

PSYCHOSOCIAL ONCOLOGY & CANCER PATIENT SUPPORT PROGRAMS

RESILIENCE

ISSUE 01 | JULY 2022

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OUR MISSION

To reduce suffering and improve the quality of life of cancer patients and their loved ones across the lifespan, throughout survivorship and beyond.

OUR VISION

Ensure no one faces cancer alone.

OUR VALUES

- Accountability & Transparency
- Inclusion & Diversity
- Innovation & Curiosity
- Collaboration & Commitment to Service

OUR OBJECTIVES

- Reduce barriers to psychosocial support
- Collaborate with and support providers
- Optimize patient, caregiver, and family services
- Empower our community with shared knowledge and programming

CONTACT US

Phone: 336-713-6954

<https://www.wakehealth.edu/cancersupport>



Atrium Health
Wake Forest Baptist

OUR STRATEGIC VISION.

BY POP/CPSP DIRECTOR KATIE DUCKWORTH, PHD

Thank you for taking a few minutes to engage with the inaugural issue of Resilience, our quarterly newsletter. These past few years of the pandemic have prompted us to reflect upon the ways that we approach meaningful connections.

In many ways, we hope that this newsletter will be a conduit for connection as well as a window into the meaningful work we are undertaking in the Psychosocial Oncology and Cancer Patient Support Programs (POP/CPSP). We work to promote access to integrated behavioral health resources to all community members in need. This journey has its ups and downs, and our focus remains on optimizing quality of life at all points.

Change is afoot within our programs! We have new directorship, new team members, new enterprise partners, and a growing demand for our services. Amidst these changes, we are leaning into our many strengths and envisioning new possibilities for our future. I am excited to introduce you to our fantastic behavioral health team members and share a little about our strategic priorities. I also want to take this opportunity to thank Dr. Richard McQuellon for his 3+ decades of service as director of POP/CPSP and wish him all the best as he launches into new endeavors.

The POP and CPSP truly have been at the heart of the Comprehensive Cancer Center for decades, guided by our vision that no one faces cancer alone. Starting as a largely volunteer-run operation, we have expanded and professionalized services through the years, ultimately growing into a highly skilled, integrated behavioral health team that strives to reduce suffering and improve quality of life for patients and family systems from the point of diagnosis, throughout survivorship, and beyond.

Today's standard of care includes timely, accessible, evidenced-based services interwoven within medical care and in

collaboration with other providers. Such a model is truly bio-psycho-social in design and serves to reduce barriers to care and to optimize outcomes. Our team is available for inpatient consultation on all oncology services, provides in-person and telehealth outpatient assessments and counseling, and offers outpatient rapid response counseling for patients in distress. Since early in the pandemic, we began offering robust, increasingly accessed telehealth group programming. In this issue, our new Integrated Clinical Programming Manager, Lisa Rainwater, PhD, MA, LCMHCA, CGP discusses the benefits of group work and insight into new virtual groups on the horizon. In the year ahead, we also will focus our attention on collaborating to build robust provider support and programming to acknowledge and care for the cumulative loss and compassion fatigue that many healthcare professionals are experiencing.

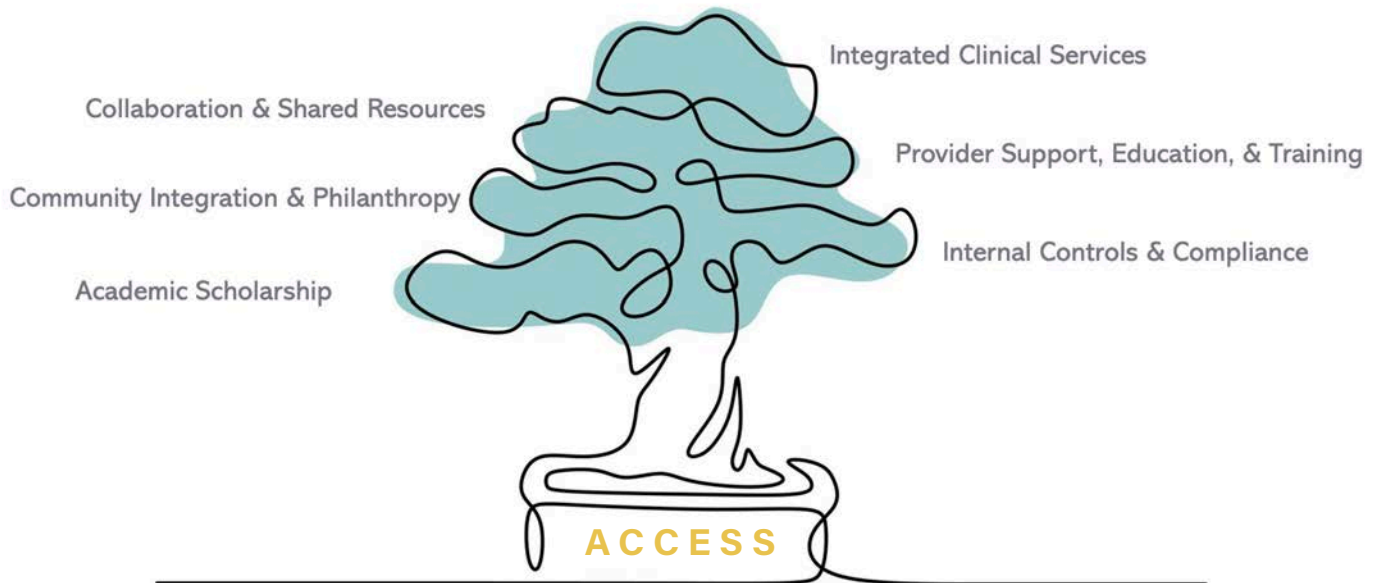
With the demand for services and the means through which we can reach patients (i.e., telehealth) also increasing, we have embarked on numerous important initiatives as part of tomorrow's strategic priorities. To keep up with need and to systematize our operating procedures, we developed a new intake and triage process overseen by Carrie Madsen, MS, LCMHC, NCC, one of our new clinicians. This system helps us track and assess changing needs and connect patients to services in a timely fashion.

