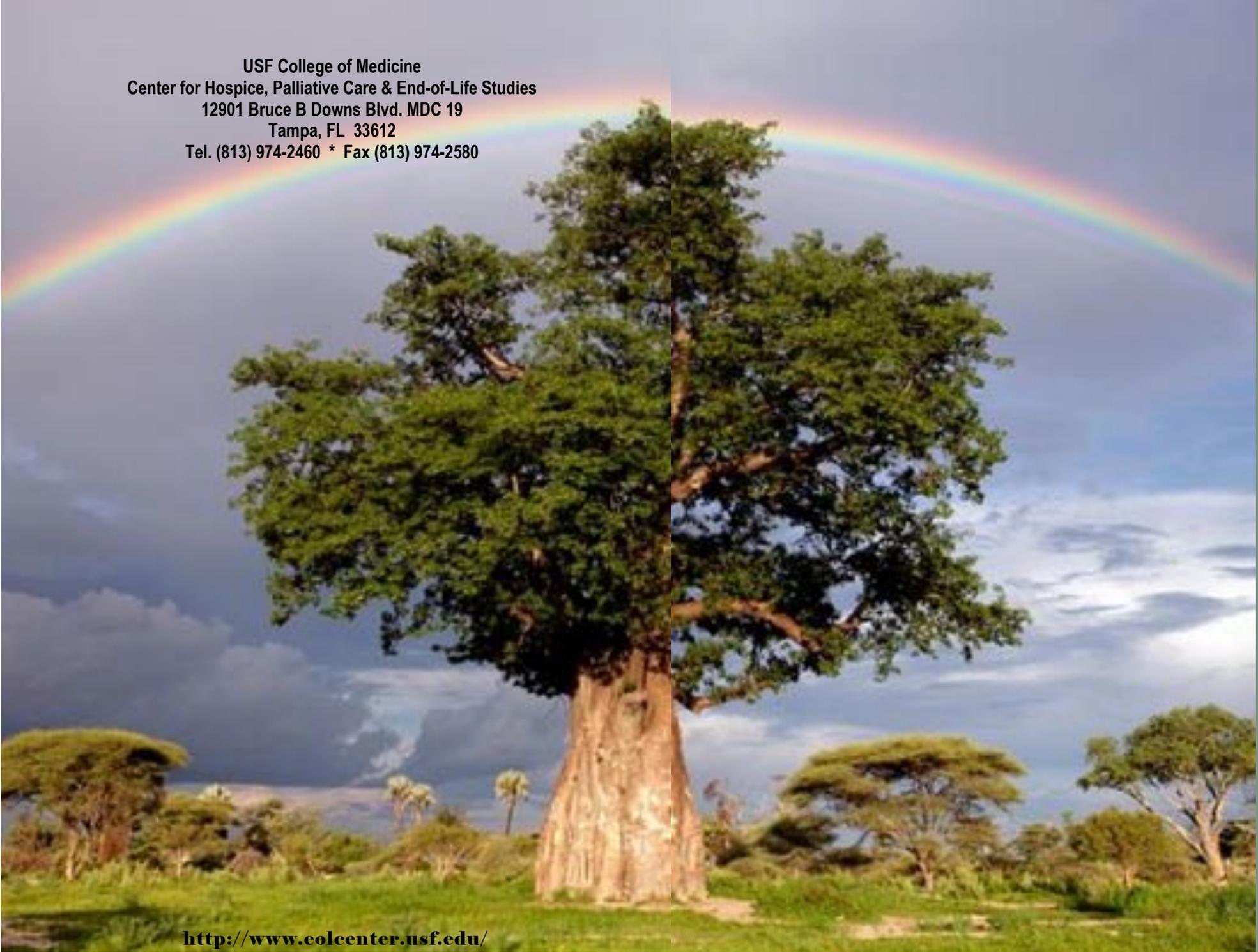


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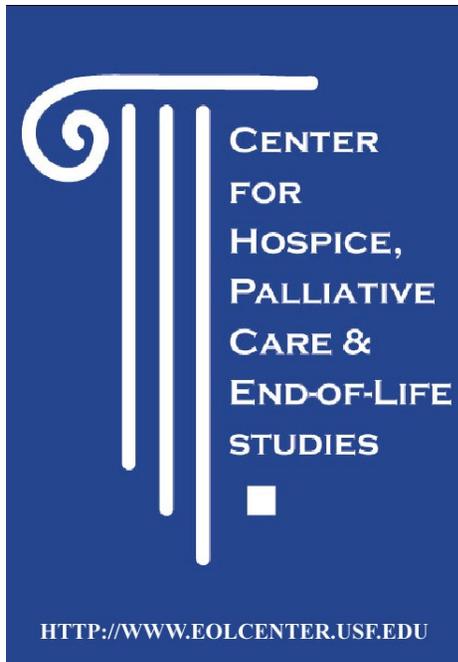
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Tullis, J., & Roscoe, LA. *Communicating life-limiting diagnoses and prognoses to cancer patients and families: Ethical and practical considerations.* **Southern States Communication Association (SSCA) Annual Meeting.** March 2011. Little Rock, AR.

Mhaskar, R. Miladinovic, B. Tsalatsanis, A. Mbah, A. Kumar, A. **Sehwan, K., Schonwetter, R., Djulbegovic, B.** *External Validation of Prognostic Models in Terminally Ill Patients.* **53rd Annual Meeting of the American Society of Hematology.** December 2011. San Diego, CA.

Volicer L. *Effectiveness of antibiotic treatment of pneumonia in advanced dementia Behavioral symptoms in Alzheimer's disease.* **AMDA Long Term Care Medicine.** March 2011. Tampa, FL.

Volicer L. *Palliative care in advanced dementia.* **12th Congress of the European Association for Palliative Care.** May 2011. Lisbon, Portugal.

Douglas, B., Moffitt, S., **Wacksman, R.** *Expanding the role of nurse practitioners in hospice and palliative care.* **NHPCO's 26th Management and Leadership Conference,** April 2011. National Harbor, MD.

Woods D., Panapolis M., *Hospice nursing home cooperation: Benefits to the long-term care provider.* **Best Care Practices in the Geriatric Continuum: Florida Medical Director's Association 20th Annual Symposium.** October 2011. Orlando, FL.



Meng H. *Fatigue, fatigability, and mortality risk among older adults.* **American Public Health Association.** November 2011. Washington DC.

Riley, R., Young, C., O'Reilly, J. *Cultural transformation by acknowledging caring and competence.* **NHPCO's 26th Management and Leadership Conference.** April 2011. National Harbor, MD.

Orloff S. *Making connections: dying, death and bereavement in the global community.* **Bereaved Dads as Family Protectors: Challenge and Opportunity, Association for Death Education and Counseling's 33rd Annual Conference.** June, 2011. Miami, FL

Poonkasem KJ. *Medical acupuncture: A non-pharmacologic approach to symptom management at the end of life.* **NHPCO's 12th Clinical Team Conference and Pediatric Intensive.** October 2011. San Diego, CA.

Proch ML. *Stabilize the present and create the future.* **NHPCO's 26th Management and Leadership Conference.** Gaylord April 2011. National Harbor, MD.

Proch ML. *Using student affiliations to promote hospice.* **NHPCO's 26th Management and Leadership Conference.** April 2011. National Harbor, MD.

Proch, ML. *Do you trust your team? Does your team trust you?* Panel presentation by NCHPP Executive Committee. October 2011. San Diego, CA.

Quinn MJ., Proch ML. *Lighting the way for others: A program for developing exceptional preceptors.* **NHPCO 12th Clinical Team Conference.** October 2011. San Diego, CA.

