Submit a report that details how education is provided regarding ethical issues, nursing research and evidence-based practice. Include learning objectives, a content outline and numbers of employees (specifically identifying the number of nurses) who were educated in the twelve months prior to the documentation submission.

There are numerous ethics, nursing research and practice educational offerings for nurses within the organization. The Norman Knight Nursing Center for Clinical & Professional Development provides the infrastructure to support educational offerings developed by Clinical Nurse Specialists and members of Collaborative Governance Committees, as well as other nurses within the organization. Programs take place in a variety of forums to meet the individual learning styles and needs of nurses throughout the institution. Educational opportunities include: formal classroom education programs, grand rounds, discussion groups, Nurse Recognition Week programs and visiting-professor series, such as the Cardiac Nurses Visiting Scholar Programs and the Knight Visiting Professor Program. The majority of these programs include contact hours for nurses approved by the American Nurses Credentialing Commission on Accreditation, as Massachusetts General Hospital (MGH) is an approved provider of continuing education in nursing by the Ohio Nurses Association, and an accredited approver by the American Nurses Credentialing Commission on Accreditation.

Ethics Education

As described in Force 6.15, the Collaborative Governance Ethics Committee, co-chaired by a Staff Nurse and Pharmacist and coached by a doctorally prepared Clinical Nurse Specialist, plans and develops the ethics curriculum for clinical staff in Patient Care Services. Educational opportunities for staff in Patient Care Services range from unit-based ethics rounds, now occurring on nine patient care units, to large interdisciplinary conferences held in collaboration with outside institutions, such as the Harvard School of Medicine. The following are the learning objectives, course outlines and attendance figures from a sample of the ethics programs offered to clinicians in the organization.

- “Maintaining Compassionate Care: Strategies to Prepare Family-Professional Caregiver Teams for Ethical Dilemmas of Caregiving in Times of Uncertainty” - Held on February 8 & 9, 2007
This program was a component of The Ethics Initiative funded by The Kenneth B. Schwartz Center, as described in Force 6.15. The goal for this program was to provide clinicians with...
constructive approaches to address difficult ethical issues when caring for long-term patients with unclear clinical outcomes.

♦ Learning Objectives: The learner will be able to:
  ➢ Describe ethical dilemmas in clinical decision making for caregivers when a patient’s prognosis is uncertain regarding potential for functional gain.
  ➢ Identify burdens and benefits of life sustaining treatment for patients when family and professional caregivers are uncertain about what to do, taking into account clinical, psychological and spiritual considerations.
  ➢ Identify potential interventions that support family and professional caregiver collaboration in circumstances of diagnostic or prognostic uncertainty.

♦ Content Outline: The course brochure providing the content outline is in attachment 14.4.a.

♦ Attendance: Forty-three nurses attended this conference.

• Respecting Choice Program – October 12, 2006

  Led by a Clinical Scholar Staff Nurse, and the Clinical Nurse Specialist in Ethics, the goal of this program is to develop multi-disciplinary clinicians as certified trained facilitators in the process of advance directives and advance care planning. The program has been offered at MGH three times since 2004. As described in Force 6.15, it was last offered in collaboration with the Stoeckle Center for Primary care to Nurses, Social Workers, Chaplains, Respiratory Therapists, Case Managers, and Physicians.

  ♦ Learning Objectives: The learner will be able to:
    ➢ Examine the ethical and legal basis, issues and barriers in discussing end-of-life treatment decisions;
    ➢ Differentiate the process of advance care planning from the advance directive as a communication plan;
    ➢ Describe facilitation skills required to initiation of discussion advance care planning with different groups of adults;
    ➢ List a variety of educational materials and tools available for promoting and assisting with advance care planning;
➤ Identify organizational systems in to support the implementation of the advance care planning model;
➤ Demonstrate competency in completing an advance directive;
➤ Participate in dialogue regarding personal and ethical issues relative to end-of-life treatment decisions;
➤ Discuss strategies for educating health professionals and the community on advance care planning.

♦ **Content Outline:** Attachment 14.4.b is the facilitator’s guide outlining the course content for the program.

♦ **Attendance:** Since its inception, 188 clinicians have attended the program, 42 percent of the attendees were nurses. The October 2006 program had 32 attendees, of which 22 were nurses.

• **Interdisciplinary Ethics Resource Program – March 30, 2007**
  This program was designed at MGH in March 2003 to develop clinicians who will be prepared to as unit-based ethics resources. A complete description of the program is in Force 6.15.

♦ **Learning Objectives & Content Outline:** Attachment 14.4.c is a detailed description of the objectives and outline for this program

♦ **Attendance:** One hundred and fifteen clinicians from hospitals within the Partners HealthCare Network and Boston College attended the program. Over half the attendees were nurses; thirty-three nurses were from Massachusetts General Hospital and thirty-one nurses were from the other facilities.

• **Harvard Bioethics Course – June 13 –15, 2007**
  Especially designed for members of clinical ethics committees, this three-day course used a combination of lectures and seminar discussions to explore a broad range of topics related to ethical aspects of clinical practice. Participants included Nurses, Physicians, Chaplains, Health Care Administrators, Social Workers, Therapists, Psychologists, and Hospital Attorneys.

♦ **Learning Objectives:** This program is designed to:
  ➢ Prepare clinicians and members of ethics committees to assume leadership roles in addressing ethical issues in the clinical setting.
Educate clinicians and members of ethics committees to pertinent and current ethical issues in clinical practice.