Our team is devoted to more upstream patient identification to address patient needs before they are in crisis. In response to thematic referrals, we are building Psychosocial Oncology specialty clinics in the areas of Couples, Young Adult, Trauma, Therapeutic Arts, Bereavement, and more to encourage provider specialization, multidisciplinary collaboration, and innovative, targeted programming.

In this inaugural issue, you will also learn more about Healing Arts—one of our future

CONTINUED ON PAGE 2

ACCESS FOR ALL SO NO ONE



FACES CANCER ALONE.

OUR STRATEGIC MISSION. CONTINUED FROM PAGE 1

Offering hope, fostering resilience, and providing support to patients, families, and providers

clinics. Our new Art Therapist, Erica Fox, MA, LCMHC, NCC, ATR plans to introduce Open Art Studios, inpatient and outpatient art therapy groups, portable art kits, and a healing arts mobile cart to patients who gravitate towards self-expression and healing in creative ways. In this half-virtual, half-in person world we are navigating, our team has a vision for vibrant hues and symbols of resilience dotting our cancer

center walls as we continue to build this program. We also hope this will open up incredible partnership opportunities within our community.

As the academic hub of the emerging enterprise, we will continue to engage in protocolized research, scholarly production, and presentations. We are proud to announce that our COVID-19-

related research protocol on young adults with cancer resulted in a presentation at this year's Annual APOS Conference and a published manuscript, "Cancer During a Pandemic: A Virtual Psychosocial Intervention for Young Adults," in the peer-reviewed journal, *Current Problems in Cancer*.

Our team aims to become an established

training center for psychosocial oncology care providers. We have developed a new, evidence-based internship program for counseling and psychology graduate students interested in working in psychosocial oncology and have fostered new academic partnerships and renewed commitments to universities and programs, including Wake Forest University, North Carolina A & T State University, and University of South Florida.

At the center of all of these efforts is our energy towards patient-centered care and maintaining access for all. Our patients benefit greatly from our long tenure of community support that subsidizes our clinical services. As a group, as a community, we want access for all members so that no one is alone or suffering emotionally during this journey. The steadfast, consistent insistence of our individual community members and corporate sponsors continues to echo this vision. When pandemic conditions thwarted our in-person fundraising plans, we pivoted to virtual fundraising. This year, we pivoted from Winterlark to Summerlark, a family-friendly event that featured live music, food trucks, fireworks, and the ability to gather outdoors as a community in our lovely city.

I feel so honored to be a part of this community that supports one another and believes in the ripple effects that reverberate through individuals, couples, family systems, and communities when we invest in nurturing resilience and reducing financial toxicity. I am honored to work with this incredible group of teammates, Andrea, Aimee, Carrie, Emily, Erica, Lisa, and Tanisha and cannot say enough about their personal and professional passion in their roles. I invite you to get to know them and reach out with feedback about programming.

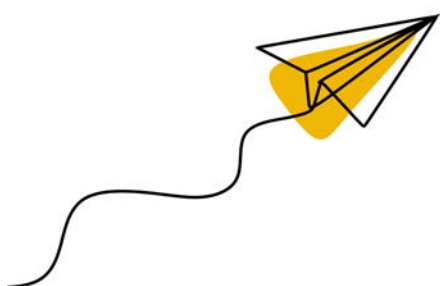
Cancer unfortunately impacts all of us in some capacity. Please know, as a team, we are here, collaborating, innovating, and working hard to maintain and build a program that will outlast each of us.

Thank you, on behalf of all of us, for your support. We are here to listen if you have feedback, questions, or ideas.

Reach out to me directly at any time,

Katie

Katie E. Duckworth, PhD, LCMHC
Assistant Professor
Director, Psychosocial Oncology & Cancer Patient Support Programs
Hematology and Oncology



**BECAUSE OF OUR
COMMUNITY'S
GENEROUS FINANCIAL
SUPPORT, WE HAVE
NEVER HAD TO TURN
AWAY PEOPLE IN NEED
OF BEHAVIORAL HEALTH
SERVICES.**

NEW INITIATIVES.

Leading the field with specialized care, transparency, innovation, and professionalism.

**Clinician
Specializations**

**Psychosocial
Clinics**

**Patient &
Family
Support**

**Psychosocial
Support
Groups**

**Trauma-
Informed
Approach**

**Patient Flow
Streams**

**Provider
Support**

**Internal
Controls &
Compliance**

**Rebrand &
Web Design**

INTERVIEW WITH A PROVIDER.



DR. K ON CPSP SERVICES.

INTERVIEWED BY CARRIE MADSEN, MS, LCMHC, NCC

What is your oncology specialty, and how long have you been practicing at Atrium Health Wake Forest Baptist?

Dr. Sarada Krishnamurthy, or "Dr. K" as she is affectionately known by patients and colleagues alike, has been at Atrium Health Wake Forest Baptist since 2020 as an Assistant Professor of Internal Medicine in the Section on Hematology and Oncology. At the Comprehensive Cancer Center, she is specifically focused on inpatient Bone Marrow Transplant (BMT), cellular therapies, Lymphoma, and Myeloma, in addition to the Inpatient Hematology Consultative Service.

How have you utilized CPSP services?

Dr. K said she believes "that most people can benefit from some form of therapy," and actively advocates for the use of CPSP services, as she has seen how CPSP clinicians offer patients the time and space to explore the numerous psychological, emotional, and interpersonal dimensions of a cancer diagnosis. As a provider, she has also seen CPSP clinicians provide the medical team with complementary perspectives and the opportunity to "bump ideas off each other that may prove to be unique" – qualities that allow the medical providers to treat patients more holistically. Dr. K stated that "if left to my devices, I would have CPSP work with every cancer patient from the moment of diagnosis."

How did your patients benefit from working with one of our psychosocial oncology counselors?