Quinn MJ., Hughes G. *Breathing life into an established COPD program.* **NHPCO 12th Clinical Team Conference.** October 2011. San Diego, CA.

Riley R. Young C., O'Reilly J., *Cultural transformation by acknowledging caring and competence.* **NHPCO's 26th Management and Leadership Conference.** April 2011. National Harbor, MD.

Roever CP., Vyas B., Sheyner I., **Stewart JT.** *Resolution of visual hallucinations after cataract surgery.* **American Geriatrics Society Annual meeting.** May 2011. Washington, DC.

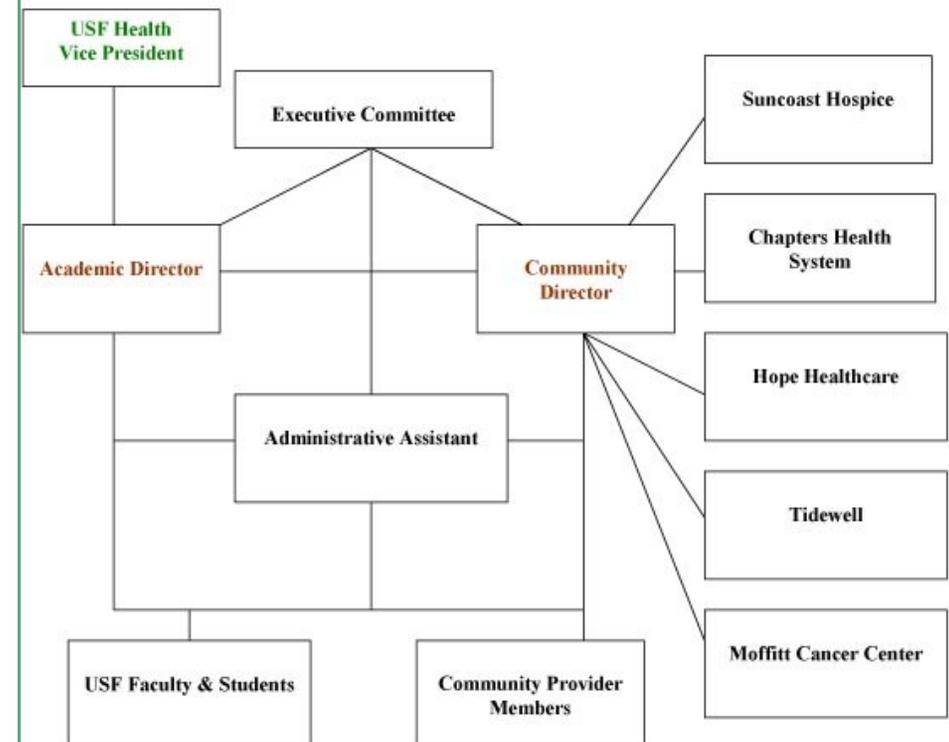
Thompson LA., Bejarano, A. *The relationship between distress and parental concerns in cancer patients with minor children.* **8th Annual Meeting of the American Psychosocial Oncology Society.** February 2011. Garden Grove, CA.

Mission Statement

The mission of the Center for Hospice, Palliative Care & End-of-Life Studies at USF is to:

- Optimize care and systems of care for patients and families faced with non-curable diseases by:
- Generating new knowledge through interdisciplinary research,
- Using that knowledge to educate health and human service professionals, and
- Influencing public policy that supports quality end-of-life care.

The USF Center for Hospice, Palliative Care & End-of-Life Studies





Howard Tuch, MD
Center Academic Director,
University of South Florida,
Medical Director, Hospice and
Palliative Care, TGH



Ronald Schonwetter, M.D.
Center Community Director
Chief Medical Officer
Chapters Health System

Center members include approximately 200 individuals representing a variety of disciplines, professions, and agencies involved in the field of hospice, palliative care and end-of-life studies. Members include university faculty and students, physicians, nurses, social workers, psychologists, occupational and physical therapists, bioethicists, pharmacists, chaplains and other health and human services professionals involved in end-of-life care. Center members represent diverse academic and community interests and work together to improve the quality-of-life of patients facing life-limiting illnesses and their families.

Membership is open to any individual with an interest in hospice, palliative care, and end-of-life research, practice and advocacy. To be added to our mailing list to receive notice of Center meetings and special events, please contact: Lourdes Rodriguez, at (813) 974-2460 or via e mail: lrodrig1@health.usf.edu.

Clark, L., Massaro, T. *Risky Business: Anticoagulation therapy in the setting of hospice and palliative care.* **Annual Assembly of the AAHPM and HPNA.** February 2011. Vancouver, Canada.

Dillon, P., Roscoe, LA., Jenkins, J. J. *African Americans and hospice care: A qualitative meta-ethnography of decisions about hospice care.* **National Communication Association (NCA) Annual Meeting.** November 2011. New Orleans, LA.

Bochner, A., **Ellis, C.** *In buddy's voice.* The Buddy System: Celebrating H. L. (Bud) Goodall. (comments on Dr. Goodall's blog about living with stage four pancreatic cancer). **NCA.** November 2011. New Orleans, LA.

Ellis, C., Patti, C., Payor, T., Lockler, T., Klein, E., Purnell, D., *Collaborative witnessing and writing of Holocaust survivors' stories.* Panel at the **Seventh International Congress of Qualitative Inquiry.** May 2011. Urbana, IL.

Emmett C., *Fall assessment and prevention: Tying evidence into practice.* **NHPCO 12th Clinical Team Conference.** October 2011. San Diego, CA.

Frahm, KA., Brown, L. M., & Barnett, S. D. *Trends in social service utilization and receipt of hospice and palliative care among the Veteran population .* **15th Annual Conference of the Society for Social Work and Research.** January 2011. Tampa, FL.

Glavin L. *Breaking new ground in documentation competency.* **NHPCO 12th Clinical Team Conference.** October 2011. San Diego, CA.

Mingo, CA., McIlvane, JM., & **Haley, W.E.** *Preferences for arthritis interventions: Comparison between blacks and whites with arthritis.* **American College of Rheumatology/Association of Rheumatology Health Professionals Annual Meeting.** November 2011. Chicago, IL.

Herrera F. *Bereavement Fotonovela.* **FAHSA (Florida Association of Homes & Services for the Aging).** **48th Annual Convention and Exposition.** July 2011. Orlando, FL.

Jones S. *The shining star program.* **NHPCO's 26th Management and Leadership Conference.** April 2011. National Harbor, MD.

Maryland K., Roble S. *Excellence in Hospice Volunteer Programs.* **National Hospice and Palliative Care Organization Management and Leadership Conference.** April 2011. National Harbor, MD.



Carrion, IV. *Healthcare decision preferences among Colombian, Mexican, and Puerto Rican women with a cancer diagnosis living in USA.* **13th World Congress of Psycho-Oncology Conference.** October 2011. Antalya, Turkey.

Carrion, IV. *Overcoming qualitative methods challenges with minority older adults: SW research education implications.* **Council of Social Work Education 57th Annual Program Meeting.** November 2011. Atlanta, GA.

Carrion, IV. *Qualitative research on risk and resilience with older Latina women diagnosed with cancer.* **The Gerontological Society of America's 64th Annual Scientific Meeting.** November, 2011. Boston, MA.

Park, N. S., Lee, B. S., **Dobbs, D., Carrion, IV.** Tiffany Young; Jennifer Salmon. *Social relationships of African American and Hispanic older adults: Implications for well-being in assisted living.* **The Gerontological Society of America's 64th Annual Scientific Meeting.** November 2011. Boston, MA.