♦ **Content Outline:** The content outline is for the three-day course is available in attachment 14.4.d.

♦ **Attendance:** Fifteen clinicians attended the course; nine of ten nurse attendees were from MGH.

**Research Education**

Research is an essential component of the Professional Practice Model (OOD 14) helping clinicians to incorporate scientific findings into practice and fostering a spirit of inquiry. As described in *Force 6* and *Force 11.10*, there are opportunities for nurses prepared at all educational levels to participate in educational offerings focused on nursing research. The following are detailed examples of course objectives and outlines for two educational programs focused on research.

- **Journal Club**

  As described in *Force 11.10*, the Collaborative Governance Research Committee sponsors the Journal Club. Each session features a Nurse Researcher presenting their original research for discussion. The interactive dialogue includes an appraisal of the literature, a review of the research findings and implications for practice. The objectives and outline listed are for the July 11, 2007 forum: *More Than Just a Journal Club: Difficult Communication in Nursing* presented by Lisa Kennedy Sheldon PhD(c) ARNP, AOCNP from St. Joseph's Hospital, Nashua, New Hampshire.

  ♦ **Learning Objectives:**

  ➢ Summarize the research study in terms of:

    ▲ Current literature regarding communication between providers and patients
    ▲ Development of the research project
    ▲ Purpose of the study
    ▲ Synopsis of this study
    ▲ Methods and design/data collection
    ▲ Findings

  ➢ Discuss the implication of the findings

    ▲ Identify the five main themes
- Nurses’ attitudes towards difficult communication
- Limitations of findings

- Describe the implications for future research regarding communication between nurses and patients
- Investigator initiative
- Expansion of a program of research
- Nurse education

Ven Content Outline: The speaker followed the outline below, which included time for a question and answer period with the attendees.

- Summarize the research study (25 minutes)
- Discuss the implication of the findings (15 minutes)
- Describe the implications for future research (10 minutes)
- Questions & Answers / Discussion (10 minutes)

- Attendance: Twenty-five nurses attended the July forum. Following is the attendance for the 2006/2007 Journal Club offerings to date.

<table>
<thead>
<tr>
<th>Nursing Research Journal Club Participants</th>
<th>Dates</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capacity for Direct Attention in Patients Undergoing Percutaneous Coronary Intervention</td>
<td>Jan. 11, 2006</td>
<td>13</td>
</tr>
<tr>
<td>Promoting Responsiveness between Mothers with Depressive Symptoms and Infants</td>
<td>Mar. 15, 2006</td>
<td>30</td>
</tr>
<tr>
<td>Design and Psychometric Evaluation of the Psychological Adaptation to Genetic Information Scale</td>
<td>Jul. 12, 2006</td>
<td>10</td>
</tr>
<tr>
<td>African American, Chinese, and Latino Caregivers’ Impressions of the Onset and Diagnosis of Dementia</td>
<td>Sept. 13, 2006</td>
<td>21</td>
</tr>
<tr>
<td>Lesson learned in the Bathing Persons with Alzheimer's disease at home Study</td>
<td>Nov. 8, 2006</td>
<td>13</td>
</tr>
<tr>
<td>Cardioverter Defibrillator Recipients</td>
<td>Jan. 10, 2007</td>
<td>28</td>
</tr>
<tr>
<td>Healing and Personal Transformation in Persons with Chronic Skin Wounds</td>
<td>Mar. 14, 2007</td>
<td>25</td>
</tr>
<tr>
<td>Peripheral Arterial Sheath Removal</td>
<td>May 16, 2007</td>
<td>17</td>
</tr>
<tr>
<td>Difficult Communication</td>
<td>Jul. 11, 2007</td>
<td>25</td>
</tr>
</tbody>
</table>

**Total RN Attendance** 182

- Ovid/MEDLINE: Searching for Journal Articles

In 2007, The Norman Knight Nursing Center staff, in collaboration with the Coordinator for Education and Database Services and Coordinator for Reference Services from the Hospital’s
Treadwell Library, developed this class to help clinicians learn the fundamentals of the Medline search engine to find biomedical and nursing literature available in the library’s electronic journals. The class is offered once a month and is taught by the Treadwell Library coordinators.

♦ Learning Objectives:

➢ Describe the process of creating patient care questions and determining the literature database(s) for research.
  ▲ Procedure for developing a search strategy
  ▲ Overview of available databases
  ▲ Availability of librarian support

➢ Identify key components in an Ovid/MEDLINE nursing search.
  ▲ Procedure for simple and advanced search:
    - Subject headings (mapping)
    - Subheadings
    - Limits
    - Subject headings tree structure
    - Explode
    - Combine searches
    - Keyword searches
    - Use of Ovid Results Manager
    - Links to electronic journal articles

♦ Content Outline: Describe the process of creating patient care questions (10 minutes)

➢ Identify key components in an Ovid/MEDLINE nursing search (40 minutes)

➢ Questions and answers (10 minutes)

♦ Attendance: Twenty-eight nurses attended the eight classes held since the start of the initiative.