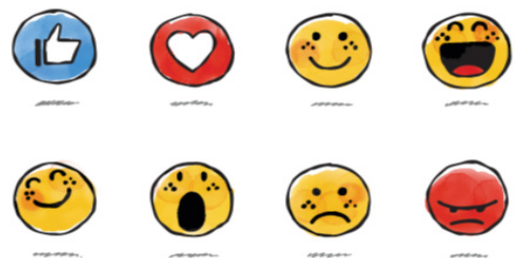
She shared how she has seen her patients benefit from CPSP services, "It's an unrealistic expectation for patients to smile all the time—we know that there will be terrific days and terrible days." Dr. K noted that her patients benefit from the chance to address specific concerns, learn to cope with side effects, and manage challenging thoughts and feelings. The combined efforts of her team in addition to that of CPSP clinicians provide an additional layer of support that encourages patients to find their voice and tap into their own wisdom, thus "connecting patients with an increased sense of personal agency and control, in addition to growth and hope."

Dr. K explained that when it comes to cancer, successfully treating patients requires many providers to come to the table, and this includes CPSP clinicians. Such an interdisciplinary approach allows the medical team to "create the 'special sauce' that provides patients with a more well-rounded and holistic perspective." Furthermore, she has seen firsthand how CPSP clinicians' timely presence and programs make an extremely important contribution to the wellness of the medical team. "I could talk about CPSP all day! You all provide such an important service – the work that you do should be better recognized and utilized. I cannot wait to see what the next chapter of CPSP holds."

If you would like to make an outpatient referral or an inpatient consult request, please review the information detailed below.

Psychosocial Oncology & Cancer Patient Support Programs

Offering hope, fostering resilience, and providing support for patients, families, and providers.



Outpatient Services

- Counseling
- Support Groups
- Biopsychosocial Assessments
- Financial Assistance

Inpatient Services

- Orientation to CPSP
- Wellness Visits
- Psychosocial Consultations
- Financial Assistance

Specialties

- Provider Support & Education
- Grief & Bereavement
- Healing Art Therapy
- Trauma-informed Care

How to Send Outpatient Ambulatory Referrals & Inpatient Consult Requests

+ ADD ORDER

--> AMB REF CANCER --> **REF92A**

-->To dept spec: **Hematology Oncology**

-->To dept: **MC CC 03 CANCER PATIENT SUPPORT**

--> Diagnosis for referral: **Name, MRN, Reason for referral**

+ ADD ORDER

--> IP CONSULT PSYCHOSOCIAL ONCOLOGY --> **CON164**

--> REASON FOR CONSULT: **Name, MRN, Reason for referral**

--> CALL BACK NBR: **Please provide # for follow-up**

--> HAVE YOU CALLED THE CONTACT FOR THE CONSULT TEAM: **Yes or No**



ART IS A HEALING PROCESS

By Erica Fox, MA, LCMHC, ATR

AND HEALING IS AN ART PROCESS.

CPSP Healing Arts Program is one of several new and upcoming integrated clinical services provided through the Cancer Patient Support Program. Art Therapy services will be offered as a complementary modality of treatment to aide in improving overall wellness of patients, caregivers, and providers.

What is Art Therapy?

This psychotherapy modality can easily be mistaken for arts and crafts or a leisure activity due to the relaxing and recreational qualities associated with art making.

Art Therapy stems from a relationship between the patient and Art Therapist: Art materials, art making, and art products serve as a bridge in communication and a vehicle for facilitating expression differently than during traditional talk therapy. Art Therapy is facilitated on a continuum between art as therapy and art psychotherapy depending on participant needs.

Engaging in the creative process can be done independently, in a group setting, and as an auxiliary modality in psychotherapy. Facilitating Art Therapy without proper training can exacerbate a participant's existing symptoms.

To ensure participant safety it is important this modality of psychotherapy be facilitated by a clinically trained Art Therapist to guide patients appropriately through a range of thoughts, emotions, sensations, memories, and experiences that may be elicited in the process.

CPSP Healing Arts Program Offerings

Art Therapy services for patients and caregivers will be determined following inpatient and outpatient clinical assessments.

A unique element to the program will include a provider wellness and self-care component that includes Art Therapy for providers to process distress, grief, and compassion

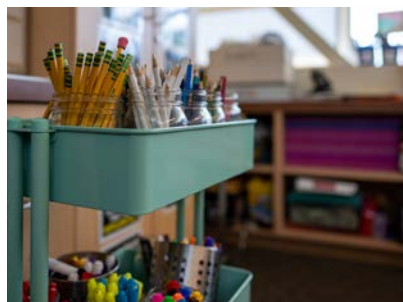
fatigue to foster healing, distress tolerance, and emotional resilience while caring for patients and caregivers.

Additionally, we aim to provide internship opportunities for Art Therapy students, and protocolize Art Therapy programming in our Comprehensive Cancer Center to determine efficacy for improving patient and caregiver wellness.

We are hopeful the addition of our Healing Arts Program will provide many benefits to our patients, caregivers, and providers!

For more information about the Healing Arts Program, email Erica at efox@wakehealth.edu

To learn more about Art Therapy visit: <https://arttherapy.org/>



GOAL 1.

Introduce Art Therapy to patients and families through individual and group counseling during outpatient and inpatient treatments.



GOAL 2.

Protocolize Art Therapy programming in a Comprehensive Cancer Center to determine efficacy for improving patient and caregiver wellness.



GOAL 3.

Integrate Art Therapy into provider wellness groups to process grief, foster healing, and reduce compassion fatigue.

RECOGNIZING POP/CPSP LEGENDS.



RICHARD MCQUELLON, PHD, HSP-P

began as the Director of the Psychosocial Oncology and Cancer Patient Support Programs in 1985 and retires this summer after 37 years of dedicated service. For three decades, he oversaw a variety of services to cancer patients, including therapeutic music, tai chi, massage, support groups, and individual counseling.