Carrion, IV. *Responding effectively to Latinos in medical settings: Implications for clinical practice.* **The Latino Social Work Organization National Conference.** April 2011. Chicago, IL.

Carrion, IV. *Language issues related to the practice of social work.* **The Latino Social Work Organization National Conference.** April 2011. Chicago, IL.

Park, N. S., **Carrion, IV.**, Lee, B. S., **Dobbs, D.**, Shin, H. J., Becker, M. *Predictors of length of hospice use among older adults: The role of race/ethnicity.* **The Society for Social Work Research 15th Annual Conference.** January 2011. Tampa, FL.

Cramer, CF. & Seth, S. *Palliative care--It's all about living.* For the **Nature Coast Nurses Chapter of ONS (NCNONS)** October, 2011. New Port Richey, FL.

Cramer, CF. *ELNEC--Critical care train the trainer conference.* July 2011. Tampa, FL.

Cramer CF. *When it's not always happily ever after--Healing stories from the bedside.* Presented at the pre-conference session for the **36th Annual ONS Congress.** April 2011. Boston, MA.

Cramer, CF., Hawley, G. *The lost cancer patients--reaching them through creative routes.* Round Table presentation focusing on reaching Non-Oncology Nurses and on Spirituality conversations as part of the Home Care & Palliative Care SIG Meeting at the **36th Annual ONS Congress.** April 2011. Boston, MA.

Who are we?

The Center for Hospice, Palliative Care and End-of-Life Studies at USF is an innovative research and education center in that we are an equal partnership between an academic medical center/research one university and community provider agencies. Our approach to research is collaborative – in many cases university researchers approach community agencies as sites to do research and have access to patient populations; in our work at the Center we conceptualize, conduct and disseminate research findings as partners.

The Center partnership includes founding sponsors: USF Health; Suncoast Hospice; & Chapter's Health System, Inc. The sponsor partners: Moffitt Cancer Center; Hope Healthcare Services; and Tidewell.

The Center is a fully integrated partnership between community organizations and USF in terms of governance, financial support, and leadership. Each of the Center's partners is described briefly below, and more information can be found by visiting each organization's website.

Mission Statement:

The mission of the Center is to optimize care and systems of care for patients and families faced with advanced non-curable diseases by generating new knowledge through interdisciplinary research and using that knowledge to educate health and human services professionals, and influence public policy supporting quality end of life care.



Goals:

Long-term

Become nationally known as a center for excellence in research and education in palliative and hospice care and end of life studies.

Research

- ◆ Facilitate research aimed at improving quality of care and systems of care for patients and families facing advanced non-curable diseases.
- ◆ Assist researchers to explore and develop projects that may be pursued through intramural or extramural funding.
- ◆ Link researchers from varied disciplines whose research and teaching would be complemented by working together on important research questions related to palliative care and end of life issues.
- ◆ Seek opportunities to develop and test relevant measurement tools.
- ◆ Develop a uniform data base at multiple sites to foster multicenter trials.
- ◆ To use research results to influence public policy that is supportive of quality health care at the end of life.



Education

- ◆ Participate in research utilization and dissemination through presentations, publications, and classroom teaching.
- ◆ Involve learners at all levels in the activities of the Center as appropriate.
- ◆ Enhance classroom and continuing education programs related to palliative care and end of life issues.
 - ◆ Promote evidence-based practice in the education of students and providers of health care.
- ◆ Provide on-going education for Center Members utilizing strengths and research outcomes of Center Members.



Bruno S.M., *Family caregiving near the end of life.* Georgia Hospice & Palliative Care Organization 2011 Annual Leadership and Clinical Conference. February 2011. Athens, GA.

Bruno S.M., *Improving family satisfaction by meeting the needs of adult daughters.* Florida Hospice & Palliative Care Organization Illuminations Series. February 2011. Tallahassee, FL.

Bruno S.M., *Documenting quality hospice care and assuring compliance.* California Hospice & Palliative Care Association Training Event. March 2011. San Francisco, CA.

Bruno S.M., *Improving family satisfaction by meeting the needs of adult daughters.* National Hospice & Palliative Care Organization 26th Management and Leadership Conference. April 2011. Washington, DC.

Bruno S.M., *Assessing patient/family needs: Initial, comprehensive, bereavement.* National Hospice & Palliative Care Organization Monthly Webinar Series. May 2011. Washington, DC.

Bruno S.M., *Transform Your IDG.* Washington & Oregon Hospice & Palliative Care Organizations Annual Training Event. May 2011. Vancouver, WA.

Bruno S.M., *Prevention of medical errors.* Florida Association of Homes and Services for the Aging Annual Convention. August 2011. Orlando, FL.

Bruno S.M., *Building palliative care services: Beyond traditional hospice.* California Hospice & Palliative Care Association Training Event. August 2011. Pasadena, CA

Bruno S.M., *Building palliative care services: Beyond traditional hospice.* The Carolinas Center for Hospice and End Of Life Care, August 2011. Charlotte, NC.

Bruno S.M., *Improving family satisfaction by meeting the needs of adult daughters.* National Hospice & Home Care Association 30th Annual Meeting & Exposition. October 2011. Las Vegas, NV.

Bruno S.M., *Documenting quality hospice care and assuring compliance.* Hospice Council of West Virginia Annual Training Event. October 2011. Morgantown, WV.



Black, K. *Promoting advance care planning through National Healthcare Decision Day Initiative.* **Gerontological Society of America Annual Meeting.** November 2011. Boston, MA.

Black, K., Dobbs, D., Gregory, S., & Dutton, T. *New realities: Enhancing dignity and independence in the community.* **Gerontological Society on Aging Annual Meeting.** November 2011. Boston, MA.

Black, K., & Gregory, S. *Older adult perspectives on aging with dignity and independence.* **Sarasota Community: Summary of Qualitative Data.** October 2011. Sarasota, FL.

Black, K., & Gregory. *Summary Report: Share your story. Aging with dignity and independence initiative.* October 2011. Sarasota, FL.

Black, K., Dobbs, D., Jackson, M.A., Griffiths, R., Deibert, R., & Malley, P. *Going out in style: A conversation about end of life issues.* Panel presentation. **Pines Education Institute.** October 2011. Sarasota, FL.

Black, K., Dobbs, D., Gregory, S., *New realities: Enhancing dignity and independence in the community.* **Florida Council on Aging Annual Conference.** August 2011. Clearwater, FL.

Black, K., *Planning for care...and more... throughout the end-of-life.* **Free-thinkers Group.** May 2011. Sarasota, FL.

Black, K. *Factors associated with community-based case managers' advance care planning practices.* **International Society of Advance Care Planning and End-of-Life Care Conference.** June 2011. London, UK.

Black, K., Dobbs, D., Gregory, S., *New realities: Enhancing dignity and independence in the community.* **American Society on Aging Annual Meeting.** April 2011. San Francisco, CA.

Black, K., Dutton, T., Schlossberg, N., Carter, R., & Barbetta, J., *Opportunities come with aging.* **Senior Expo.** February 2011. Sarasota, FL.

Black, K. *Planning for care...and more... throughout the end-of-life.* **Institute for Public Policy and Leadership at USF.** February 2011. Sarasota, FL.

Bruno S.M., *Proactive IDT documentation train-the-trainer.* **Texas/New Mexico Hospice Organization Annual Training Event.** January 2011. Austin, TX. January 2011.

Activities:

Research

- ◆ Provide research funds for pilot studies with the potential to improve quality of care and systems of care for patients and families facing advanced non-curable diseases and families experiencing bereavement..
- ◆ Provide research funds for pilot studies with high potential for extramural grant funding in palliative care and end of life issues.
- ◆ Provide funds for doctoral students interested in conducting dissertation research focused on palliative and end of life issues.