Evidence-based Practice

The Professional Practice Model (OOD 14) describes an environment at MGH where nursing care is grounded on established standards of care, scientific research and evidence-based practices. All educational programs are developed using these principles. Following are two examples of such programs.
• Advanced Wound Care Education

As described in Force 8.6, the Wound Care Program is a comprehensive two-day program designed for the Staff Nurse or Advanced Practice Nurse enthusiasts who are interested in intensifying their knowledge of a wide variety of cutaneous wounds and innovative, evidence-based wound care management. The course includes practice sessions related to wound assessment, treatment decision, and application of selected dressings. The two-day program was offered to Staff Nurses five times between June 2006 and June 2007.

♦ Learning Objectives:

➢ At the completion of this program, the participant will be able to:
➢ Identify at least two factors, which may stall healing of an acute wound and promote conversion to a chronic wound.
➢ Recount at least two changes in the chronic wound environment which treatments are intended to modify.
➢ List three of seven general principles of wound management.
➢ Correlate at least one wound care product with each of the eight components of the wound care process.
➢ Name two of three micronutrient supplements, which may enhance wound healing in the malnourished patient.
➢ Delineate at least two case management issues frequently encountered at hospital discharge of a patient with a complex wound.
➢ Specify two critical elements of procedures for cleansing a wound, assessing a wound, and documentation of wound assessment and treatment.
➢ Assess four sets of serial wound images and delineate the treatment protocol / modifications.
➢ For ten high frequency types of wounds, specify the most common etiology
   ▲ Identify at least one key differentiating clinical feature
   ▲ Propose one condition – specific intervention to promote wound closure (e.g. arterial – assess improve arterial perfusion; venous – compression/elevation; neuropathic – off-load pressure with special footwear; etc.)
➢ State two indications for Vacuum-Assisted Closure (VAC).
➢ In a laboratory simulation, demonstrate the appropriate application of selected dressings.
Content Outline: Attachment 14.4.e is the course outline for the two-day program.

Attendance: Since the start of the program in 2004, over 450 Staff Nurses and Clinical Nurse Specialists almost ten percent of the nursing work force has attended the program. In 2006/2007 series, 184 Staff Nurses have attended and 34 nurses are pre-registered for the class scheduled in November 2007.

Nursing Grand Rounds

Nursing Grand Rounds is a one-hour continuing educational event for nurses, which integrates the case study method with didactic content. Programs are coordinated by Clinical Nurse Specialists on a rotating basis and are offered two to four times a month over the course of the year. The information provided is from the Nursing Grand Round session, Recognizing Stroke at the Bedside: Nursing Implications presented on June 13, 2007 by the Clinical Nurse Specialist and a Staff Nurse from Neurology.

Learning Objectives: The learner will:

- State the signs and symptoms of stroke:
  - Introduction
  - Review of stroke demographics
  - Overview of Stroke Risk Factors
  - Recognizing stroke signs & symptoms
- Identify the responsibilities of the nurse in the identification and care of the patient experiencing an acute stroke.
- Review of the acute stroke protocol
- Identify the roles and responsibilities of the care team when a Code Stroke is called.

Content Outline:

- Sign and Symptoms of Stroke – Lecture and Case Study (25 minutes)
- Roles and responsibilities of the nurse – Lecture (25 minutes)
- Question and Answers – (10 minutes)

Attendance:

<table>
<thead>
<tr>
<th>DATE</th>
<th>PROGRAM</th>
<th>SPEAKER</th>
<th>ATT</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/11/07 (Th)</td>
<td>Macaluso Award Ceremony</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>01/18/07 (Th)</td>
<td>Magnet Hospital</td>
<td>Sheila Golden-Baker RN</td>
<td>56</td>
</tr>
<tr>
<td>Date</td>
<td>Topic</td>
<td>Facilitator</td>
<td>Notes</td>
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<tr>
<td>01/25/07 (Th)</td>
<td>Care of the Patient with Lung Cancer</td>
<td>Marian Jeffries RN</td>
<td>24</td>
</tr>
<tr>
<td>02/14/07 (W)</td>
<td>IVF</td>
<td>Patricia Hojnowski-Diaz RN</td>
<td>16</td>
</tr>
<tr>
<td>02/22/07 (Th)</td>
<td>Doing the “Write” Thing</td>
<td>Cheryl Mee/Brian French RN</td>
<td>36</td>
</tr>
<tr>
<td>03/01/07</td>
<td>Knight Preceptor Award</td>
<td>N/A</td>
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<tr>
<td>03/22/07 (Th)</td>
<td>The Joint Commission and Hospital Accreditation</td>
<td>Joan Fitzmaurice RN</td>
<td>26</td>
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<tr>
<td>04/05/07 (Th)</td>
<td>USNS Mercy</td>
<td>Joy Williams RN</td>
<td>28</td>
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<tr>
<td>04/11/07 (W)</td>
<td>Anticoagulation</td>
<td>Lynn Oertel RN</td>
<td>14</td>
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<tr>
<td>04/26/07 (Th)</td>
<td>Cardiac Nursing Day</td>
<td>Diane Carroll RN, PhD</td>
<td>55</td>
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<tr>
<td>05/01/07</td>
<td>NO GRAND ROUNDS - - - NURSE WEEK</td>
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<tr>
<td>05/24/07 (Th)</td>
<td>Bedside Emergencies</td>
<td>Maureen Schnider RN</td>
<td>46</td>
</tr>
<tr>
<td>06/13/07 (W)</td>
<td>Caring for the Patient with Stroke</td>
<td>Mary Guanci RN, Kelly Sweeney RN</td>
<td>51</td>
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<tr>
<td>06/28/07 (Th)</td>
<td>Collaborative Governance</td>
<td>Sheila Golden-Baker RN</td>
<td>N/A</td>
</tr>
<tr>
<td>07/11/07 (W)</td>
<td>The Ethics of Patient Education</td>
<td>Ellen Peterson RN, Suz Hitchcock-Bryan RN</td>
<td>41</td>
</tr>
<tr>
<td>07/26/07 (Th)</td>
<td>Nursing Informatics</td>
<td>A Peters-Lewis, D Jones RN, PhD</td>
<td>36</td>
</tr>
<tr>
<td>08/08/07 (W)</td>
<td>Preparing the Patient for Dialysis</td>
<td>Carol Tyksienski RN</td>
<td>28</td>
</tr>
<tr>
<td>08/23/07 (Th)</td>
<td>NO GRAND ROUNDS</td>
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<tr>
<td>09/12/07 (W)</td>
<td>Care Of The Patient With A Trach</td>
<td>Sue Gavaghan RN, Marian Jeffries RN</td>
<td>33</td>
</tr>
<tr>
<td>09/13/07 (Th)</td>
<td>Visiting Professor Program</td>
<td>Angeleen Peters-Lewis RN, PhD</td>
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<tr>
<td>09/27/07 (Th)</td>
<td>Role of the Psychiatric Clinical Specialist</td>
<td>Psych Clinical Nurse Specialists</td>
<td>38</td>
</tr>
<tr>
<td>10/10/07 (W)</td>
<td>Quality Improvement and TPS</td>
<td>Karen Hopcia RN</td>
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<tr>
<td>10/18/07 (Th)</td>
<td>Nursing Documentation</td>
<td>Mandi Coakley RN, PhD</td>
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<tr>
<td>10/25/07 (Th)</td>
<td>Case Management Week</td>
<td>Yolanda Alston</td>
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<tr>
<td>11/14/07 (W)</td>
<td>Talking with Teens about Taking Care of Themselves</td>
<td>Coleen Caster RN, NP</td>
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<tr>
<td>11/22/07 (Th)</td>
<td>THANKSGIVING</td>
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<tr>
<td>12/12/07 (W)</td>
<td>How to Quickly Build Trust and Influence with Patients</td>
<td>Suzanne Oconnor RN</td>
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<tr>
<td>12/27/07 (Th)</td>
<td>TBA</td>
<td>Susan Wood RN</td>
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MAINTAINING COMPASSIONATE CARE...IN TIMES OF UNCERTAINTY
THURSDAY & FRIDAY, FEBRUARY 8 - 9, 2007

PRE-CONFERENCE EVENT
MGH Institute of Health Professions
President’s Lecture Series
THURSDAY, FEBRUARY 8, 2007

4:00pm Henry Knox Sherrill Lecture
Introduction: Ann Caldwell, President, MGH Institute of Health Professions
Professional Responsibility: The Clinician’s Role in End-of-Life Decision Making
Dr. Andrew Billings

5:30pm President’s Lecture Reception
Lecture and reception is open to the public and fee of charge. Conference participants are invited to attend. Registration for the February 9 conference will open at 3:00pm.

CONFERENCE
FRIDAY, FEBRUARY 9, 2007

7:30am Registration
8:00am Breakfast
8:45am Opening Session
Muh Poitillo, PhD, Conference Director
Julie Rosen, Kenneth B. Schwartz Center
Kevin Kearns, PhD, MGH Institute of Health Professions
Jeanette Ives Erickson, RN, MS, Massachusetts General Hospital
Moderator: Paul A. Montgomery, PhD

9:00am The Acute Care Unit: How can the stresses of uncertainty be channeled to cooperative effort?
Jean Knao, MD, Jodie Sullivan, RN, MS, others
Respondent: Ellen M. Robinson, RN, PhD
Professional and family caregivers are challenged in the setting of a respiratory acute care unit as clinical psychosocial and existential issues are raised, complicating decisions that are respectful of patients' values, goals, dignity, and quality of life.

10:00am Break

10:45am The Rehabilitation Setting: What is a realistic outcome?
Presenters: TBA
Respondents: Lynne Brady Wagnor, MA, CCC-SLP
Negotiating appropriate goals for patients in an acute rehabilitation setting becomes more challenging when uncertainty exists about the patient’s potential for functional gain. Constructive compromises can be taken when altering assumptions about rehabilitation goals exacerbate conflict among professionals, patients, and families.

12:15pm Lunch and Conversation
Moderator: John Twenney, PhD

1:20pm The Neurological Unit: How can we honor the patient’s wishes under such pressure to make an urgent decision?
Presenters: Marion Phipps, RN, MS, Mary Zwierin, MSW, others
Respondents: Regina P. Doherty, OTLD, OTLD
Severe and life-threatening symptoms following an acute neurological event often lead to unexpected and unwelcome ethical dilemmas that impact collaboration of the interdisciplinary team, family caregivers and the patient. Patients are often unable to speak for themselves. Their surrogates are not prepared to act in the small, urgent window of time, making decisions that have significant bearing on the patient’s future.

2:45pm Keynote Address
Introduction: Ellen Robinon, RN, PhD
How Sick Is Too Sick? How Disabled Is Too Disabled?
Dr. Kristi Kirschen

3:45pm Wrap-Up and Evaluation

4:00pm Wine and Cheese Reception

MAINTAINING COMPASSIONATE CARE...IN TIMES OF UNCERTAINTY
FEBRUARY 8 - 9

SPACE IS LIMITED. PLEASE REGISTER EARLY.