During his tenure as director, he had extensive experience as a clinician in mental health—counseling individuals, couples, and families and facilitating psychotherapy and psychoeducational groups for cancer patients. His clinical work focused on the psychological care of patients managing recurrent, advanced disease and undergoing extreme cancer treatments, including stem cell transplantation. Dick also provided

relaxation, imagery, and mindfulness-based interventions with patients and caregivers in the outpatient setting.

He is Professor in the Department of Medicine, Section of Hematology and Oncology at Wake Forest Baptist School of Medicine. During his academic career, he has taught and lectured on psychosocial care, quality of life, and interpersonal communication skills in the Wake Forest University community and across the country. He also provided clinical supervision to graduate students of psychology and counseling during his time as director.

Dick's research interests have included quality of life in cancer care and psychosocial adaptation to life threatening illness. His research activities were integrated with clinical work and relied on collaboration with internal and external investigators, studying health-related quality of life in cancer patients. Most recently, he served as the Principal Investigator of a study monitoring health-related quality of life in patients and caregivers undergoing cytoreductive surgery and hyperthermic intraperitoneal chemotherapy.

He has held several esteemed positions, including serving as a member on editorial boards of the *Journal of Hospice and Palliative Medicine*, the *Journal of Clinical Oncology*, and the *Bone Marrow Transplantation* journal; serving as co-Chair of the Survivorship Special Interest Group of the American Psychosocial Oncology Society; and serving as a member of the Cancer Committee and Oncology Service Line Committees at Atrium Wake Forest Baptist Health. From 2009-2013, he served as a member on the Department of Health and Human Services Advisory Council for Blood and Stem Cell Transplantation

Dick has published over 125 abstracts, journal articles, and textbook chapters. With Michael Cowan, PhD, he published *The Art of Conversation Through Serious Illness: Lessons for Caregivers*, (Oxford University Press, 2010; 2021). His most recent book, *The Nell Dialogues: Conversation in Mortal Time* (Oxford University Press, 2021) tells the story of Nell M., a 61-year-old writer and art historian diagnosed with metastatic breast cancer. It represents 14 meetings and 12 recorded conversations that took place over a period of 17 weeks. Accompanying the dialogues are his commentaries to "unpack the discipline while noting the spontaneity of [their] conversations." We thank Dr. McQuellon for dedicating so much time, energy, and wisdom to this program and our patients.



RUTH M. MOSKOP, PHD, CCM

began offering therapeutic harp music to oncology patients, their family members, and oncology staff in 2009 and retired in 2021. She began first as a volunteer was then hired as an employee of CPSP. Ruth has played and studied harp since she was a teenager and enjoys performing and teaching as an adult. Countless numbers of patients and their families experienced Ruth as a therapeutic musician, moving to wherever she was needed in the Comprehensive Cancer Center.

The harp's tone has powerful healing properties and soothes, stabilizes, and uplifts patients and their family members at bedside. During her tenure, Ruth coordinated the Healing Harps, a group of harpists who continue to play weekly in the outpatient setting. Ruth was also responsible for bringing guest musicians who play other instruments into the Comprehensive Cancer Center. In 2015, Ruth organized a healing drum

circle that was offered to everyone twice each month in the Outpatient Center and twice to inpatients, their family members, and staff in the inpatient units. Drumming, particularly group drumming, is documented to have important, wellness-promoting effects. Ruth collaborated with John R. Beck, a Professor of Percussion at the UNC School of the Arts and Wake Forest University, and others on an interactive group drumming protocol for hematopoietic cell transplant patients. Their research has been published in the *Music and Medicine* journal and can be accessed at <https://mmd.iammonline.com/index.php/musmed/article/view/807>.

The POP/CPSP team wishes Dick and Ruth a wonderful retirement filled with laughter, joy, and adventure. Their presence will be missed by the innumerable patients and families who have benefited from their dedication and commitment for a collective 49 years!



Atrium Health Wake Forest Baptist

Each year, our annual event provides 50% of the operating budget for the Cancer Patient Support Program and, over the last four decades, has helped us raise \$6 million for our patients.

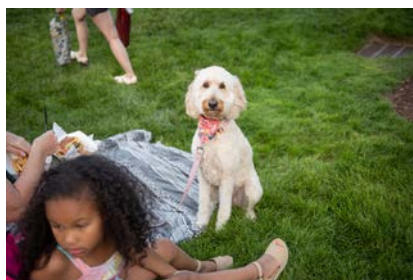
Will you help?

Every dollar donated goes to helping make sure patients never face cancer alone.

Our signature event benefitting the Cancer Patient Support Program was reimagined as SummerLark, which included an online Peer-to-Peer fundraising campaign from May 2 - June 5, and ended with a fun-filled, community summer concert event.

On Saturday, June 4, 2022, Aloe Blacc headlined the SummerLark Concert on the lawn of Bailey Park in Innovation Quarter, in downtown Winston-Salem. Aloe Blacc is best known for writing and performing vocals on "Wake Me Up" which topped the charts in 22 countries. Nashville recording artist and Wilkes County native, Alex Key opened the show.

Missed SummerLark? There is still time to show your support to ensure that no one faces cancer alone. Visit giving.wakehealth.edu/get-involved/summerlark to learn more.



JOIN A SUPPORT GROUP & ACTIVATE YOUR WELLNESS PLAN.



By Lisa A. Rainwater, PhD, MA,
LCMHCA, CGP

How do you see yourself engaging in a wellness group?

- Wellness Activation
- 15-Minute Mindfulness Recharge
- Women's Wellness Project
- YA Survive & Thrive
- Survivorship Book Group
- Remembering a Loved One
- Couples Together
- Art Therapy
- Virtual Chair Yoga

Our virtual groups meet on a secured internet platform. Some are weekly, some monthly, and yet others are one-time sessions to help get you on the best wellness path.

Visit our online calendar: <https://bit.ly/3wYbHwQ>

To learn more about our group offerings, email me at rainwat@wakehealth.edu.

