CE EVALUATION FORM SUMMARY

How to Have the Conversation and Complete a POST Form

April 9, 2014 (Charleston Town Center Marriott)

N = 21

Circle the number that represents how you rate the conference:

Content: 4.9	USEFUL	5	4	3	2	1	IMPRACTICAL
Audio/visual aids: 4.8	HIGHLY USEFUL	5	4	3	2	1	INADEQUATE
Printed materials: 4.7	HIGHLY USEFUL	5	4	3	2	1	INADEQUATE
Learning environment: 4.8	CONDUCIVE	5	4	3	2	1	NOT CONDUCIVE
Hospitality: 4.8	EXCELLENT	5	4	3	2	1	POOR
Level of material presented: 4.9	ABOUT RIGHT	5	4	3	2	1	TOO SIMPLE
How well organized was this program: 4.8	WELL ORGANIZED	5	4	3	2	1	DISORGANIZED
Overall effectiveness rating: 4.8	EXCELLENT	5	4	3	2	1	POOR

We are interested in assessing the impact of this educational activity. Please consider the objectives and then rate with (5) being Very Confident and (1) being Not Confident, how confidently you can...

	Very Confident					Not Confident		
Identify skills to initiate POST-type conversations with persons with life-limiting illness, designated healthcare agents, and their	Prior to Participation: 3.2	5	4	3	2	1		
loved ones	After Participation: 4.6	5	4	3	2	1		
Identify skills to assist in making informed end-of-life treatment decisions to include CPR, limitations on treatment, time-limited trials, and comfort care	Prior to Participation: 3.38	5	4	3	2	1		
urais, and connoct care	After Participation: 4.8	5	4	3	2	1		
Identify techniques to create a POST document that accurately reflects an individual's treatment decisions	Prior to Participation: 3.0	5	4	3	2	1		
	After Participation: 4.75	5	4	3	2	1		

What, if anything, hindered your learning?

- 1. Sometimes difficult to hear/concentrate on group with many groups in the same room
- 2. Room was cold; Maybe number off, and rotate room so everyone can meet and work with different persons
- 3. Lack of exposure

Would you attend a similar conference in the future? 20 Yes 1 No

Do you plan to change your practice based on what you learned today? 20 Yes 1 No

What will you do differently in your practice as a result of this conference?

- 1. Section B first
- 2. Will likely discuss section B of POST Form prior to Section A when completing the form.
- 3. I am much more likely to approach/discuss the issues surrounding POST forms
- 4. Slow down explore understanding of person/healthcare agent start will illness understanding use sections first to gain understanding of patient preference
- 6. Engage with patient and family to develop a plan that addresses the patient's wishes
- 7. Have patients define their illness/prognosis and review their fears and goals-Very effective
- 8. Practice using a script to guide AD discussions
- 9. Use more statistics, give more time to complete POST
- 10. Ask the questions "Would I be surprised if this individual died within the next 12 months (x5)
- 11. Ask more questions; listen more; recognize this is a process not a task
- 12. More individuals POST form completion-initiate conversations
- 13. Make it a process
- 14. Engaged more family members
- 15. Set-up more than one meeting to introduce and then cover and develop POST Form

- 16. List/organize approach
- 17. Have more structure when addressing the Advance Planning
- 18. The extent to which ACD one discussed and family are included

Did information you learned today reinforce your confidence in your current practice? 20 Yes 0 No

Did you perceive this presentation to include a bias towards any commercial health care product or service, produced by forprofit companies? 1 Yes 20 No

If so, please describe what product or service was discussed: Dr. Moss was present during the training. He reviewed the content and found that there was no bias presented.

What do you consider to be the single biggest problem that you face in your practice?

- 1. Patients and family members are usually unaware of the seriousness of the illness that they present with
- 2. Time management
- 3. Lack of resources for education in religious belief services
- 4. Time to adequately review info with patients and educate as needed; and physician apprehensive to address EOL decisions at times
- 5. Lack of time
- 6. Physicians afraid to get involved or don't feel comfortable-treatment plan not discussed on implemented
- 7. Time (x2)
- 8. Getting family members to understand their loved ones disease process
- 9. Reluctance of medical staff to help initiate/support end of life discussion
- 10. Incorrect POST Forms and then having to revisit with family
- 11. interpretation/privacy
- 12. Staffing/Re-imbursements
- 13. Rehospitalization

Please rate the speaker on the following:

	was	s organized and clear presented useful			I Would Like to Hear				
	in their	presei	ntation	information			This Speaker Again		
Deborah Cotes, DO	Yes	No	Somewhat	Yes	No	Somewhat	Yes	No	
	88.9%			94.4%			94.1%		
Alvin H. Moss, MD	Yes	No	Somewhat	Yes	No	Somewhat	Yes	No	
	100%			100%			100%		
Hanna Thurman, MSW, LGSW, MPA	Yes	No	Somewhat	Yes	No	Somewhat	Yes	No	
	100%			87.5%			100%		

What topics would you like to see discussed at future conferences?

- 1. Topic on illnesses to gain knowledge resources for families and patients; family/patient mediation
- 2. Pallative Care
- 3. Role play with more difficult scenarios which are more realistic than "ideal" ones
- 4. Stages of death/What to expect/how to prepare families and caregivers
- 5. Role play with very difficult residents and families; needed because we have a lot of issues with this
- 6. Strategies to address the family that wants full interventions for terminal patients
- 7. Pain management at the end of life; successful palliative care in LTC

Additional Comments

- 1. Additional comments: Would like conference call
- 2. Would like conference call; Please sent pocket cards to: Crystal Nestor, 740 Annon Rd. Newburg, WV 26410
- 3. Please send me the pocket tools/forms (Dr. Dower mentioned these during training): Amy Hughes, FNP-Amy.Hughes@GenesisHCC.com
- 4. Please send me the 2 tools~pocket cards~for patient interview: Haylea Simmons 76 Jerry Run Road, Bridgeport, WV 26330
- 5. Would like cards: Debbie Ward, 422 23rd St., Oak Hill, WV 25901
- 6. Excellent Job!
- 7. Please send me additional information (Dr. Dower spoke about it). Thank you.
- 8. please send SPIKES card
- 9. Great information! Good conference. I liked the interactive learning style; a quarterly phone call would be helpful

- 10. Perceived lack of time to have the types of discussions we saw/participated in today
- 11. Please send additional tools-Thanks! (Carol. Eckerl@genesis HCC.com); I like the idea of ¼ year phone calls
- 12. Please send me Dr. Dower's Tools: 1116 Serene Drive, Fairmont, WV 26554
- 13. Send Medical Student Checklist for assistance in discussion: Sarah Riddle, 154 Jamestown Way, Hurricane, WV 25526
- 14. Please send assist cards that Josh was talking about: Sharon Senft, 86 Stonewall Rd., Fairmont, WV 26554
- 15. Please send SPIKES: Nathan Johnson, 1000 Lincoln Drive, South Charleston, WV
- 16. Very useful, and very well organized; Please send 2 tools used in Training: Sarah Setran, 63 Township Rd. 1539, Proctorville, OH 45669; Interested in Instructor Trainer