OUTLINE

Establishing Whole Person Care

Formal assessments to identify physical and emotional stressors

How to ask "What do you think is wrong"

The client who considers their problem only medical and isn't open to behavioral interventions

Setting a collaborative agenda Addressing quality of life concerns

Psychological Distress in the Medically Ill

Distress

Manifestations in medical populations

Distress screening tools

Balance efficiency with depth

Identify changing feelings related to disease progression

Depression

Is it really "expected" after diagnosis of an illness?

What to do when symptoms of disease overlap with signs of depression

Measuring depression

Cognitive-Behavioral Therapy interventions

Creating balance with ACT

Establish an integrated approach

Anxiety

Forms of anxiety that are particularly prevalent in medical illness

Assessment measures

Interventions when anxiety threatens tolerance for treatment

Specific mindfulness and relaxation therapy exercises and scripts

CBT tools to address worry and illness related anxiety

Grief

Strategies to address: "I'm not the same physically and emotionally..."

Tools for releasing negative and obsessive thinking

Working with the emotions and turmoil of Anticipatory Grief

Behavioral Interventions for Physical Symptom Management

Addressing physical issues

Motivational interviewing to help the client process lifestyle changes

Self-management skill development

Strategies to minimize symptoms

Help the client determine the what and how of symptom relief

Addressing pain with ACT

Exercise recommendations for fatigue Increase the likelihood of adherence

CBT for insomnia

Mindfulness techniques for nausea

The clinicians "tool box" for symptom management

Ensure a wide array of options Determine the next step

End of Life Considerations

Quality vs. quantity of life

Assessing patient preferences

The difference between supportive, palliative, and hospice care

Managing family disagreements related to treatment options

What about family dysfunction...

Decision to withhold or withdraw care

Communication Issues

With clients

Client-centered communication

Breaking bad news with the SPIKES protocol

With healthcare professionals

confidentiality

Efficient but effective interprofessional communication with the SBAR method Sharing information without breaking

Family Caregivers

Challenges

Sociodemographic changes & changes in medical care that make caregiving even more challenging

Impact of the family caregiving on the caregiver's health

Caregiver psychological issues

Prevalence of depression and anxiety in caregivers

Relationship with client's distress

Financial toxicity

Limitations of the research and potential risks

Questions?
Call customer service at 800-844-8260

OBJECTIVES

- 1. Determine the psychological challenges for the medically ill and their family caregivers.
- 2. Choose psychological/behavioral interventions to address psychological distress and distressing symptoms.
- 3. Point out challenges in communication with different disciplines.
- 4. Specify the differences between supportive care, palliative care and hospice care.
- Utilize mindfulness-based strategies, ACT and CBT tools to decrease symptoms of pain, nausea, fatigue and insomnia.
- 6. Assess the psychological, social and behavioral factors that contribute to chronic illness and articulate their treatment implications.





J. Box 1000 nu Claire, WI 54702-1000 division of PESI, Inc.

BEHAVIORAL TREATMENT INTERVENTIONS FOR CLIENTS COPING WITH MEDICAL ILLNESS

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BEHAVIORAL TREATMENT INTERVENTIONS FOR CLIENTS COPING WITH MEDICAL ILLNESS

- Strategies to assess for depression and anxiety in the context of illness
- Clear techniques for communicating with the medical team without breaking confidentiality
- Innovative mindfulness, ACT & CBT-based strategies for symptom management
- Guidelines for discussion of end of life decisions and grief
- Practical, evidence-based approaches to address the family caregivers' needs and concerns

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Teresa Deshields, Ph.D., ABPP, knows first-hand how difficult it can be to navigate these challenges – she knows that treating these vulnerable individuals is serious work that demands a thoughtful, organized, and dedicated approach. Join her as she shares 20 years of experience treating clients with chronic illness in this compelling, practical seminar. You'll learn specific strategies to:

- Address the psychosocial needs of clients coping with physical illness
- Assess for co-morbidity between mental health and physical conditions
- Motivate clients to undergo lifestyle changes to benefit their health
- Teach clients mindfulness techniques to cope with physical pain
- Process ever-changing thoughts and feelings related to illness
- Provide advocacy for your clients among their medical team

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SPEAKER

Teresa L. Deshields, Ph.D., ABPP, is a licensed clinical psychologist and clinical associate professor in the departments of medicine and psychiatry at Washington University School of Medicine in St. Louis. She is a Fellow of the American Psychosocial Oncology Society and its past-president. She was the manager of the Siteman Counseling Service for the Alvin J. Siteman Cancer Center at Barnes-Jewish Hospital for 20 years. Her clinical practice is devoted to treating cancer patients and survivors and their family members, throughout the cancer continuum – diagnosis, treatment, survivorship, end of life, and grief. Her research is focused on issues related to psychological adjustment and quality of life in cancer patients and survivors.

Speaker Disclosures:

Financial: Teresa Deshields is a clinical associate professor at Washington University School of Medicine. She receives a speaking honorarium from PESI. Inc.

Non-financial: Teresa Deshields is a member of the American Psychological Association.

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8:00 Program begins

11:50-1:00 Lunch (on your own)

4:00 Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon). Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request

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