"Perhaps the secret of living well is not in having all the answers but in pursuing unanswerable questions in good company."

RACHEL NAOMI REMEN

As an integrated behavioral health team, we work closely with patients *and* their providers. In my three years, I have witnessed individuals, couples, and families face the challenges of cancer with support from their oncologists, PAs, NPs, RTs, OTs, PTs, nurse navigators, and counselors. I never fail to be in awe of the resilience in my clients and their loved ones. I also never fail to be in awe of the compassion and connections forged between members of our online support groups. We provide a safe, empathic space where one can find camaraderie, unconditional support, and confidentiality. During our time together, there is laughter, storytelling, virtual hugs, and at times a few tears.

The Wellness Wheel: Viewing the cancer experience through the lens of wellness and mindfulness practices.

The [Global Wellness Institute](#) defines wellness as "the active pursuit of activities, choices, and lifestyles that lead to a state of holistic health." Our support groups are structured around the Wellness Wheel and seek to enhance the active pursuit of wellness in seven aspects of life: Physical, emotional, social, spiritual, environmental, financial, and intellectual. I think of the Wellness Wheel as analogous to a bicycle wheel: If one spoke is bent, it is difficult to move the wheel forward. Likewise, if one element of one's wellness is left unattended, it is difficult to move forward in life. Mindfulness is the act of becoming aware of the present moment. Renowned University of Massachusetts Medical Center researcher and professor Jon Kabat-Zinn found that mindfulness can reduce worries about the future, decrease distress, reduce chronic pain, and improve sleep hygiene, among many other improvements in physical and psychological symptoms. We incorporate mindfulness practices into our support groups and include engaging the five senses, breathing exercises, qigong, and guided imagery.



The benefits of support groups are wide-reaching.

The power of peer support, led by a trained psychosocial oncology counselor, reduces distress, offers new coping strategies, enhances self-efficacy, and allows you to talk with others going through similar treatment, work, school, and family situations related to a cancer diagnosis. During the hundreds of group hours I have led, there is one statement I hear repeatedly shared amongst group members: "I get support from my family and friends, but group support is different: You all understand me because you're going through the same thing." Whether you are a person with cancer, a caregiver, or have lost a loved one to cancer, talking with others experiencing similar emotions and challenges can reduce feelings of loneliness.

How are CPSP support groups different than online chat groups?

Our facilitated support groups are opportunities to meet people facing similar life changes and stressors and to feel less alone in their cancer journey as patient, caregiver, or bereaved loved one. These groups differ from Facebook or Twitter Chat Groups, because all prospective members are interviewed prior to joining. Depending on one's place on their cancer journey, some people are better fit for groups, and others are better fit for individual counseling. As counseling professionals, we are able to assess what therapeutic offerings are best for each person on each leg of their journey.

GIVING OF SELF.



ROGER JORDAN & HIS 20+ YEARS OF HELPING.

By Emily Lafontaine,
Graduate Student Social Work Intern

Roger said helping others helps him, and he finds satisfaction in being part of a team of volunteers who make a difference. Roger has helped Cancer Patient Support Program interns by offering insight into the mental, emotional, and physical side effects of cancer. He was also invited to share his story to a group of medical students learning to work with cancer patients and survivors. Roger has had many memorable experiences of companionship in both the inpatient and outpatient settings over the years, including moments of celebration, suffering, the highest of highs, the lowest of lows, and most of all: being not alone, but with one another.

Roger Jordan began volunteering for Brenner Children's Hospital in 1997 and was diagnosed with prostate cancer two years later. Roger decided his experience could be beneficial to other cancer patients. CPSP's Director Dr. Richard McQuellen asked for Roger's assistance, and he agreed to volunteer with cancer patients and their families, as he himself could empathize with those going through the life-changing impact of living with cancer. He has been volunteering for the Cancer Patient Support Program for 23 years.

Roger had surgery following his diagnosis and remained in remission for approximately nine years. He underwent 36 radiation treatments upon relapsing, and although he continues to take maintenance medication, his oncologist considers him "medically stable."

Roger provides social support to those undergoing the same struggles he knows all too well. He offers a cup of coffee, a snack, and the comfort of conversation only to be had with someone who understands the sting of what no words can describe.

"The one thing that's certain about cancer is its uncertainty," he said. "I draw my strength from cancer patients by seeing how strong they are, how resilient they are, and how they're standing up to cancer in the face of its uncertainty."

Roger lives in Pfafftown with his wife of 46 years, his dog, and his cat. When he is not volunteering at Atrium Health Wake Forest Baptist, he enjoys long walks on the treadmill, gardening, and helping out his neighbors. He stressed that he enjoys being active and likes to meet people.

Would you like to join a group of committed, passionate, lively, and kind individuals who volunteer at the Cancer Patient Support Program?

Consider contributing your time and talents to our patients and their loved ones, while experiencing meaningful engagements and enjoying excellent benefits:

- Complimentary parking
- Free meal (value \$6)
- Free uniform (adult and college student volunteers only)
- Free flu vaccine
- Annual awards and recognition
- Job and school references
- Discounts on qualified prescriptions

Learn more -->

<https://www.wakehealth.edu/about-us/volunteer-services>

IN MEMORIAM: RAY JOYNER.



RAY JOYNER
1938- 2022

Our volunteer services will never be the same with the loss of our faithful volunteer: Ray Joyner. Ray's 15 years of service at the Comprehensive Cancer Center provided humor and compassion at times when families needed it most. Ray found purpose and meaning in life in the line of service.

He graduated from the United States Naval Academy, first serving our country in Vietnam and then as a commissioned officer in the United States Marine Corps. Ray served as a reader at Our Lady of Mercy Catholic Church for 40 years, Catechist for the Catholic Sacrament of Confirmation for 15 years, Charter Deputy Grand Knight for Knights of Columbus council 10504 and served as Eucharistic Minister for the Homebound for 4 years. He also served at Ibrahim Pre-K as a reading teacher for 14 years.

