything ... there are a lot of assignments that you have to do and you have deadlines that they're due by. But, there in five courses. If you have an hour in the morning, you can read the article. If you have 20 or 30 minutes at lunch time and you just want to glance and post a comment or two on someone's remarks. You've got that time and you can get all that stuff done and still have your evening free. A lot of ... [inaudible 00:11:28] at the same time. I like it [inaudible 00:11:33] late elementary school, early middle school-ish homework commitment wise. It was good. It was manageable.

Lynn McPherson: They see a Mom doing her homework, too, so maybe they're inspired.

Angela H.: I would hope so.

Lynn McPherson: I hope so, too. I think many students told me, the key is don't let it all go to the last minute and do a little bit each day. That's kind of the best way to roll in getting the work done. Somebody else? Kirsten, did you have any concerns coming into this?

Kirsten S. : I have not been in school for over 20 years.

Lynn McPherson: Oh, my goodness.

Kirsten S. : The program is just awesome, because it is in bite size chunks. It's very well run. I like the diversity of what we did, from a group project to the reflection journal. I was worried about are article going to be too many big words that I'm not going to understand and have to have a dictionary with me the whole time. Which was not the case at all. Everything was very informative, which also helped me want to look up more when I was doing my project. It kept me wanting to learn and wanting to learn. I know I'm only hitting just the tip of the iceberg on this. Really engaging and it's just super.

Lynn McPherson: That's wonderful. I know I was very impressed with how students in the class would go above and beyond what we asked them to do. As certainly you guys know, we have worked with CAPSEE, which has the most amazing website, to have our students have access to their entire website. Students would frequently not only do their assignment from the CAPSEE website, but they would go a little deeper. Martha, was that your experience, as well?

Martha Martin: Absolutely! I couldn't tear myself away from the CAPSEE website, because there were so many little bites that one could get into and spend maybe 30 minutes. Then do a whole little other course beyond the one that had been assigned. It's a wonderful resource and it's a lot of fun to do those little courses.

Lynn McPherson: It's sort of like Alice in Wonderland. You keep going down these little rabbit holes, because it's all so exciting. [crosstalk 00:13:59] You have to leave a bread crumb trail to get back to the homepage. Goodness. Millie, what was your experience? You've taken Master's degrees online before, but did you have any concerns about the learning management system or did you just jump right in?

Millie Higgins: I was thinking I'm going to be just with a lot of youngsters who are just going to be running over you with everything. [inaudible 00:14:21] Do I have enough energy to keep up? But, I was like them.

Lynn McPherson: Not at all.

Millie Higgins: It was good and the CAPSEE thing actually sold my development department on ... I know they have signed up with CAPSEE so they can use it for teaching the staff.

Lynn McPherson: [crosstalk 00:14:43] It's a wonderful resource.

Millie Higgins: Yes.

Lynn McPherson: It really is.

Millie Higgins: Once you get on, it's difficult to get off.

Lynn McPherson: Yes, it is, you're right. For any of you, maybe Angela or anybody could jump in here, some people have the misconception that a course taught online is a very

lonely experience. You're home in your guest bedroom all by yourself and you feel like you're living in a hole. Was that your experience or did you find that you were engaged in this course? Angela, what do you think?

Angela H.: I'm grieving the loss of the comradery of these wonderful people from the class. I have a spread sheet that had everyone. What their name was, what their nickname was, where they worked. When you respond to their questions, like oh I can't wait to see what more they [inaudible 00:15:31]today. Now that I don't have a class to go to, I'm just lost. I just eat Cheetos and watch a movie.

Lynn McPherson: Aw.

Millie Higgins: [crosstalk 00:15:40]Seems like I've been breaking for about a month. [crosstalk 00:15:44][inaudible 00:15:44]

Lynn McPherson: Martha, I know you said you've been lonely the last two weeks, haven't you?[crosstalk 00:15:50] You're going through withdrawal.

Martha Martin: I am just astonished at how those couple of weeks without having the discussion board to check in on or see what somebody said about something I wrote or what other people thought about things that they wrote. The assignments that you have given us are things where people, our voices really come through. They're not technical, concrete kinds of things, but where we can really put our hearts and soul into the assignments. So people's personalities and their values and their humor, all of it comes through. So I feel I really know a lot of the people. Even though I think at this point, Millie, of the 27 of us, Millie is the only person I've actually laid eyes on.

Lynn McPherson: That's true. That's true. It's also interesting another chaplain we had in the program, [Neve 00:17:04], who's from Trinidad, said in his final course evaluation, and he gave me permission to share this: That he's never taken a course before, where he could actually put to use right away what he'd learned last week.[crosstalk 00:17:16] He really valued that. That really made me happy. But, I think to be effective ...

Millie Higgins: I say amen to that.