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<thead>
<tr>
<th>Name, First</th>
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<tbody>
<tr>
<td>Address</td>
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Please complete all requested information. The Conference Director reserves the right to determine admission.

Registration Cost 2 of Attendees Total

Health Care Professional or Faculty $60 x 3 $180
Family or Volunteer Caregiver $30 x 3 $90
Student $30 x 5 $150

Total: $420

Thank you for your registration.

Please make check payable to: Compassionate Care/MGH Institute

Send with registration form to: MGH Institute of Health Professions
Compassionate Care Conference
Charlestown Navy Yard
36 First Avenue, Boston, MA 02129-4557

For directions, public transportation, parking, and lodging, please refer to the MGH Institute website: www.mghhp.edu

or call Elizabeth Phipps at (817) 726-0968
MAINTAINING COMPASSIONATE CARE

We invite you to join us to address constructive approaches to the extremely challenging ethical situations that family and professional caregivers must face together when the patient's situation turns uncertain in regards to clinical prognosis, informed preferences and quality of life. We have chosen experts and selected case presentations so that this event will be informative and a valuable resource for everyone who attends. We look forward to seeing you there.

Ruth Pastore, PT, PhD    Ellen M. Robinson, RN, PhD
Conference co-directors

Featured Speakers

J. Andrew Williams, MD is the Director of the Palliative Care Service at Massachusetts General Hospital and Co-Director of the Harvard Medical Center for Palliative Care. He serves as Senior Associate Editor of the Journal of Palliative Medicine and is on the Editorial Board of the Journal of Palliative Care. He is a member of the Division of Medical Ethics, Harvard Medical School.

Kristi L. Kirschner, MD is the Medical Director of the Woman with Disabilities Center and the Director of the Donnelly Family Disability Ethics Program at the Rehabilitation Institute of Chicago. She is an Associate Professor of Physical Medicine and Rehabilitation and of Medical Ethics and Humanities at Northwestern University Medical School.

February 8 - 9, 2007

MGH Institute of Health Professions
Charlestown Navy Yard
36 First Avenue, Boston

Sponsors
The Ethics Initiative
MGH Institute of Health Professions
The Ethics in Clinical Practice Committee
The Institute of Patient Care, MGH Patient Care Services
Funding Provided by
The Kenneth B. Schwartz Center
Respecting Choices®
Advance Care Planning Course for Facilitators

All participants must have completed the Online Facilitator Course with:
1. Certificate of completion for all six online modules.
2. Completion of advance directive document used in your organization/community (e.g., power of attorney for healthcare type of document) to submit for review by instructor (will be returned to participant). You will be asked to submit this document at the beginning of the day, so please have it completed when you arrive.
3. Completed personal discussion exercise.

Agenda

<table>
<thead>
<tr>
<th>Date: October 12, 2006</th>
<th>Respecting Choices® Advance Care Planning Course for Facilitators classroom curriculum and competency evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30am</td>
<td>Continental breakfast</td>
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<tr>
<td>8:00-8:30am</td>
<td>Introductions (Susan Edgman-Levitan and Sharon Brackett RN)</td>
</tr>
<tr>
<td></td>
<td>Welcome</td>
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<tr>
<td></td>
<td>Overview of course (Sharon Brackett)</td>
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<td></td>
<td>Program description, objectives, and agenda</td>
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<td>Competency evaluation expectations</td>
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<tr>
<td>8:30-9:00am</td>
<td>Review of Advance Care Planning Facilitation Skills (Online modules 1 and 2) (Sharon Brackett)</td>
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<tr>
<td></td>
<td>1. General Interview Skills</td>
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<td>2. Interview Skills for Basic Advance Care Planning Discussions</td>
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<tr>
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<td>3. Video Role-play: Facilitating Basic Advance Care Planning Discussion</td>
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<td></td>
<td>4. Group Evaluation of Observed Skills</td>
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<tr>
<td>9:00-9:15am</td>
<td>Break (refreshments)</td>
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<tr>
<td>9:15-10:30am</td>
<td>Review of Advance Care Planning Facilitation Skills (Online modules 4 and 5) (Alex Cist and Paul Montgomery)</td>
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<tr>
<td></td>
<td>1. Interview Skills for Chronic, Progressive Illness</td>
</tr>
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<td></td>
<td>2. Interview Skills for Those We Would Not be Surprised Died in the Next 12 Months or Those Living in Long-term Care</td>
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<td></td>
<td>3. Video Role-Play: Facilitating Advance Care Planning with Patients with Chronic, Progressive Illness</td>
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<td>4. Group Evaluation of Observed Skills</td>
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<tr>
<td>10:30-11:30am</td>
<td>Practice role-play exercises (Work in groups of three):</td>
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<tr>
<td></td>
<td>1. Facilitating Basic Advance Care Planning Discussion</td>
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<td></td>
<td>2. Facilitating Advance Care Planning Discussion with Adults with Progressive, Chronic Illness: Assessment of Understanding of Illness, Experiences, Involving Others as Necessary</td>
</tr>
</tbody>
</table>
3. Facilitating Advance Care Planning With Adults Living in Long-Term Care or Those We Would Not be Surprised Died in the Next 12 Months: The Living Well Interview

11:30-12:00  **The Personal Connection:** (Ellen Robinson RN, PhD)  
What did you learn when initiating a conversation about advance care planning with someone you love? Why is this an important exercise?