Ray loved his family more than anything. He is survived by his incredible wife of 55 years, Donna Joyner; five children; and seven grandchildren.

On behalf of our patients and their families, we honor his dedication to service and thank him for the light he brought to us all.

MEET KATIE.



Katie Duckworth, PhD, LCMHC joined POP/CPSP after completing a postdoctoral fellowship at Wake Forest Baptist Medical Center in Psychosocial Oncology. At that time, Katie knew her professional calling was rooted in a space in which individuals were confronting acute adaptation to health status changes—a space that involves loss, adaptation, and resilience. In 2021, Katie was promoted to the Director of the Psychosocial Oncology and Cancer Patient Support Programs.

For the past decade, she has taught as an Assistant Professor and faculty member in Hematology/Oncology and has worked with thousands of patients and their families as a clinical mental health counselor. Katie enjoys this biopsychosocial care space that is brimming with multidisciplinary team engagement, intellectual curiosity, and dynamic physical and psychological changes.

Katie's primary clinical interests include emotional adaptation to acute health status changes, maternal adaptation, and young adult care and fertility considerations throughout treatment. She also enjoys exploring these interests in prospective and archival capacities. She works primarily with the stem cell transplant service and enjoys multidisciplinary care as well as long-term relationship establishment with clients.

Katie leads the education sub-committee of the Faculty Development Committee and is active on many hospital committees, including Medical School Admissions and the Young Adult Oncology Working Group. She also teaches routinely in the Genetic Counseling, Addiction Research and Clinical Health, and Wake Forest University Counseling programs.

Katie received a BS in Cognitive Studies and Spanish Literature from Vanderbilt University, an MA in Community Counseling from the University of Texas at San Antonio as well as a MA in History from the University of North Carolina at Greensboro, and a PhD from the University of North Carolina at Greensboro in Counseling and Counselor Education. She completed a post-doctoral fellowship in Psychosocial Oncology at Wake Forest Baptist Medical Center. A lover of knowledge and seeker of cultural understanding, she is pursuing a second PhD in history with a focus on Cherokee women's adaptation to epidemic disease.

Katie is thrilled to step into the directorship role, where she has the opportunity to think about program development, collaborate with a phenomenal team, and engage our tremendously supportive community—a community she has come to love and in which she and her husband are raising their four children, ages 7, 5, 2 and 4 months.

MEET CARRIE.



Carrie Madsen, MS, LCMHC, NCC rejoined POP/CPSP in 2022 as a psychosocial oncology counselor, having previously served on staff with CPSP in 2015. Carrie's clinical interests include chronic health conditions, anxiety, depression, spirituality, existential concerns, end-of-life issues, grief and loss, Acceptance and Commitment Therapy (ACT), and group therapy. She triages POP/CPSP patient referrals, provides consultation on Leukemia service, and maintains an outpatient caseload.

She is particularly passionate about supporting clients as they navigate periods of adjustment, such as those initiated by cancer diagnosis, treatment, and/or survivorship. Carrie works with individuals, groups, and caregivers/families in both the inpatient and outpatient settings.

In addition to managing the triage process, Carrie contributes her expertise in Acceptance and Commitment Therapy (ACT, pronounced like the word "act")—an evidence-based therapy that helps patients learn to manage the challenging thoughts, feelings, sensations, and side effects of cancer while focusing on what and who really matters to them and what they want to stand for in their lives, regardless of what is happening with the disease.

Carrie completed her MS in Counseling from the University of North Carolina at Greensboro in 2012 and has provided individual and group therapy in medical, educational, and clinical mental health settings. Carrie also holds a BA in Music from the University of Oregon and an MA in Musicology from Cornell University.

"Transition is the emotional, cognitive, physical, and spiritual process that people go through when they are confronted with change."

~ Jakob van Wielink

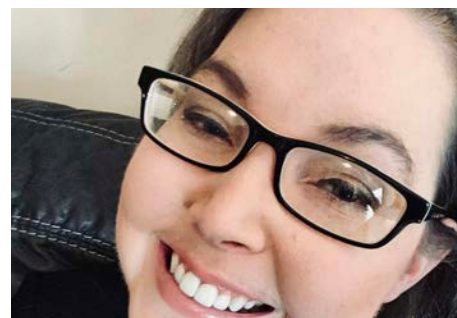
MEET AIMEE.



Aimee Tolbert, MA, LPA, HSP-PA joined POP/CPSP as a psychology student intern in June, 2015. In January, 2016, she transitioned to the role of staff psychologist. Aimee completed her BS in Psychology and Sociology from Virginia Tech, and her MA in Clinical Health Psychology from Appalachian State University.

Aimee's clinical interests include anxiety, depression, spirituality, caregiver issues, and existential concerns. She specializes in working with young adults and adolescents, individuals with blood cancers, gynecological cancers, and breast cancer. Aimee works with patients as well as families in both the inpatient and outpatient settings.

MEET EMILY.



Emily Lafontaine joined POP/CPSP in August 2021 as a graduate student intern pursuing her Master of Social Work degree from the University of South Florida. She is a former elementary school teacher and taught fourth and fifth grades for approximately five years.

She enjoyed her time teaching, but after being diagnosed with leukemia, she became extremely passionate about the mental-emotional health component of a cancer diagnosis, treatment, and survivorship experience, as well as accessibility and affordability of health insurance coverage and medical care. She has been in remission for five years and lives in Mooresville, North Carolina with her husband and their two dogs, Boomer and Nova.

Emily is incredibly thankful for the opportunity to learn from the counselors and psychologists during her internship, as well as the opportunity to communicate and collaborate with the nurses, doctors, and additional auxiliary faculty/staff at Atrium Health Wake Forest Baptist.

MEET LISA.