Education

- ◆ Provide state of the art educational opportunities for hospice staff, palliative care professionals, students and researchers interested in palliative care and end of life issues.
- ◆ Sponsor lecture series focused on palliative care and end of life issues for faculty, students, hospice and palliative care staff.
- ◆ Increase formal academic course offerings on palliative care and end-of-life issues.
- ◆ Improve communication between faculty members, palliative care professionals, and graduate students interested in palliative care and end of life issues and serve as a forum to assist researchers in exploring and developing studies that may be pursued through intramural or extramural funding.



CONGRATULATIONS!

The Gerontological Society of America Selects 2011 Fellows:

Kathy Black, Ph.D.
& **Debra Dobbs, Ph.D.**
University of South Florida



2011 Top USF Social Work Educator

IRAIDA CARRION, LCSW
Assistant Professor

Dr. Carrion received the National Association of Social Work (NASW) Tampa, Florida Chapter and the NASW Florida State Chapter, Social Work Educator of the Year Awards.



"I consider it an honor to be first a social worker and then a social work educator. The two awards will always remind me of my responsibility to demonstrate passion and commitment to every Social Work student that I will be privileged to meet in the future."



Tidewell's Hospice Chief Executive Officer, Gerry Radford and Chief Medical Officer **Dr. Stephen Leedy** were the guests on "This Is Hospice" - the February 2011 broadcast on Manatee Educational Television.

Arnold, R.L., *Non-cancer diagnosis and the hospice patient.* **Pinellas County Oncology Nurses Society Annual Conference.** April 2011. St. Petersburg, FL.

Arnold, R.L., *Having difficult conversations with patients and families: A physicians guide* **Largo Medical Center.** January 2011. Largo, FL.

Arnold, R.L., *Having difficult conversations with patients and families: A physicians guide.* **St. Petersburg General Hospital.** November 2010. St. Petersburg, FL.

Becker, M., Boaz, T., An del, R. *Improving quality of life and care at the end of life.* Paper presented at the **Society for Social Work and Research Fifteenth Annual Conference.** January 12-16, 2011, Tampa, FL.

Osman, H., & Becker, M. *Advance directives and quality of care at the end of life: Implications for social work.* Paper presented at the **Society for Social Work and Research, Fifteenth Annual Conference.** January 12-16, 2011, Tampa, FL.

Becker, M., & Boaz, T, Gum, A. *Race/Ethnic differences in receipt of evidence-based treatment for depression among Medicaid enrolled adults in Florida.* Paper presented at **The 139th APHA Annual Meeting.** October 30, 2011. Washington, DC.

Becker, M., Boaz, A., An del, T. & DeMuth, A . *The role of age and diagnosis in risk of preventable hospitalization among assisted living residents.* Poster Presented at the **65th GSA Annual Meeting** November 19, 2011. Boston, MA.

Becker, M., Boaz, T., An del, R., & DeMuth, A. *Predictors of avoidable hospitalizations among assisted living residents.* Poster presented at the **Academy Health Annual Research Meeting and Conference,** June 27-29, 2011. Seattle, WA.

Beckwith, S. *Creating viable community partnerships.* **National PACE Association Conference.** October 2011. New Orleans, LA.

Beckwith, S. *Collaborative connections-shaping the future.* **The Innovations Group Conference.** September 2011. Grand Junction, CO.

Beckwith, S. *Collaborative connections: sharing a bond of care.* Presented at the **NHPCO 26th Annual Management and Leadership Conference on Navigating the Sea of Change Conference.** April 2011, National Harbor, MD.



Volicer, L. What is NPI item "Agitation/Aggression" really measuring? *Am J Geriatric Psychiatry* 2011 19(12):1046.

van der Steen J. T; **Volicer L.** Decision-making in patients with severe dementia and pneumonia: cross-national perspectives. *International journal of geriatric psychiatry*; 2011 26(2):216-7.

Volicer L., Frijters D.H., Van der Steen J.T. Relationship between symptoms of depression and agitation in nursing home residents with dementia. *Int J Geriatr Psychiatry*. 2011.

Volicer L. Is your nursing home a battlefield? *J Am Med Dir Assoc*. 2011.

What I most appreciate about the Center meeting is the true sense of collaboration that is present. No matter which discipline or job title, the time and attention given to the work presented is 100%. It is truly a meeting of equal partners devoted to improving end-of-life care and research.

- Catherine McCarthy

I'm glad to be a member of the Center for Hospice, Palliative Care, and EOL studies at USF because it's an invaluable resource. It represents interdisciplinary research, collaboration and insight into issues in long term care and at the end of life.

While at USF completing my Master's program in Bioethics and Medical Humanities in fall 2006, I attended a conference sponsored by the Center. I knew nothing about end-of-life care, and figured that attending this conference would be a good way to immerse myself in the unknown. The conference was conveniently held in Tampa: Building Bridges: Interdisciplinary Paths to Palliative & End-of-Life Care for People with Diverse Conditions (Cancer, Dementia, and Heart Disease). What started out as a simple independent study turned out to be a life-changing experience. I was amazed at the diverse topics covered at this meeting, and was particularly moved to hear Dr. Ladislav Volicer present his talk "Palliative Care for Persons with Dementia." It was as if I was the only person in the room, and he was speaking directly to me! I wanted very much to study under this distinguished researcher, and perhaps improve quality of life for individuals with dementia. I left the conference awakened to possibilities and with an incredible sense of purpose.

With my medical ethics background, I was encouraged to see the interdisciplinary collaboration at the conference and the environment fostered by the Center, and wanted this to be part of my professional future. I applied to the School of Aging Studies, and am now a first year PhD student. Dr. Volicer and Dr. Kathryn Hyer are my co-mentors, and it is an honor to be working with and learning from them.

-Liz Vongxaiburana

The Center provides an excellent "real time" opportunity to network with agency providers and academic researchers in the field of hospice, palliative care, aging and end-of-life studies. I am able to consult with fellow researchers and providers-obtaining conceptual and methodological critiques of research designs and project proposals at the earliest stages of development. I am also able to help others conceptualize and design their research.

- Joe Polubinski,

From a student perspective, the format of the meetings is inviting. The atmosphere is not a critical fault finding one, which is refreshing for students. The presentations and discussions are really great for learning the process of research and takes some of the mystery out of the process. This is the greatest benefit of going to the meetings-being able to learn from experienced researchers, educators and providers and see the struggles they go through to provide even better care. The level of collegiality is just fabulous and the pieces of the health care team represented is priceless to witness true respect and caring for each other and their projects. The open discussion, opportunities, and playing field seems to be very open to all participants and not segregated to "the doctors", "the nurses", "the chaplain", "the social workers"-which is so valuable. This is a remarkable group of people to learn from and I hope as my education progresses, I'll be able to add a small part to the mission, goals and vision of the organization.

-Toni Dobson

Allen, J.Y., Haley, W.E., Small, B.J., & McMillan, S.C. *Bereavement among hospice caregivers one year following loss: Predictors of grief, complicated grief, and depressive symptoms.* **64th Annual Scientific Meeting of the Gerontological Society of America.** November, 2011. Boston, MA.

Arnold, R.L., *Identifying, developing, and evaluating staff: Interdisciplinary team competences.* **National Association of Practical Nurse Education Services Annual Conference.** October 2011. Largo, FL.

Arnold, R.L., *Navigating cancer care.* **Pinellas County Oncology Nurses Society Annual Conference.** September 2011. St. Petersburg, FL.

