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

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Introduction

- Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life: lack of healthcare providers who appropriately manage a palliative care population is a key barriers 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 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 current 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
- Exclusion: APPs < 0.2 FTE and contracted APPs.

Descriptive statistics of post-test sample characteristics

N = 91
82 (89%)
1 (1%)
9 (10%)
3 (3%)
79 (87%)
0 (0%)
6 (7%)
3 (3%)
37 (40%)
21 (23%)
16 (18%)
17 (19%)
74 (81%)
10 (11%)
3 (4%)
4 (4%)

*Note: Demographic Characteristics N = 91, as one participant chose not to enter demographic information. Missing value = 1 compared to total post-test sample.

**MSN - Master of Science in Nursing, CNS - Clinical Nurse Specialist, APRN - Advanced Practice Registered Nurse, DNP - Doctor of Nursing Practice, PA - Physician Assistant.

Intervention

- Educational content from the Center to Advance
 Palliative Care (CAPC) compiled with adaptation to local context.
- On-line self-study educational materials available through the organization's internal LMS to meet the needs-based assessment of the participants' pre-test work.
- Matched pre-tests and post-tests measuring knowledge and self-efficacy were completed by voluntary participants through the organization's LMS [internal resource] with anonymous ID codes.
- Participant satisfaction surveys for all subjects who completed both pre- and post-tests.
- SPSS was used to perform descriptive statistical analyses on pre-test and post-test results, along with evaluation of the 5-Point Likert Scale Questionnaire responses

Outcomes & Evaluation

Aim 1: Increase [APP] knowledge related to palliative care after a 4 week/4 hour educational program.

Measure: Palliative Care Quiz for Nursing

Analysis: Paired t-test for parametric data, with matched pairs of data for pre- and post-test scores.

Aim 2: Increase [APP] efficacy related to palliative care delivery after a 4 week/4 hour educational program.

<u>Measure:</u> Palliative Care Self-Efficacy Tool
<u>Analysis</u>: Paired t-test for parametric data, with matched pairs
of data for pre- and post-test scores.

Aim 3: Determine the impact that increased palliative care knowledge and self-efficacy had on [APP] intent to remain in their role.

<u>Measure</u>: 5-Point Likert Scale Questionnaire <u>Analysis</u>: The median for total Likert scale scores and the median score for all individual questions.

Results

Palliative Care Quiz for Nursing

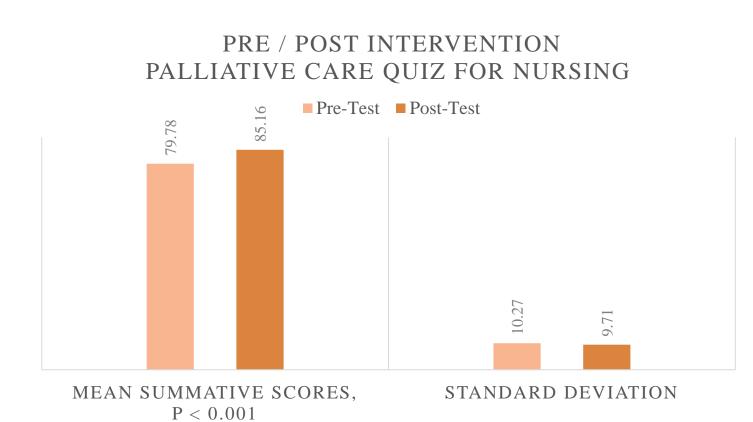
- The mean test score improved from 80 on the pre-test to 85 on the post-test, with p < 0.001.
- Post-test scores 5.38 points higher than pre-test scores.

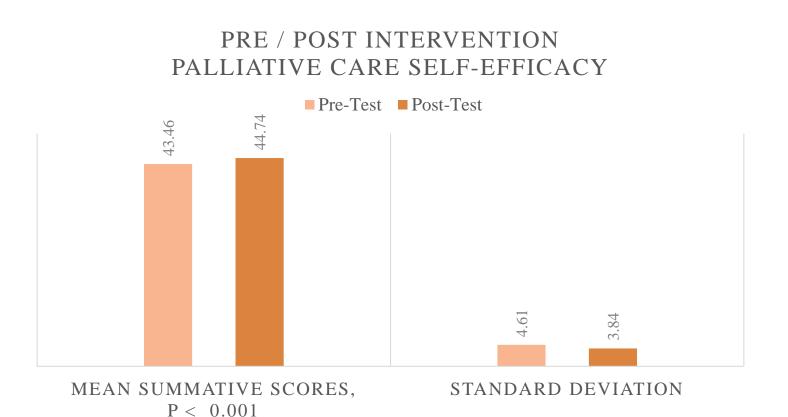
Palliative Care Self Efficacy Tool

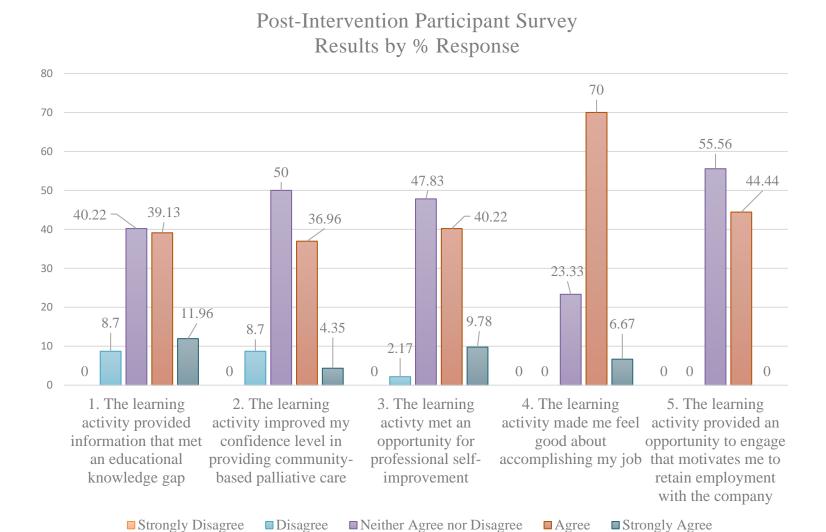
- Mean test score on the Palliative Care Self Efficacy Tool increased from 43 on the pre-test to 45 on the post-test, with p < 0.001.
- Post-test scores were 1.28 points higher than pre-test scores.

Knowledge and Confidence

- 51% agreed or strongly agreed intervention met an educational knowledge gap.
- 41% agreed or strongly agreed t their confidence level improved in providing CBPC following educational intervention.
- 71% agreement or strong agreement that the intervention made them feel good about accomplishing their job,
- 44% reported the intervention provided an engagement opportunity that motivated current job retention.







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 posttest 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

- ✓ Perform with-in group and between group analyses to further inform trended gaps in education and training.
- ✓ Partner with professional palliative care organizations to: Provide enduring education for APPs; Translate palliative care competencies into benchmark skills related to the organization'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.