Lisa Rainwater, PhD, MA, LCMHCA, NCC, CGP joined POP/CPSP in 2020 as a psychosocial oncology counselor after completing her year-long internship as a counseling graduate student. In 2022, she was promoted to Integrated Clinical Programming Manager. In this capacity, she oversees the POP/CPSP Internship Program, manages the Psychosocial Oncology Clinics, and identifies opportunities for integrated collaboration and program development within the Comprehensive Cancer Center and community. She finds her committee work with providers from nursing, FaithHealth, patient navigation, and CPSP rewarding, as they come together to identify and develop programming and protocolized research to support the mental health and wellness of healthcare workers.

Lisa was drawn to psychosocial oncology after providing support to Dr. Niels Ingwersen—her doctoral mentor diagnosed with cancer—and to Faith, his wife and caregiver. Under Niels's tutelage, she studied existentialist philosophers Kierkegaard, Nietzsche, Schopenhauer, Sartre, and de Beauvoir. It is to him she owes credit for her understanding of existential concerns—first as his doctoral student and then as an integral member of his care team, where she wexperienced the difficulties families face without the support of psychosocial oncology services. She entered the field of psychosocial oncology counseling to serve in his honor and the honor of her two grandfathers who died of cancer.

Her clinical and academic interests include anxiety, grief and loss, existential threats, women's issues, caregiver distress, geriatrics, wellness & mindfulness, and end-of-life care. She provides inpatient and outpatient counseling to individuals, couples, and families. Lisa has developed and leads virtual support groups and provides webinars and workshops for Cancer Services.

Lisa holds a BA in Psychology, German, and Sociology from Winona State University; an MA in German from the University of Oregon; a PhD in German and Scandinavian Studies from the University of Wisconsin, with an emphasis on existential philosophy, and feminist and narrative theory; and an MA in Counseling from Wake Forest University. She is a Licensed Clinical Mental Health Counselor Associate and a Certified Grief Professional. She is working toward Certification in Thanatology and participates in continuing education and training in supervision, couples therapy, and mindfulness.

MEET ERICA.



Erica Fox, MA, LCMHC, NCC, ATR joined POP/CPSP in 2022 as a psychosocial oncology counselor and art therapist, having previously served as a staff counselor in the Department of Psychiatry and Behavioral Medicine since 2018. She is a Licensed Clinical Mental Health Counselor, National Certified Counselor, Registered Art Therapist, and Eye Movement Desensitization Reprocessing (EMDR) practitioner. She holds a BFA from the University of North Carolina at Greensboro, and an MA in Clinical Mental Health Counseling and Art Therapy from Lesley University at Cambridge.

Erica's counseling approach is rooted in art therapy, humanistic, and holistic approaches. She has previous experience working with children, adolescents, and adults in school, hospital, and community based therapeutic milieus. Her clinical and research interests include medical art therapy, depression, anxiety, trauma, grief and loss, life transitions, and women's wellness and empowerment. She currently provides counseling to individuals and families in inpatient and outpatient settings.

MEET TANISHA.



Tanisha Dukes joined POP/CPSP in June 2022 a master's student in the Clinical Mental Health Counseling Program at North Carolina A&T State University with a focus on Marriage and Family Counseling. She was born in Lexington, NC and moved to Greensboro, NC to pursue her studies. In 2019, Tanisha graduated *summa cum laude* from Apex Theology School where she earned a Bachelor of Arts in Theology.

As an undergraduate, she developed an affinity for counseling because it encompasses her interest in working with individuals and families, helping them navigate trauma, and counseling them through complex and challenging emotions. When she is not working or studying, she is spending time with her family, traveling, enjoying the outdoors, and exploring the city.

POP RESEARCH
2021-2022.

Protocols.

#01520 Cancer within a Pandemic: A Telemental Health Intervention Designed to Augment Psychological Resilience amidst Dual Health Threats

#04417 Does Interactive Group Drumming (IGD) Improve the Hospital Experience of Patients Undergoing Stem Cell Transplant (HCT) - A Pilot Study.

Publications.

Stephanie Lichiello, Lisa Rainwater, Gregory B. Russell, Camila Pulgar, Jaylyn Clark, Stephanie Daniel, Marcia H. McCall, Paige Bentley, Katie E. Duckworth, Current Problems in Cancer, 2022, 100865, ISSN 0147-0272, <https://doi.org/10.1016/j.cuprobincancer.2022.100865>.

Beck, J, Moskop, R, Duckworth, K, McQuellon, R, Russell, G, Lamar, Z, & Rodriguez, C. Interactive Group Drumming (IGD) in the Hospital: An Effective Music Intervention for Hematopoietic Cell Transplant (HCT) Patients. Music and Medicine. 2022 14,1: 39-46.

Symposia.

"Navigating Cancer and a Pandemic as a YACS: Telehealth Practice Considerations" (UNC Health Sciences at MAHEC: 4th Adolescent and Young Adult Oncology Symposium: Models of Care 2022)

Duckworth, KE "Supporting Mothers through Oncologic Care within Contemporary Times." May 7, 2021. Eastern Carolina University Health Psychology Department Invited Lecturer for Annual Health Psychology Symposium

Duckworth, KE, QOL and Nutrition Panelist, Virtual Appendix Cancer Survivorship Symposium- Virtual, Oct 15, 2021

Conferences.

"Cancer during a Pandemic: A Young Adult Telemental Health Intervention" (APOS 2022)

"Psychosocial Oncology Care During a Pandemic: Effects of Offering Telemental Health in an Academic Medical Center" (APOS 2021)

"Facilitating Empathy in Medical Students with Art: An Exercise in Focused Attention" (APOS 2021)

Ian B. Solsky MD MPH, Ana Patel BA, Cristian D. Valenzuela MD, Kathleen C. Perry BS, Katie Duckworth PhD, Konstantinos Votanopoulos MD PhD, Perry Shen MD, Edward A. Levine MD. "Opioid and Psychotropic Medication Use in Cytoreductive Surgery and Hyperthermic Intraperitoneal Chemotherapy Patients." (SSO 2022)

PATIENT NAVIGATOR HIGHLIGHT: EMILY COPUS, MSW, OPN-CG.