Arnold, R.L., *Alzheimer's disease: New understandings and compassionate care.* **Florida Health Care Social Workers Association: Future Trends in Long Term Care.** August 2011. Largo, FL.

Arnold, R.L., *Demonstrating your professional value in difficult economic times: Using data and more.* **Largo Medical Center.** June 2011. Largo, FL.

Arnold, R.L., *When is the right time for hospice care.* **Largo Medical Center.** June 2011. Largo, FL.

Arnold, R.L., *Non-cancer diagnosis and the hospice patient.* **St. Petersburg General Hospital.** May 2011. St. Petersburg, FL.



The University of South Florida created USF Health as an enterprise dedicated to making life better by improving health in the wider environment, in communities, and for individuals. USF Health has, at its core, the three colleges of Public Health, Nursing and Medicine, which includes a School of Physical Therapy and the USF Physicians Group. Originally founded as the USF Medical Center in 1965, its name has been changed to USF Health to reflect its collaborative focus on the full continuum of health. Tampa Bay has been enriched by the health professionals who have graduated from USF, and from the patient care and outreach programs of its health colleges.

College of Medicine

The College of Medicine was established by the Florida Legislature in 1965, and enrolled its charter class in 1971. The College awards doctorates in Medicine (MD) and Medical Sciences (PhD) and is fully accredited by the Liaison Committee for Medical Education. The School of Physical Therapy was established in 1998, and offers a Doctorate in Physical Therapy (DPT). The College of Medicine's presence has generated a network of highly specialized teaching hospitals, including the James A. Haley Veterans' Hospital, H. Lee Moffitt Cancer Center & Research Institute, Shriners Hospitals for Children, and specialty units at All Children's Hospital and Tampa General Hospital. The USF Physicians Group, the college's multispecialty group practice, includes nearly 400 physicians and 70 nurse practitioners who see patients throughout the Bay area. College faculty also run interdisciplinary research programs on brain disease and repair, such as Alzheimer's and Parkinson's diseases, and stroke; palliative care and end-of-life studies; cardiovascular disease; children's health; patient safety; cell therapy; infectious diseases; and biodefense.

The College of Nursing

The College of Nursing was founded in 1973, and conducts research and offers bachelor's, master's and doctoral degrees in nursing. The college forged a clinical collaborative with Tampa Bay's leading health care providers to offer students "home-base" hospitals with one-to-one mentoring for state-of-the-practice education.

USF nurses provide care for Floridians from school age to old age through programs such as preschool vision screenings and the Elder Health Center, a nurse-directed clinic for seniors.

Orloff, S. Pediatric Hospice and Palliative Care: The invaluable role of social work. In Altilio, T. & Otis-Green, S. (Eds). *Oxford textbook of palliative social work*. 2011. Oxford University Press. New York, NY.

Hain, R., Zeltzer, L., Hellsten M. Cohn, S.O., **Orloff, S.F.**, Gray, D. Holistic symptom management. *Palliative Care for Infants, Children, and Adolescents: A Practical Handbook, 2nd edition*. Brian S. Carter and Marcia Levetown, editors. 2011. The Johns Hopkins University Press, Baltimore, MD.

Orloff, S.F., Toce, S.S., Sumner, L., Grimes, L.A. Bereavement needs. *Palliative Care for Infants, Children, and Adolescents: A Practical Handbook, 2nd edition*. Brian S. Carter and Marcia Levetown, editors. 2011. The Johns Hopkins University Press, Baltimore, MD.

Huff, S.M., **Orloff, S.F.**, Wheeler, J., Grimes, L.A. Palliative care in the home, school, and community. *Palliative Care for Infants, Children, and Adolescents: A Practical Handbook, 2nd edition*. Brian S. Carter and Marcia Levetown, editors. 2011. The Johns Hopkins University Press, Baltimore, MD.

Umoren I.E., Fils J.M., **Stewart J.T.** Frontotemporal dementia—A chameleon? *Prim Care Companion J Clin Psychiatry* 2011 13(2):e1.

Fils J.M., **Stewart J.T.** A case of Capgras syndrome related to left hemispheric injury. *J Neuropsychiatry*. 2011 23(3):e6.

Stewart J.T., Poetter C.E. Treatment of taunting behavior in vascular dementia with valproic acid. *J Am Geriatr Soc*. 2011 59:929-930.

Poetter C.E, **Stewart J.T.** Treatment of indiscriminate, inappropriate sexual behavior in frontotemporal dementia with carbamazepine. *J Clin Psychopharmacol*. 2011 32:137-138.

Stewart J.T. Successful reintroduction of valproic acid after the occurrence of pancytopenia. *Am J Geriatr Pharmacotherapy*. 2011 9:351-353.

Tolson D., Rolland Y., Andrieu S., Aquino J.P., Beard J., Benetos A., Berrut G., Coll-Planas L., Dong B., Forette F., Franco A., Franzoni S., Salva A., Swagerty D., Trabucchi M., Vellas B., **Volicer L.**, Morley J.E. International Association of Gerontology and Geriatrics: a global agenda for clinical research and quality of care in nursing homes. *J Am Med Dir Assoc*. 2011 12: 184-189.

Rolland Y, Aquino J-P, Andrieu S, Beard J, Benetos A, Berrut G, Coll-Planas L, Dartigues J-F, Dong BR, Forette F, Franco A, Franzoni S, Hornez T, Metais P, Ruault G, Stephan E, Swagerty D, Tolson D, **Volicer L.**, Vellas B, Morley J. Identification of main domains for quality of care and clinical research in nursing homes. *Journal of Nutrition Health and Aging* 2011 15:410-424.



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Nursing faculty and students care for patients in more than 100 cooperating health care agencies in USF's 15-county service area. The College aspires to be in the top 20 for federal research funding, and supports research teams focused on palliative and end-of-life care, cardiac rehabilitation, and complementary therapies for chronic illnesses and cancer.

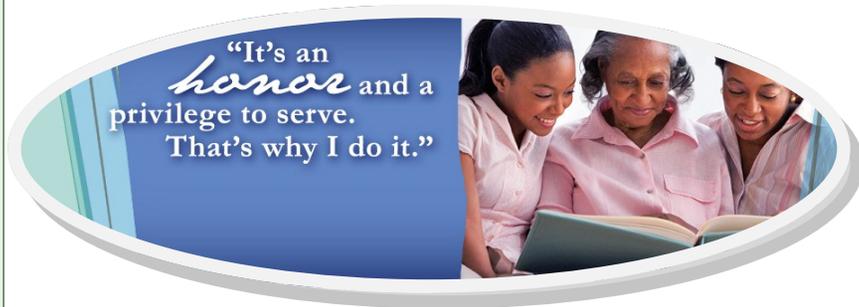
College of Public Health

The USF College of Public Health (<http://health.usf.edu/publichealth/homepage.html>) was created by the Florida legislature 25 years ago to provide leadership for the Florida public health system through the development of academic programs and by serving as a resource for Florida public health officials. Since that time, the College has awarded graduate degrees and certificates to over 3,000 public health professionals and nearly 300 undergraduates have taken advantage of a new public health minor. Over its first 25 years, the faculty have generated over \$275 million in external funding for research and supporters and friends have built an endowment of over \$13 million. College faculty conduct research around the major public health challenges of its time and engage in active community-based research and service learning in the true spirit of public health – recognizing that it is not only through discovery and learning but through the direct translation and application of that knowledge to policies and programs that we succeed in improving the public's health. Today they are recognized leaders in distance learning, in social marketing, in maternal and child health and in global infectious disease research.