12-12:45 pm  Lunch (provided)

12:45-1:15 pm  **Creating an Advance Directive** (Online module 3) (Ellen Robinson RN, PhD)  
Review of the legal issues and requirements for completing a written advance directive in your community: Common issues and concerns

1:15-2:00pm  **Tools for promoting and assisting with advance care planning** (Sharon Brackett, RN)  
“Making Choices™” video presentation  
Local media examples if available  
Large group discussion: Strategies to engage others in understanding the importance of basic advance care planning

2-2:15pm  Break

2:15-3:15pm  **Making Advance Care Planning Work: Organizational Issues** (Online module 6)  
(Susan Finn RN and Sharon Brackett RN)  
Review of principles  
Define your organization/community’s system for:  
1. Entering, reviewing, transferring advance directives  
Making referrals to ACP facilitators/other professionals  
Monitoring ACP outcomes  
Handouts: Organization Policy/Procedure on Advance Care Planning/Advance Directives  

Strategies to Educate Health Professionals and the Community  
Review of principles  
Define your organization/community’s system for:  
1. Educating staff/peers  
2. Educating community

3:15-4:15pm  Competency validation role-play exercise (small groups): Facilitating Basic Advance Care Planning Discussion with Competency Evaluation Completion by Observer

4:15 p.m.  Summary/Evaluation  
What comes next?

4:30 p.m.  Adjourn
**The Center for Clinical and Professional Development**

**Interdisciplinary Ethics Resource Program**

**A Proposal to Develop Unit Based Ethics Resources**

**Purpose:**

This staff development initiative is designed to develop clinicians in Patient Care Services, who at the patient-family interface possess the knowledge and skill to function as unit-based ethics resources. The program is designed to heighten ethical sensitivity, increase knowledge of theoretical principles and approaches to clinical ethics, and apply those approaches to case analysis. Prevention and early identification of ethical issues is key in assisting patients, families, clinicians and the organization in managing the increasingly complex ethical questions, which arise in the health care environment.

**Program Objectives:**

This program is designed to:

- Create a model for recognizing the role of unit based ethics resources in Patient Care Services.
- Prepare selected clinicians to assume the role of ethics resource, a 'first line resource' in assisting fellow clinicians to notice ethical issues in patient care, and employ preventive and early intervention strategies.
- Prepare unit-based ethics resources that are intimately familiar with the network of ethics resources in the organization and respective profession(s).

By participating in this program, clinicians will be able to:

- Recognize ethical issues that impact patient-families for whom they care.
- Analyze practice problems for their ethical content.
- Demonstrate an understanding of ethics language and concepts in describing problematic clinical situations.
- Identify ethical issues prevalent in health care in the early 21st century.
- Identify the ethics resources within the organization.
- Provide consultation to staff as "front line resources."
- Translate knowledge and skills into role behaviors. Examples include
  - facilitating a case presentation on the unit
  - assisting staff to identify ethical elements in a clinical narrative
  - providing consultation to staff in identifying and resolving ethical issues
  - referring the clinician to other appropriate ethics resources in the organization.

**Program Faculty:**

Ellen Robinson RN Ph.D., Martha Jurchak RN PhD, Pamela Grace RN PhD, Elizabeth Tracey RN PhD
Target Audience:
Clinicians caring for patients and families at the MGH who are interested in developing skills in this area and who have been recommended by their manager for inclusion in this program.

Expectations of Participants:
1. Interest and commitment to integrating ethics into practice, and becoming a known resource to fellow clinicians in ethics.
2. Commitment to attend an 8-hour program and monthly 1 1/2 hour seminars.
3. Commitment to complete recommended readings and be an active participant in discussions.
4. Commitment to assume the role of ethics resource on unit with the assistance of an identified mentor.
5. Commitment to the serving as a front line resource in providing support to staff.

Selection Criteria:
1. Unit commitment to provide two-three participants (nurses, social workers, therapists)
2. Minimum two years experience as a clinician
3. Practices at MGH at least three days per week

Program Design:
A pilot program consisting of 8 units representative of critical and general care will identify one to two staff nurses to attend the program. Other Patient Care Services departments (RT, PT, OT, SLP, etc) have the option of identifying a participant as well. This pilot program will be 9 months long.

Pilot program participants will attend:
1. Foundational Program: Eight-hour workshop which addresses ethical theory (principle-based, care ethics, virtue ethics); case analysis; organizational ethics resources. Lecture/discussion will be coupled with a commitment to read literature provided. Target dates in March 2003.
2. Ongoing Staff Development: A 1 1/2 hour monthly seminar will draw upon current ethical issues in health care and relevant cases, to which ethics principles/approaches will be applied. Current literature in health care ethics will be provided for each offering.