By Emily Lafontain,

Graduate Student Social Work Intern



Atrium Health Wake Forest Baptist's patients and families benefit from a group of dedicated health care providers called patient navigators. Defined by the National Cancer Institute, "A patient navigator helps patients communicate with their healthcare providers so they get the information they need to make decisions about their health care. Patient navigators may also help patients set up appointments for doctor visits and medical tests and

get financial, legal, and social support."

POP/CPSP counselors work closely with patient navigators. In this issue, we highlight the work of Emily Copus, MSW, OPN-CG.

Emily is the Manager of Population Health Navigation and a Rural Patient Navigator for the Office of Cancer Health Equity. Her role within the Comprehensive Cancer Center is to identify barriers to medical care and mitigate those barriers, particularly among the rural patient population. Copus said mitigating barriers to medical care allows patients to focus on their health rather than stress associated with the financial burden of cancer. She said the biggest barrier experienced by this population is the lack of transportation to and from appointments, as well as food insecurity and the inability to pay household-related bills (i.e., electricity, water, etc.).

This population may also have social-emotional needs such as mental health and/or relationship issues related to cancer diagnosis, treatment, and survivorship. Copus said patients oftentimes ask for objective, non-judgmental insight from a third party, in which case she connects them to the Cancer Patient Support Program for individual, couples, and family counseling. She said counseling is helpful for everyone, but especially people with cancer, and feels confident that connecting experts in the mental health field with individuals receiving diagnoses, undergoing treatment, and adjusting to survivorship improves the quality of life for those individuals and the people closest to them.

Copus said members of the Office of Cancer Health Equity and the Cancer Patient Support Program work together to provide support for patients and their families; individuals who cannot work in the same capacity as they once worked, for example, could benefit from the help of a patient navigator to find financial resources available to them, as well as the help of a counselor/psychologist to learn coping strategies for the purpose of moving forward with life following job loss. Ultimately, Copus's hope for patients and families served by the Office of Cancer Health Equity is that "they survive cancer, and they survive well, regardless of race, ethnicity, or socioeconomic status."

For more information on the Office of Cancer Health Equity, visit: <https://www.wakehealth.edu/locations/facilities/comprehensive-cancer-center/office-of-cancer-health-equity>

IN MEMORIAM: GAIL HURT.

Our hearts are heavy in sharing a great loss to our CPSP family and community: Gail Elder Hurt, R.N., M.A. Ed., LPC, CGN. Her humor and compassion were exemplary, as she worked with patients, caregivers, and fellow providers in a multitude of roles during her dedicated healthcare career at Wake Forest Baptist Hospital. With a nursing degree from UNC-Greensboro, she practiced as an oncology nurse for many years, gaining the respect of fellow providers and families touched by her skills, compassion, and humor. Gail was committed to personal and professional growth, and her life story is filled with new directions and achievements. She proceeded to serve as Associate Director of the Cancer Patient Support Program, coordinating multiple projects including support groups for breast cancer survivors, artist engagement, and research protocols. She finally found her professional home as the Associate Director of the Hereditary Cancer Program, where she developed educational programming, risk assessments, genetic counseling offerings, and more for those at increased risk for developing cancer in their lifetime. Gail was a strong believer in self-care, and she found endless joy and peace in running. She outpaced cancer for many years, defying odds and living each day to the fullest. Her encouragement, love, and support of so many in our community will be missed dearly. "We will miss her tenacity, dedication, and loving presence within our community of healers and will work to ensure that her spirit and vision continue to serve as the wind behind our sails," shared POP and CPSP Director, Katie Duckworth. May her life and legacy continue to run into the wind as a beacon of strength and resilience.

RUNNING FREE.



Gail Hurt

1947- 2022

EXPANSION OF ADOLESCENT & YOUNG ADULT OFFERINGS ON THE HORIZON.



MEETING YOUNG ADULT NEEDS WITH INNOVATIVE PROGRAMMING, INTEGRATED REFERRALS, AND COLLABORATIONS.

POP/CPSP YA Clinic.

A counseling and support group program designed to address young adults' concerns and distresses associated with a cancer diagnosis, including delays in diagnosis, developmental disruptions, financial toxicity, fertility concerns, work and school issues, and social and emotional challenges. Clinical offerings are available for individuals, couples, and families. Protocolized research to advance the understanding of YA's psychosocial needs.

Transitioning Teens.

A collaborative Cancer Patient Support bridge designed to stream Brenner Children's Hospital adolescent cancer patients into Young Adult Cancer Care and CPSP's Young Adult Clinic.

AYA Working Group.

A monthly working group comprised of physicians, PAs, nursing staff, and psychosocial oncology counselors to identify patient care needs, discuss programming, and coordinate research efforts.

We continue to develop programming as part of an effort to increase access and attention to the unique needs of our AYA patients here at AHWFB. In addition to a specialty AYA clinic and growing attention to patients transitioning from pediatric to adult care, we want to bring your attention to the following institutional developments. John Salsman, Associate Professor, Social Sciences and Health Policy, Director of Clinical Research in Adolescent and Young Adult (AYA) Oncology and the Co-Leader of the Cancer Prevention and Control Program at the Wake Forest Baptist Comprehensive Cancer Center shared the following updates on AYA program development at AHWFB:

Office of Cancer Health Equity recently received a program development award from Teen Cancer America to enhance cancer care for adolescents and young adults (AYAs) treated at Brenner Children's Hospital and The Wake Forest Baptist Comprehensive Cancer Center of Atrium Health Wake Forest Baptist. The overarching objectives of this award are twofold: (1) to strengthen our AYA Oncology Program to improve care transitions and perceived quality of care among AYAs through patient navigation, survivorship care planning and education on fertility preservation and clinical trials; and (2) to provide expanded programmatic resources to support AYAs' and their caregivers' psychosocial, financial, and educational needs through AYA-specific psychosocial support services and multipurpose dedicated space.