About USF Health

USF Health (www.health.usf.edu) is dedicated to creating a model of health care based on understanding the full spectrum of health. With more than \$380.4 million in research grants and contracts last year, the University of South Florida is one of the nation's top 63 public research universities and one of only 25 public research universities nationwide with very high research activity that is designated as community-engaged by the Carnegie Foundation for the Advancement of Teaching.





Chapters Health System, Inc. (CHS) is a not-for-profit, community-based, post-acute health care system. It provides a wide range of patient-centered health care services and programs that include hospice, palliative care, Programs of All-Inclusive Care for the Elderly (PACE), Nursing Home Diversion, Partners in Care (PIC) and Transitions. CHS is a parent company incorporating six subsidiaries and programs: LifePath Hospice; Good Shepherd Hospice; Chapters Senior Independence; Chapters Health Palliative Care, LLC, Chapters Health Pharmacy, LLC; and Chapters Health Staffing, LLC. The mission of CHS is to: “support and care for people in our community with or affected by advanced illness by offering a wide variety of compassionate healthcare options.” At CHS, hospice services are available for patients who have been diagnosed to be in the last 12 months of a life-limiting illness. CHS provides patient-centered and value based clinical programs that offer the right care in the right setting at the right time along a patient’s illness trajectory from which a patient/family may choose.

LifePath Hospice and Good Shepherd Hospice are accredited by The Joint Commission and they continue to be a leader in program development and innovation in palliative care in order to enhance the quality of life for all patients. During 2011, CHS had 1,099 full time, 39 part time employees, and 224 “as needed pool” employees, as well as 1,624 volunteers. During the same calendar year, LifePath Hospice and Good Shepherd Hospice served 10,191 patients and admitted 9,095 new patients. The hospices’ average daily census in 2011 was 1,973 patients. The mean and median lengths of stay were 77 and 16 days, respectively. During 2011, 1,817 physicians referred patients to LifePath Hospice and Good Shepherd Hospices while 239 nursing homes and assisted living facilities partnered with them.

LifePath Hospice and Good Shepherd Hospice have 5 acute inpatient units/facilities located in Temple Terrace (24 beds), Sun City Center (24 beds), Lakeland (7 beds), and Auburndale (12 beds), and Sebring (16 beds) totaling 83 beds serving four counties. These units served 3,228 patients in 2011. Good Shepherd Hospice opened its Somers Hospice House in Sebring in early 2011 to fill a need in that community, serving 355 patients in its first year.

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In addition to home and facility based hospice care, Chapters Health Palliative Care, LLC has provided hospital-based palliative care consult services in partnerships with four community-based hospitals in the service areas (St. Joseph’s Hospital, St. Joseph’s North, Florida Hospital Tampa, and Winter Haven Hospital) and served 1,147 patients in 2011. Chapters Health Palliative Care, LLC also serves patients in community nursing homes as well. It served 21 patients via a pediatric palliative care program in partnership with the staff at St. Joseph’s Children’s Hospital in Tampa.

In 2011, CHS developed the following two new programs: Program of All-Inclusive Care for the Elderly (PACE) in Hillsborough County and Nursing Home Diversion (NHD) program in Hillsborough, Polk, Highland, and Hardee Counties. The goal of PACE is to oversee participants’ medical care and help



those who would be eligible for nursing home care remain in their homes. In 2011, PACE opened its programs including its adult day center, which is located in Tampa. PACE services include physician and nursing services, personal care, supportive services, medications and medical equipment. The PACE program is funded via Medicare/Medicaid, private insurances or by private funds, and involves utilization of an Adult Day Care Center. The NHD pro-

gram is a case management model and will oversee services assisting the elderly who also qualify for nursing home placement to remain in the community as long as possible. Some additional services provided through the NHD program are meals, caregiving, chores, and home health care.

In 2011, LifePath Hospice, in cooperation with The University of South Florida College of Medicine, Tampa General Hospital, the H. Lee Moffitt Cancer Center, the James A. Haley Veterans Hospital, and the Bay Pines Veterans Hospital, continued sponsoring a physician fellowship program, which began in 2007. The one-year program is made available to physicians who opt to have subspecialty hospice and palliative medicine training as sanctioned by the American Board of Medical Specialties in 2006. In 2011, six physician fellows were trained at LifePath Hospice. Through our Medical Student Rotation Program, 108 third-year and four fourth-year students of the USF School of Medicine also rotated at LifePath Hospice.



<http://www.chaptershealth.org>





For 35 years Suncoast Hospice has been Pinellas County's community-based nonprofit hospice. We are committed to serving individuals of all ages

living with chronic and/or terminal illnesses, nearing the end of life or experiencing grief.

Hospice Care

From the moment of diagnosis, we are here to help. Patient concerns and preferences guide our care and options. Care is available to everyone regardless of diagnosis. Suncoast Hospice care includes:

Hospice Care Teams – skilled professionals and volunteers based on patient needs including physicians, nurses, medical equipment technicians, pharmacists, licensed counselors, chaplains and more.

Integrative Medicine - a type of patient-centered care that focuses on comforting the patient, mind, body and spirit.

Suncoast Hospice Houses – three Suncoast Hospice Houses provide warm and caring environments with around-the-clock care for patients and support for visiting family members and friends. Locations are in Palm Harbor, Pinellas Park and inside Bayfront Medical Center in downtown St. Petersburg.

Palliative Care

Palliative care is provided to people living with serious illnesses to relieve pain and other symptoms and improve comfort and quality of life. Palliative Care services include:

Pain & Symptom Management – A specialized team of professionals that help ease physical, emotional and spiritual pain. This care is offered in patients' homes, hospitals, nursing homes or hospice houses.

Home Care - specifically designed for patients of any age who are living with a serious illness or injury and have complex care needs but wish to remain at home.

Psycho-Sociocultural Factors Influencing Cancer Pain Management in Elderly Adults.

Principal Investigator: Tamara Baker, PhD

Primary Mentor: **William Haley, PhD** Date: 2009-2014

\$665,853 National Cancer Institute (1K01CA131722)

Managing Medication-induced Constipation in Cancer: A Clinical Trial.

Principal Investigator: **Susan McMillan, PhD, ARNP, FAAN** Date: 2009-2013

National Institute for Nursing Research, (R01 NR01075101A1), \$2.5 million.

Pilot of an Intervention for Caregivers of Hospice Heart Failure Patients.

Principal Investigator: **Susan McMillan, PhD, ARNP, FAAN**

Collaborator: **William Haley, PhD** Date: 2009-2011

National Institute for Nursing Research, 1R21 NR011224-01A1, \$385,000.

Family Evaluation of Hospice Care.

Principal Investigator: Joan M. Teno, MD, MS

Collaborator: **Betty Oldanie, BSN, MS**

9/30/2010 – 7/31/2013

Brown University, \$1,114,663

The art vs. science of predicting prognosis: Does a prognostic index predict short-term mortality better than experienced nurses do?

Principal Investigator: David Casarett, MD, MA

Collaborator: **Betty Oldanie, BSN, MS**

Center for Bioethics and the Leonard Davis Institute of Health Economics at the University of Pennsylvania School of Medicine

Computerized Decision-Support System for Forecasting Life-Expectancy among Hospice Patients, Study Sponsor is the US Dept of Defense. Phase II of the study began in October 2011.

Principal and Co-Investigator(s) are: Benjamin Djulbegovic, MD, Ph.D and Raul Mhaskar, MD at College of Medicine USF; **Ron Schonwetter, MD**; and **Sehwan Kim, Ph.D.** A joint project of CHS and USF College of Medicine, and Tampa General.

Subcutaneous MNTX (Methylnaltrexone) for Treating Opioid-Induced Constipation. sponsored by Salix Pharmaceuticals.