A key feature of the program will be the development of skill over time as supported by an expert mentor. The mentor will assist staff with facilitating unit rounds and case discussions as well as serving as a resource for all staff on the pilot units.
**Curriculum:**

I. Knowledge

*Some reasons why ethical issues have emerged and become more noticeable in practice:*

- More choices for patients
- Increased recognition of patient autonomy
- Increased technology
- Changed societal view of death related to advances in technology
- Surrogate roles
- Difficulties in establishing with certainty, prognoses for patients
- Conflict in philosophical view of the patient, in the meaning of recovery for patients
- Limited health care resources (organs, technology, blood products, nurses in the hospital and community, etc.)
- Inequalities in the American health care systems
- Inequalities in the 'human condition' and the 'personal resources' of individuals and families
- Pluralistic society (values, culture, religion, political views)

**Language of Ethics**

- **Identification of a 'Feeling': Moral Distress in Health Care Professionals**
  - Definition of Moral Distress
  - Why it is felt
  - Can one recognize it, and see it objectively (untangle emotions and see it for what it is?)
  - What does it mean?
  - How to, when to, act upon it? Is there an avenue in the organization?
  - Ethical Sensitivity of Clinicians (varies across individuals, maybe professional perspective can enlighten the larger interdisciplinary group)

- **Ethical Problems in Practice**
  - Definition of ethical dilemma
  - Differentiate from moral distress, locus of control (knowing what needs to be done, finding the way around or through the obstacle (drawing from Ruth Purtilo)
  - The importance of 'knowing the patient'; engaged interaction for this
  - Data collection (what data) and analysis of dilemma

- **Theoretical and Philosophical Approaches: Their Strengths and Limitations**
  - **Principle Based** (expand into determining capacity, models of decision-making, etc.)
  - Care Ethics (relationships, context, particulars)
  - Virtue (Character)
  - Narrative Ethics
  - Patient Rights

**Case Application**

- Take from above and apply to cases in order to illuminate ethical problems and potential alternatives, while always considering the context.
Ethics Resources Available to Clinicians

- Professional
- Literature
- Within the Organization
- Access

Ethical Issues in Health Care Today

- End of Life
- Scarce Resources
- Genetics
- Professional Issues
- Cultural
- View of the Person as an Individual or Person as a Member of a Group
- Stem Cell
- Reproductive Issues
- Elders
- Organizational Issues
- Problems of the US Health Care System

II. Role Enactment

Personal coaching of participant at the unit level will be provided to assist in the application of knowledge gained in the educational program and seminars. Coaching will be focused on development of unit based ethics resource role behaviors, such as case/narrative analysis and facilitating ethics rounds.

Evaluation Methods:
Suggested evaluation measures include:
1) Participant self-assessment with personal development in terms of knowledge and perceived ability to assume role behaviors of ethics resource.
2) Instructor evaluation of participant performance (case study analysis, knowledge assessment, consultative assessment)
3) Mentor evaluation of participant performance in role behaviors such as case/narrative analysis and facilitating ethics rounds.

Prepared by Ellen M. Robinson RN PhD, Clinical Nurse Specialist in Ethics, Mass General Hospital

Erobinson1@partners.org
HARVARD BIOETHICS COURSE  
June 14, 15 & 16, 2006

**Wednesday, June 14th**

**LOCATION**  
Harvard Medical School  
Armenise Building - Amphitheater D  
210 Longwood Avenue, Boston

8:00 am  Registration and Continental Breakfast  
8:30  Welcome and Introductions  
*Christine Mitchell and Robert Truog*

9:00  **LECTURE** The Place of Clinical Bioethics in Health Care and Philosophy  
*Dan Brock PhD*

9:45  Questions and Comments

10:00  **LECTURE** Ethical Theories, Principles, Terminology, and Decision-making  
*Christine Mitchell RN*

10:45  Questions and Comments

11:00  Refreshment Break

11:15  **LECTURE** Ethical Dilemmas in End of Life Care  
*Robert Truog MD*

12:00 pm  Questions and Comments

12:15  Lunch (on your own)

1:00  **DISCUSSION GROUPS** (assigned break-out rooms)

2:00  Transition break

2:10  **LECTURE** Brain Death, PVS, MCS...Consciousness and Clinical Ethics  
*Thos Cochrane MD*

2:45  Questions and Comments

3:00  **LECTURE** Data on Dying in Massachusetts  
*Maria Schiff MS*

3:30  Questions and Comments

3:40  Refreshment Break

3:55  **LECTURE** Limiting Life Sustaining Treatments  
*Eric Krakauer MD*

4:30  Adjourn
HARVARD BIOETHICS COURSE
June 14, 15 & 16, 2006

Thursday, June 15th

LOCATION
Harvard Medical School
Armenise Building - Amphitheater D
210 Longwood Avenue, Boston

8:00 am  Continental Breakfast
8:30   Announcements

8:45   LECTURE  Clinical Ethics Cases in the Courts
       Judy Johnson JD

9:30  Questions and Comments

10:00  LECTURE  Research Ethics
       Steve Joffe MD

10:50  Questions and Comments

11:00  Refreshment Break

11:15  LECTURE  Ethics Committees in the US
       Christine Mitchell RN

12:00 pm  Questions and Comments
12:15  Lunch (on your own)

1:00   DISCUSSION GROUPS (assigned break-out rooms)

2:00   Transition break

2:10   LECTURE  Conscientious Objection
       Charlotte Harrison JD MPh MTS

2:40  Questions and Comments

2:50   LECTURE  New Rules at DSS about End of Life Decisions
       Jeffrey Burns MD

3:15  Refreshment Break

3:30   LECTURE  Empirical Research in Bioethics
       Mildred Solomon EdD

4:15  Questions and Comments

4:30   Adjourn
HARVARD BIOETHICS COURSE
June 14, 15 & 16, 2006

Friday, June 16th

LOCATION:
Harvard Medical School
Armenise Building - Amphitheater D
210 Longwood Avenue, Boston