Lynn McPherson: That's great. I think an effective online teacher, we talk about being a guide on the side instead of being a sage on the stage. I never did like yapping at anybody. I think we were more collegial than anything. I think that worked out well. Any other thoughts about ...

Millie Higgins: I also liked the Thursday nights when we had the [inaudible 00:17:45]

Lynn McPherson: Yes. For people who don't know what I'm talking about, we had a virtual office hour every Thursday night from eight to nine o'clock East coast time for anybody who wanted to just join us. We do a video conference, you can see your classmates if they choose to use their video. It can be just hanging out and

discussing the weather. Or if people had questions about their project. Not everybody felt the need to join, but I think it was nice for the people who did enjoy that. I thought that was nice, too.

Angela H.: I really liked the Monday morning intro video that you posted for us. Will that be available for every course?

Lynn McPherson: I'm hoping so.

Angela H.: I looked forward to it. As soon as I got up Monday morning and go, I wonder if the video is up! Then I'd go watch it and be like, oh yay, I remember that. Oh I remember posting that.[crosstalk 00:18:36]

Lynn McPherson: One of the nurses in the program, and I found that by accident, and this was her comment. She said, I love those Monday morning videos and I love it when Lynn's dog walks through and photobombs the video, or her husband. My two dogs are real hams, they enjoyed them to. For our listening audience, I would do a video at the crack of dawn every Monday, because each week would start on Monday, just saying, here's what we did last week, here's what went well. We had one week where we needed to give some redirection to clarify things. And give a preview of coming attractions. I know I enjoyed that when I took on online course, because it was sort of a personal connection with the faculty. I'm glad that you guys enjoyed that, too.[crosstalk 00:19:18] That's great.

Millie Higgins: [inaudible 00:19:23] It really sets us up for the week.

Lynn McPherson: Yes, emphasizing what's important and so forth. I like the water cooler, too, the discussion for if anybody had a question, I'm sure if you have a question, somebody else has the same question. That was helpful. One feature that I really like about our program is the ability for you guys, as adult learners, to select your electives and your own learning paths. What Kirsten wants may be different from what Angela wants, might be different from what Martha wants. What are your all thoughts about that? This ability to select your learning path?

Martha Martin: I thought that I was coming in and I'm just going to be on the clinical track. Everything was mapped out for me in my own mind before I got started. Now, I've gotten so interested in so many other elements that I hadn't anticipated that I want to take all of the courses.

Lynn McPherson: There you go!

Martha Martin: I'm not kidding. And I don't think Kirsten was kidding, either. [inaudible 00:20:28] They all are exciting and I want to do them all.

Kirsten S. : You're stuck with me.

Martha Martin: I agree.

Lynn McPherson: That's a good deal. I'll happily take all of you forever. I'm a big believer in making things really practical and of course, doing curricular mapping we map to the National Consensus Project and the Joint Commission. We really went for a design that was highly pertinent to this field of hospice and palliative care, yet still allowing for personalization. Millie, which way are you going to go with that?

Millie Higgins: I think I'm going to start off like Martha. I would like to do everything. I'm going to start off with leadership and management.

Lynn McPherson: Mm-hmm (affirmative) That's great. You're in for a real treat. We have such excellent teachers. All of our faculty are just awesome. Tops in their fields, international leaders. But in the leadership track we have JoAnne Reifsnyder, who's the vice president of Genesis. She's an RN, PhD, MBA, from Georgetown. She's teaching with Donna Stevens from Lehigh Valley and she's teaching with Pam Barret. HPCO Teach has hired Pam to do all their leadership pre conferences and so forth. Then we have [Frank 00:21:45] [Castle 00:21:45] and Turner West of [Cat 00:21:46] [Walker 00:21:46] doing the Metrics and Measures course. I can see why you'd want to take them all. This is my husband's fear that I'm going to be in school forever and ever and ever. Angela, what are your thoughts? Are you going to go straight clinical?

Angela H.: I'm thinking that I am, but I don't know. Is it wrong to not know? I hope not.

Lynn McPherson: No, of course not.

Angela H.: [crosstalk 00:22:04] be so interesting. I know the clinical will probably most benefit me, as I hope to see more palliative care and hospice integrated. So my consulting daily is not done just for hospice patients, but maybe some palliative bits get worked in there. I think that will be most applicable to my career setting. But, everything else is so interesting. Today, I got to use the word performance gap and [crosstalk 00:22:32]

Lynn McPherson: Wow, look at you!

Angela H.: I know! When identifying a retail chain pharmacist who was having a knowledge deficit on how the State Board interprets [inaudible 00:22:42] prescription. I'm hoping to come up with an educational plan, too.

Lynn McPherson: That's wonderful. What Angela is referring to is, in the very first course we had one week where we talked about education in hospice and palliative care. We talked about how every performance problem is not fixable with education. Which is why you have to do a needs assessment. Clearly she did and determined that education is the answer. Kirsten, you shared that your interest is kind of all over the place, too. Kirsten, I'm curious. How do you think this degree will help your career?

