The effect of an enhanced palliative care education program on advanced practice providers in a community-based palliative care program

Nikki Davis, MSN, FNP-C, GNP-BC, ACHPN; Deborah Baker, DNP, CRNP

Aspire Health; Johns Hopkins University School of Nursing

EXECUTIVE DNP SCHOLARLY PROJECT; JOHNS HOPKINS UNIVERSITY SCHOOL OF NURSING, JOHNS HOPKINS UNIVERSITY, BALTIMORE, MD

Introduction

Dying in America: Improving Quality and Honoring the End of Life: lack of healthcare providers who appropriately manage a palliative care population is a key barrier to palliative care delivery (IOM, 2015).

Shortage experienced palliative care providers, combined with a lack of adequate post-licensure palliative care education and training, places risk for community-based palliative care (CBPC) delivery model.

Objectives

1. Determine whether an enhanced educational intervention would improve palliative care knowledge & self-efficacy for APPs who deliver community-based palliative care (CBPC).

2. Determine the impact of increased palliative care knowledge and self-efficacy would have on APPs’ intent to remain in their role.

Methods

Design

Quantitative, non-randomized pilot educational intervention program, with one-group pretest-posttest methodology.

Matched pretest-posttest results were used to assess APP palliative care knowledge and self-efficacy after an on-line, asynchronous educational intervention.

A five-question Likert type questionnaire was used to assess the impact increased palliative care knowledge and self-efficacy had on APP intent to remain in their role.

Setting and Sample

Aspire Health with a total of 72 practice sites

Non-probability convenience sample population of 274 APPs with net yield of 91 APPs

Inclusion: APPs > 0.2 FTE who deliver CBPC palliative care delivery model

Exclusion: APPs < 0.2 FTE and contracted APPs.

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Results

Palliative Care Quiz for Nursing

The mean test score improved from 80 on the pre-test to 85 on the post-test, with p < 0.001.

Post-test scores were 1.28 points higher than pre-test scores.

The mean test score improved from 43 on the pre-test to 45 on the post-test, with p < 0.001.

Knowledge and confidence increased from 43 on the pre-test to 45 on the post-test, with p < 0.001.

Conclusions

The project successfully demonstrated a statistically significant increase in participant scores in palliative care knowledge assessment and palliative care self-efficacy from baseline to post-test following the educational intervention.

The ability to connect APPs’ intent to remain in their role, to increased trends in palliative care self-efficacy and knowledge was not statistically significant. However, there was correlated relevance, with 44% of participants reporting that the intervention provided an engagement opportunity that motivated current job retention.

Practice Translation & Implications

• Collaborate with community partners to: Provide enduring education for APPs; Translate palliative care competencies into benchmark skills related to the organisation’s care delivery model for CBPC.

• Move from learning dissemination to competency assessment using the Palliative Care Quiz for Nursing and the Palliative Care Self-Efficacy Tool.

• Promote and recognize palliative care certification as a form of employee engagement.