Principal Investigator is **Ronald Schonwetter, MD.**



Enhancing Dignity and Independence in Aging

Role: Principal Investigator: **Kathy Black**. Date: 6/1/10 – 5/31/11

Amount: \$197,500 Sub-contract amount: \$131,566

Funded by The Patterson Foundation and SCOPE.

Sarasota Caregivers Accessing Resources & Essential Services (CARES)

Role: Evaluator: **Kathy Black**. Date: 5/1/09 – 4/30/12

Amount: \$900,000 Sub-contract amount: \$45,000

Funded by the Harry and Jeanette Weinberg Foundation and Jewish Family & Children's Service of Sarasota-Manatee, Inc.

Autonomy in Assisted Living: A Cultural Analysis

Role: Consultant: **Debra Dobbs, Ph.D.** Date: 09/01/10 - 08/31/14

Co-Principal Investigators: Bob Rubinstein, and Ann Christine Frankowski, (University Maryland Baltimore Co.)(NIA Grant No. 1R01AG032442-01A2):

Promoting Dignity and Independence in Aging by Linking Individual Voice, Community Engagement, and Technological Innovation

(Patterson Foundation) Date: 07/01/10 - 06/30/11.

Principal Investigator: **Debra Dobbs, Ph.D.**

(Subcontract from **Kathy Black**, USF Sarasota)

Social Relationships of Minority Residents in Assisted Living

(USF Internal Award – Park, PI) Date: 07/01/10—06/30/11

Role: Consultant: **Debra Dobbs, Ph.D.**

Psychosocial Impact of Stroke on Family Caregivers

Principal Investigator: David Roth, PhD (UAB)

Collaborator: **William Haley, Ph.D.** Date: 2005-2012

\$1,825,875 (subcontract \$333,172)

National Institute of Neurological Disorders and Stroke

(1 R01 NS 45789-01A1)

Education and Information Core. (Part of an Alzheimer's Disease Research Center Grant)

Center PI: Huntington Potter

Core PI: **William Haley, Ph.D.** Date: 2005-2011 \$504,528

National Institute on Aging (1P50AG025711)

Integrative Medicine Home Care**Children & Families**

Suncoast Hospice assists children and teens dealing with serious illnesses and provides grief and healing support for children who have experienced loss and for families for have lost a child. Children and family services include:

- ◆ **Children's hospice & palliative care**
- ◆ **Infant and prenatal loss support**
- ◆ **Bereavement retreats and camps**
- ◆ **Crisis and trauma support**

Grief & Healing

Grief and healing support services are available to everyone in our community, regardless of whether they or a family member received hospice care. Grief support comes in many forms including:

- ◆ **Support groups**
- ◆ **One-on-one counseling**
- ◆ **Caregiver support**
- ◆ **Grief support in the workplace**
- ◆ **Sudden death or trauma**
- ◆ **Specialized counseling for children and/or families**
- ◆ **Community memorial services**

Suncoast PACE

Program of All-Inclusive Care for the Elderly (PACE) is a Medicare/Medicaid program helping those 55+ remain independent. Services include:

- ◆ **Case management**
- ◆ **Medical services & supplies**
- ◆ **Transportation & Social programs**
- ◆ **Wellness activities**
- ◆ **Medicines**

<http://www.Thehospice.org/>





WWW.MOFFITT.ORG

Moffitt Cancer Center & Research Institute began its research efforts in 1993 and by 1998 achieved National Cancer Institute (NCI) designation. In 2011, the NCI renewed Moffitt's Comprehensive Cancer Center status for another five years. Today, research at Moffitt includes more than 135 investigators organized around six scientific programs, all with an emphasis on translation. Among the factors and accomplishments over the past five years that the NCI cited were:

- Doubling of overall research funding at Moffitt
- A 130-percent increase in new patients referred to Moffitt
- Development of early-phase Moffitt investigator-initiated studies
- An increase in accrual to therapeutic phase I, I/II and II clinical trials

The NCI also highlighted several of Moffitt's strengths, including the expansion of basic research, especially in the areas of cancer prevention and control; the growth and maturation of translational and clinical research, active collaboration between bench and clinical scientists; and careful recruitment of basic scientists in molecular and cancer genetics.

Mission

The mission of Moffitt Cancer Center is to contribute to the prevention and cure of cancer.

Vision

Moffitt's vision is "to be the leader in scientific discovery and translation into compassionate care, cures, and prevention of cancer for our community and the world. As it grows to fulfill its mission, the Cancer Center will continue to be distinguished by its compassionate and effective patient care.

Institutional Values

- ◇ Scientific, educational, and patient care excellence
- ◇ Unity in pursuit of our mission
- ◇ Creativity
- ◇ Compassion for our patients and their families
- ◇ Employees, volunteers, and faculty are our most prized resources
- ◇ Stewardship
- ◇ Social responsibility and ethics of the highest standard

COMMUNITY PARTNERS

The Center is governed by an Executive Committee representing interdisciplinary community providers and university faculty from various disciplines that represent the continuum of care utilized in hospice and palliative care.

ACADEMIC PARTNERS

Howard Tuch, MD, MS
Center Academic Director
Div of Geriatrics, College of Medicine
University of South Florida

Iraida Carrion, PhD, MSW, LCSW
School of Social Work
University of South Florida

William Haley, PhD
School of Aging Studies
University of South Florida

Susan McMillan, PhD, ARNP, FAAN
College of Nursing
University of South Florida

Hana Osman, PhD
College of Public Health
University of South Florida

Lori A. Roscoe, PhD
College of Arts and Science
University of South Florida

Robert Walker, MD
Division of Medical Ethics, Humanities
and Palliative Care, College of Medicine
University of South Florida

Staff:
Lourdes Rodriguez, BBAM
Center Coordinator
University of South Florida

COMMUNITY PARTNERS

Ronald Schonwetter, MD, FACP,
FAAHPM
Center Community Director
Chapters Health System

Samira Beckwith, MSW, FACHE
Hope Healthcare Service

Kristine Donovan, PhD
Moffitt Cancer Center & Research
Institute

Stephen Leedy, MD
Tidewell Hospice

Sehwan Kim, PhD
Chapters Health System

Stacy Orloff, Ed.D., LCSW
Suncoast Hospice

Robert Arnold, Ph.D.
Suncoast Hospice

EXECUTIVE COMMITTEE



Date	SPEAKER/TOPIC
January 12, 2011	Lori Roscoe, Ph.D. , <i>Assistant Professor, Department of Communications, USF.</i> “Head and Neck Cancer Patients' Communication with their Physicians About End-of-Life Issues”
February 9, 2011	Debra Dobbs, Ph.D. , <i>Assistant Professor, College of Behavioral and Community Sciences School of Aging Studies.</i> “Five Year Later: Hurricane Katrina's Effect on Palliative and Hospice Care”
March 9, 2011	Jonathan Stewart, MD <i>Staff Geropsychiatrist, James A. Haley VA Hospital and Professor in Psychiatry and Geriatric Medicine</i> “Psychiatric Care at the End of Life”
April 13, 2011	Joyce Simard, MSW Namaste Care: “Palliative Program for Advanced Dementia and Other Terminal Patients.”
June 8, 2011	Kathryn Frahm, Ph.D. <i>Visiting Research Assistant Professor, School of Aging Studies, USF.</i> “Race and Advance Care Planning and Hospice Utilization Among Nursing Home Residents”
July 13, 2011	William E. Haley, PhD. <i>Professor, School of Aging Studies, USF.</i> “Impact of Family Caregiving on Quality of Life, Health and Mortality.”
September 14, 2011	Kathryn Hyer, PhD, MPP , <i>Associate Professor, School of Aging Studies and Director, Florida Policy Exchange Center on Aging.</i> “Hurricanes and Disaster Research with Nursing Home Resident Data”
October 12, 2011	Tracy Christner , <i>Executive Director, Project GRACE</i> “POLST-Physician Orders for Life Sustaining Treatments”
November 9, 2011	Howard Tuch, MD , <i>Assistant Professor & Academic Director, Department of Internal Medicine, USF.</i> “Community Oriented Palliative Care”
December 14, 2011	Iraida Carrion, Ph.D. LCSW , <i>Assistant Professor, USF School of Social Work</i> “Healthcare Decision Preferences Among Colombian, Mexican & Puerto Rican Women with a Cancer Diagnosis Living in the USA.”