Kirsten S. : Oh my gosh. I, A. Was having the spiritual, psychosocial side is really going to help. I think there are many clergy out there that are in congregations that don't

know a lot, or have fear and trepidation of going into a hospital room to see their patient lying in the bed with a severe illness. So to help educate, as well as if I can search into some the administration pieces, I could do some consulting with VITAS or some other organizations and help that, too. As well as, I work in a department where we have a whole IDT team that is continuing to grow. Where in some pediatric hospitals, they have a staff of 15 right now, to watch that whole administration process, I'm really curious how it all comes together.

Lynn McPherson: How about anybody else? Thoughts on how this will help? I know Angela, you've spoken about since you don't have the PharmD degree, you think this will be certainly an avenue to developing a competence in this area, which I completely support? Martha, what do you think?

Martha Martin: I was initially thinking, oh well this just will inform my consulting work, make me better at doing, just being in that consulting role. But, already I am imagining myself really immersed in the hospice and palliative care and having that be a full time enterprise on my part. I just want to do it all. One minute, I'm sitting and reading the book about developing educational programs, I think that's what I could do, I could be a palliative care educator. Then I look at some of the clinical programs and I feel more confident about maybe I could do more in pain management. Every day of the week I'm trying on different hats and I hope to wear them all.

Lynn McPherson: Yeah, I agree. Does anybody have any other, anything they'd like to share that we haven't touched on? Good, bad or ugly? Thoughts? Anything.

Kirsten S. : I think the benefit for me is that, I did a presentation for my little clergy group here and from that has morphed into 'oh, you need to know more about this.' Now, I've been asked to present for our full metro Houston with one of our theologians. The theology of palliative care and hospice in pediatrics using our [crosstalk 00:26:06] so I'm very excited about doing that in August.

Lynn McPherson: That's wonderful.

Kirsten S. : I kind of feel like now I'm a vessel and a resource for people. I think that's just one of the great things about this class is how you can use it as you learn. As the other chaplain said.

Lynn McPherson: Yes. As you've shared with me right before we started doing this recording, about you doing this presentation. Since Kirsten is taking the education course that just started today, I suggested that she use that as her big project for the course. Because I'm all about work smarter, not harder. If we can help her prepare for that wonderful presentation, all the better. All the better. Anyone else before we wrap this up? Angela or Millie? Anybody?

Angela H.: I just want to encourage people, if they are on the fence about whether or not to do this and they have an employer. Look and see if there are tuition reimbursement programs with your employer, because my employer has a very

generous reimbursement program that I was not aware of. I was still going to do the Master's program, but look into it. There's probably some finances out there for the taking if you look and prepare.

Lynn McPherson: That's wonderful. I know most hospitals, especially do have ... The University of Maryland provides like \$5,000 a year and I fought so hard to get our tuition very, very reasonable, both in-state and out of state. In Maryland, it's under \$20,000 for the whole degree and just a little bit over 20 for out of state, including worldwide. That's a good point, Angela, thanks for sharing that. Millie, any final words from you?

Millie Higgins: I think the course actually puts things in perspective. Working and coming into hospice and palliative care and working and learning on the job. This [inaudible 00:27:56] class has put things in perspective. You get to understand the underlying reasons for stuff and just reading research papers, it going to give you a better understanding of this whole hospice and palliative care field. The things I'm learning, you can apply to your job right away.

Lynn McPherson: I think somebody in the evaluation, 'I've worked in hospice forever, but nobody actually made me read the COP's and apply them to cases.' I know the class enjoyed duking it out about those cases he posted.

Millie Higgins: [crosstalk 00:28:32] Actually, last week I was talking to someone in the office about not having a good work/life balance. I was tapping myself on the shoulder, saying 'Go, Millie!'

Lynn McPherson: Yes, because you did your plan, your wellness plan for yourself and for your team, didn't you? As part of this course.

Millie Higgins: Yes.

Lynn McPherson: That's great.

Millie Higgins: That I would like to develop more and actually use it to teach [inaudible 00:28:57]

Lynn McPherson: [crosstalk 00:29:01] That's another example of how CAPSEE helped us out, because they have some awesome resources on that. I would like to thank all of you for taking the half an hour out of your day and doing this for us. We really, really appreciate it. I'm so proud of the cohort we have in this program and you four ladies are typical examples. I'd like to thank our guests: Millie Higgins, Martha Martin, Angela House and Kirsten Springmeyer. And I would like to thank all of you, our listeners, for listening to the palliative care chat podcast. Again, this is Dr. Lynn McPherson. This presentation is Copyright 2017, University of Maryland. For more information on our completely online Master of Science and Graduate certificates in Palliative Care or for permission requests regarding this podcast, please visit: graduates.UMaryland.edu/palliative Thank you.