8:00 am  Continental Breakfast

8:30  Announcements

8:45  LECTURE  Ethics Consultation
   Martha Jurchak RN, PhD

9:30  Questions and Comments

10:00  LECTURE  Atoms, Autonomy, and Molecular Ethics
   Lachlan Forrow, MD

10:45  Questions and Comments

11:00  Refreshment Break

11:15  LECTURE  Medical Futility
   Robert Truog MD

12:00 pm  Questions and Comments

12:15  Lunch (on your own)

1:00  DISCUSSION GROUPS (assigned break-out rooms)

2:00  Transition break

2:10  LECTURE  Organizational Ethics
   Jim Sabin MD

2:55  Questions and Comments

3:10  Light Buffet, Wine and Networking

   Introduction of ethics leaders in the HTH; Discussion of course topics

4:00  After Words
Massachusetts General Hospital  
Phase II: Wound Care Education Program  

*Day 1: Wednesday, January 24, 2007*

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Presenter(s)</th>
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<tbody>
<tr>
<td>8:00</td>
<td>Registration / Continental Breakfast</td>
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<tr>
<td>8:15</td>
<td>Overview</td>
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<td>8:20</td>
<td>Pretest</td>
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<tr>
<td>8:40</td>
<td>Physiology of Wound Healing</td>
<td>Catherine Griffith, MSN, APRN, BC, CCRN</td>
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<td>9:20</td>
<td>General Principles of Wound Management</td>
<td>Jacqueline Collins, MSN, RN</td>
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<td>10:00</td>
<td>Break</td>
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<tr>
<td>10:15</td>
<td>Wound Care Products</td>
<td>Susan Stengrevics, MSN, RN</td>
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<td>11:15</td>
<td>Pressure Ulcers / Support Surfaces</td>
<td>Susan Gavaghan, MSN, RN</td>
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<td>12:00</td>
<td>Lunch</td>
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<tr>
<td>1:00</td>
<td>Nutrition</td>
<td>Caroline Breen, MS, RD, LDN, CNSD</td>
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<td>1:20</td>
<td>Incontinence / Maceration</td>
<td>Marion Phipps, MS, RN, CRRN, FAAN</td>
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<td>2:05</td>
<td>Burns</td>
<td>Mary Liz Bilodeau, MS, APRN, BC, CCNS, CCRN</td>
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<td>2:45</td>
<td>Break</td>
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<td>3:00</td>
<td>Skills Session: Wound Cleansing</td>
<td>Virginia Capasso, PhD, APRN, BC</td>
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<td>Initial and Serial Assessments, Documentation</td>
<td>Joanne Empoliti, MS, APRN, BC, ONC</td>
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<td>Treatment Decisions</td>
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# Massachusetts General Hospital
## Phase II: Wound Care Education Program

### Day 2 Agenda: Wednesday, January 31 2007

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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
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<tr>
<td>7:45</td>
<td>Registration / Continental Breakfast / Overview</td>
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<tr>
<td>8:00</td>
<td><strong>Mechanisms and Management:</strong></td>
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<td>8:00</td>
<td>Ischemic Ulcers</td>
<td>Erin Cox, MSN, APRN, BC</td>
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<td>8:30</td>
<td>Diabetic / Venous Ulcers</td>
<td>Virginia Capasso, PhD, APRN, BC</td>
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<td>9:30</td>
<td>Enterocutaneous Fistulas</td>
<td>Ann Martin, MS, APRN, BC</td>
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<td>10:00</td>
<td>Break</td>
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<td>10:15</td>
<td>Vacuum-Assisted Closure</td>
<td>Ann Martin, MS, APRN, BC</td>
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<td>Jill Pedro, MS, APRN, BC, ONC</td>
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<td>11:00</td>
<td>Case Management</td>
<td>Roberta Dee, RN</td>
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<td>11:30</td>
<td>Lunch</td>
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<td>12:30</td>
<td>Atypical Wounds</td>
<td>Susan L. Wood, MS, APRN, BC</td>
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<td>1:00</td>
<td>Radiation Injuries</td>
<td>Marian Jeffries, MS, APRN, BC</td>
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<td>1:30</td>
<td>Lymphedema</td>
<td>Cheryl Brunelle, PT, CCS, CLT</td>
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<td>Lily Dayan-Cimadora, PT, DPT, NCS, CLT-LANA</td>
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<td>2:00</td>
<td>Break</td>
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<td>2:15</td>
<td>Three of Four Skills Sessions (pre-registration)</td>
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<td>2:15</td>
<td>Ankle-Brachial Index</td>
<td>Susan Stengrevics, MSN, RN</td>
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<td>4:00</td>
<td>Unna’s Boots</td>
<td>Virginia Capasso, PhD, APRN, BC</td>
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<td>Joanne Empoliti, MS, APRN, BC, ONC</td>
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<td>4:00</td>
<td>VAC Dressing</td>
<td>Jill Pedro, MSN, APRN, BC, ONC</td>
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<td>Dressing workshop</td>
<td>Jacqui Collins, MS, RN</td>
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<td>Ann Martin, MS, APRN, BC</td>
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<tr>
<td>4:30</td>
<td>Post – Test / Evaluation</td>
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