The Hope Mission

To provide exceptional care and support to every individual and their loved ones as they fulfill life's journey.



Hope Hospice

Hardee, Hendry, Highlands, Glades, Lee and Polk Counties

End-of-life care, comfort and support for patients and their families.

Home care, inpatient care; medical care; expressive therapies, integrative therapies

Hope Healing Hearts

Charlotte, Collier, Hardee, Hendry, Highlands, Lee, Glades and Polk Counties

Counseling and support for those who have experienced the loss of a loved one.

Individual & group counseling; crisis response, grief counseling

Hope Select Care

A PACE Program

Lee County

Program of All-Inclusive Care for the Elderly, (PACE) A Medicare/Medicaid program enabling ages 55 and older to maintain independent living.

Medical services and supplies; medicines, case management; transportation; social programs; wellness activities

Hope Parkinson Program

Lee County

Services and activities for people living with Parkinson Disease and their caregiver, to help experience a fullness of life.

Movement and exercise class; educational programs; social programs

Hope Connections

Glades and Hendry Counties

Home-based independent living alternatives for ages 60 and older.

Meals; personal care; homemaker services; transportation.

Hope Choices

Charlotte, Collier, Desoto, Hendry and Lee Counties

A long-term, at home care provided by Medicaid and The Department of Elder Affairs for ages 65 and older, whose goal is to remain in their home.

Case management; meals; transportation; adult day health; occupational, physical and/or speech therapy; home chore services.

Hope Kids Care

Hardee, Hendry, Highlands, Glades, Lee and Polk Counties

Help for children coping with grief or a serious illness-their own or a loved one's.

Pediatric Hospice Care
Partners in Care
Grief Support and Counseling

Hope Comfort Care

Charlotte, Collier and Lee Counties

Symptom management and counseling for people of all ages with a serious illness

"Hope's staff and volunteers serve a large portion of the state of Florida, caring for many people in many special ways. However, our love and commitment is focused on each individual. We are dedicated to meeting the specific needs of each person."

- Samira K. Beckwith, Hope President and CEO

WWW.HOPEHCS.ORG



Founded in 1980, Tidewell now cares for more than 8,000 patients and their families annually in Sarasota, Manatee, Charlotte and DeSoto counties. It has grown significantly in the past three decades. Although hospice is often misunderstood as an alternative just for cancer patients, Tidewell admits patients with a broad range of diagnoses, including heart and lung disease, AIDS, renal failure, ALS and end-stage Alzheimer's. Any illness with a predictable prognosis of one year or less is within Tidewell's admission criteria.

Tidewell has always been a not-for-profit hospice. Home-based palliative care is the basic premise of the program, managed by care teams of end-of-life care specialists, including physicians, registered nurses, social service counselors, certified nursing assistants, chaplains, grief specialists and volunteer – all following a prescribed plan of care. Tidewell's services are available to everyone, regardless of ability to pay.

Hospice patients' greatest hopes are to be pain-free and to have distressing symptoms managed. Early on, hospice learned that quality of life revolves around these two factors, and only when they are controlled can people reach beyond to the comforts and therapeutic healing of mind and spirit.

In choosing Tidewell, patients and families make a decision to spend their last months together in a familiar, caring environment. Tidewell's supportive services create a sense of relief, as trained professionals offer care and guidance. They are experts in pain and symptom control. Decisions are made based on the individualized needs of patients, with the realization that something more can always be done to bring comfort and dignity to those living with

Our mission is helping people live well by providing care, comfort and compassion.

advanced illness.

Rather than a place, hospice is a philosophy - a program of care and support wherever patients need us. Tidewell's services extend to any location - a private residence, hospital, assisted living facility, nursing home or any of our seven hospice houses.

Tidewell is committed to offering programs and services that support the ebb and flow of life as a normal part of life's journey. Tidewell care teams are committed to providing compassionate care and support that optimizes comfort for patients and their families, regardless of culture, age, gender, creed or financial circumstances. It is part of Tidewell's mission to care for all in the community who want hospice and palliative care, regardless of ability to pay.

Tidewell's services include:

- Pain control; Symptom management
- Personal care; Respite; Emotional support
- Spiritual support; Pharmacy;
- Home medical equipment; 24-hour on-call;
- Children's Services; Grief support

Tidewell's care teams are specialists in pain control and symptom management. Care plans are developed for each individual, with patient preferences and continuity of care always at the forefront. Decisions are made based on individualized needs, with the realization that something more can always be done to bring comfort and dignity to those living with advanced illness. Rather than a place, hospice is a philosophy — a program of care and support when and where it is needed most.

www.tidewell.org

The Center's **Research Committee** is chaired by **Lora Thompson, PhD, Clinical Psychologist** at the Moffitt Cancer Center & Research Institute.



completion of advance directives and advance care planning among White, Black, Hispanic, and Asian nursing home residents at the end of life.

Research Committee members include:

- **Kathryn Hyer, PhD**, School of Aging Studies at USF
- **Shwan Kim, PhD**, Chapters Health System
- **Lori Roscoe, PhD**, Department of Communication, USF
- **Ladislav Volicer, MD, PhD**, School of Aging Studies, USF
- **Kristine Donovan, PhD**, Clinical Psychologist, Moffitt Cancer Center

The Research Committee reviews and makes recommendations to the Executive Committee about applications submitted to the Center for Pilot Research Grant funding and for the Graduate Research Assistantship.

2010-11 Pilot Project

Kathryn Frahm, Ph.D.
Title of her proposal: *“Race and Advance Care Planning, Hospice Utilization, and Comfort Care Services among Nursing Home Residents at the End of Life.”*

The proposed research has one of the first studies to specifically investigate the concurrent relationship between race and advance care planning, hospice utilization, and receipt of comfort care services for nursing home residents at the end of life.

Amount Awarded: \$10,000

Objectives include:

Objective 1) Examine the differences in

Objective 2) Examine the differences in hospice enrollment among White, Black, Hispanic, and Asian nursing home residents at the end of life.

Objective 3) Examine the differences in the experience of specific health outcomes White, Black, Hispanic, and Asian nursing home residents receiving comfort care services at the end of life.

ANTICIPATED BENEFITS:

Study outcomes provided valuable data and enhance knowledge of racial disparities in hospice use, advance care planning, and treatment and comfort care preferences among nursing home residents at the end-of-life.

2011 Graduate Assistant Recipient

Abdel Rahman E. Alkhalouf, PhD
Student in Nursing
Title of his proposal: *“Professional Quality of Life and Compassion Fatigue: A Hospice Team Intervention Study.”*

The goal of this project is to determine the prevalence of compassion fatigue among interdisciplinary team (IDT) members employed at a large not-for-profit, free standing hospice. It will also evaluate the effect of testing an intervention for compassion fatigue on professional hospice workers.

Amount Awarded: \$25,000

