

July 18, 2016

Dear Dr. Victor M. Sandler & Dr. Thaddeus M. Pope:

We compiled completed evaluations from the **2016 Minnesota Network of Hospice & Palliative Care Annual Conference**. The following is an evaluation summary of your presentation. The means are based on a scale of Poor (1) - Excellent (5).

Session: Ethics of End of Life: Dementia and VSED

Evaluations:

Subject Knowledge Mean	4.60
Effectiveness of Presenters Mean	4.49
Interaction with Participants Mean	4.43
Quality of relevant information	4.51
Quantity of relevant information	4.47
Organization of material	4.44
Objective 1	4.49
Objective 2	4.49
Objective 3	4.35

Comments:

- Excellent/Great presenters and presentation
 - o Both presenters were extremely knowledgeable and engaging.
 - I could have continued to listen and learn from this presentation! It was wonderful.
 - o Wonderful session. Both presenters were knowledgeable and eloquent.
 - This was a great presentation with what felt like a clear and reasonable focus and allowed time for questions.

Responses: 9

Responses: 5

Responses: 4

- o I thoroughly enjoyed the presentation
- Good to have both medical and legal perspectives
 - o Great combination to have [a] MD and JD present a difficult topic.
 - One of the best duos on these types of subjects. They need to present an ethics case every year.
 - Having the two disciplines (law and medicine) present together made the session more thoughtprovoking.
 - o [It] was nice to have a legal professional at the presentation.
- Very informative
 - Even on [a] personal level for Advance Care Directive composition!
 - o Great information learned that I can take back to my coworkers.
- Challenging—well done.
- Important take-home information.
- Best breakout of the conference in my opinion.
- Very interesting presentation—made me do a lot of thinking afterwards.
- Presenters were very available for questions and comments, which increased the value of this session. One of the best.

- I appreciated becoming more familiar with some current terminology: VSED, VRFF, CANH, etc. VSED is not assisted suicide. A reminder that w/o an A.D., we tend to assume people want aggressive care.
- Wish the time was longer for [this] topic.
- I valued Dr. Sandler's presentation and his obvious heart for the difficult decisions involved in this presentation. I did not care for the way Pope presented because it did not allow for discussion or reflection. It seemed that his certainty overrode some of the difficult and nuanced human dimensions of making decisions about a loved one's care who has advanced dementia.
- I thought this to be an interesting session, and [I] see how there can be some dilemma involved in determining to hand feed or not. However, I felt that this speaker made some rather general statements saying that nursing homes put in feeding tubes and give supplements to end-stage dementia patient. I go to many nursing homes in the Twin Cities and WI for the VA and have never had a hospice patient that I have seen that was on tube feedings. Many have hospice agencies involved and supplements are very often not recommended or given either. Many NHs are very up-to-date on palliative and hospice care and able to provide good education to families.
- Pope spent a lot of time reviewing old case law—not as relevant. [I] would have appreciated more discussion of current cases and trends.
- My disappointment with this session is that there is no "dilemma" when it comes to withholding or withdrawing life-sustaining treatments from someone say with advanced dementia. It seems to be assumed that withholding based on their poor quality of life or [the] family stating "mother would never want to live like this", is reason to deny food, even if food is put to their mouth and they accept. I'd like to discuss that piece of it. In other words, the real discussion then is how to make it easier to proceed legally. So, I fail to see where the ethical discussion took place.

Thank you for your contribution to the success of the conference!

Best regards,

Humpula

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