Implementation of a Palliative and Hospice Care Educational Program in Long-Term Care Facilities

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Introduction

- 63 deaths have occurred at Elkton Nursing & Rehabilitation from May 2020 to May 2021 and only 10 (16%) of these deaths involved an assessment recommendation for the provision of palliative or hospice care.
- Staff have reported that they do not understand palliative and hospice care as a specialty or how this service could benefit the residents.
- No current palliative or end-of-life education is provided to the nursing working in the facility.

Methods & Intervention

Design: Pre-posttest design

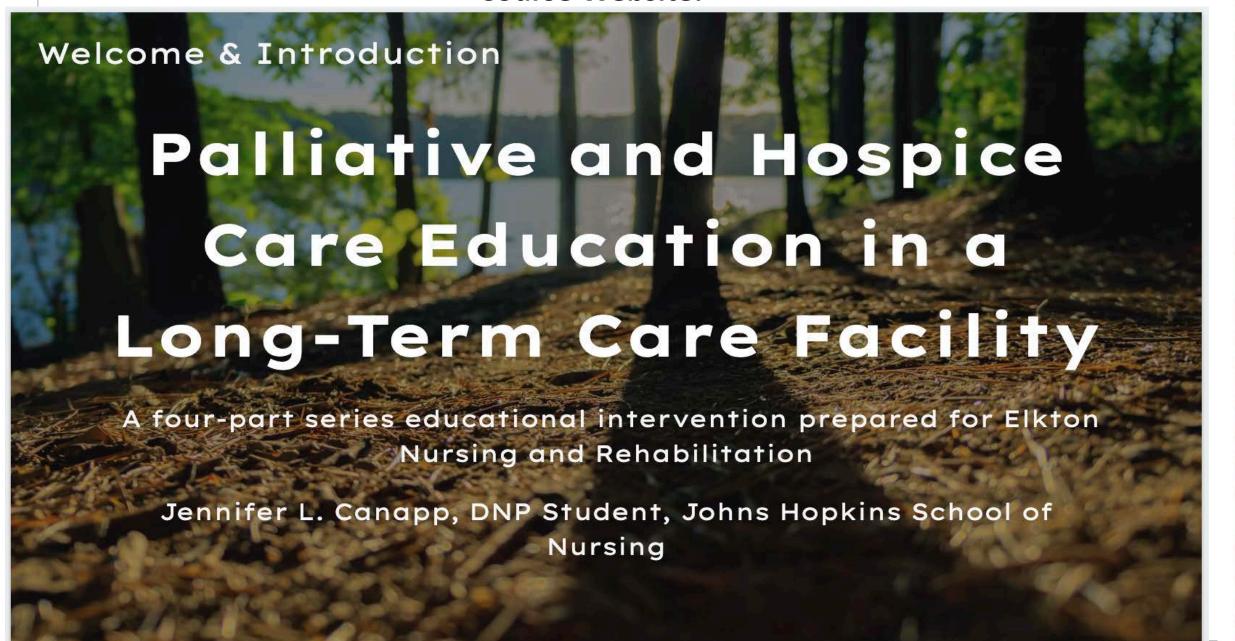
Setting: All facility nurses and patients who are eligible or receiving hospice/palliative care Intervention: Developed a 4-part educational series hosted on google sites for the nurses with asynchronous recorded content in hospice and palliative care. Topics include Introduction to Palliative & Hospice Care; Communication; Spiritual Support; Clinical Concerns. **Intervention:** Developed a palliative care education and resource website with a 4-part

recorded educational series for the nurses with topics including Introduction to Palliative & Hospice Care; Communication; Spiritual Support; Clinical Concerns. **Measurement Tool**: Validated 20-item Palliative Care Quiz for Nursing (PCQN) pre and posttest

survey was developed to measure nurses' knowledge on the topic. Additional questions were developed and added to the PCQN that measured confidence,

and attitudes. and percentages were used.

Analysis: Because of a small sample size, descriptive statistics **Course Website:**



Purpose & Aims

Purpose: To determine the effect of an educational intervention on the knowledge of and attitudes toward palliative and hospice care among nurses working at the Elkton Nursing & Rehabilitation Center, a long-term care facility in Maryland.

Aims:

- Improve nurses' knowledge of palliative and end-of-life care among nurses in a longterm care facility
- Improve nurses' confidence, and attitudes toward palliative and end-of-life care among nurses in a long-term care facility

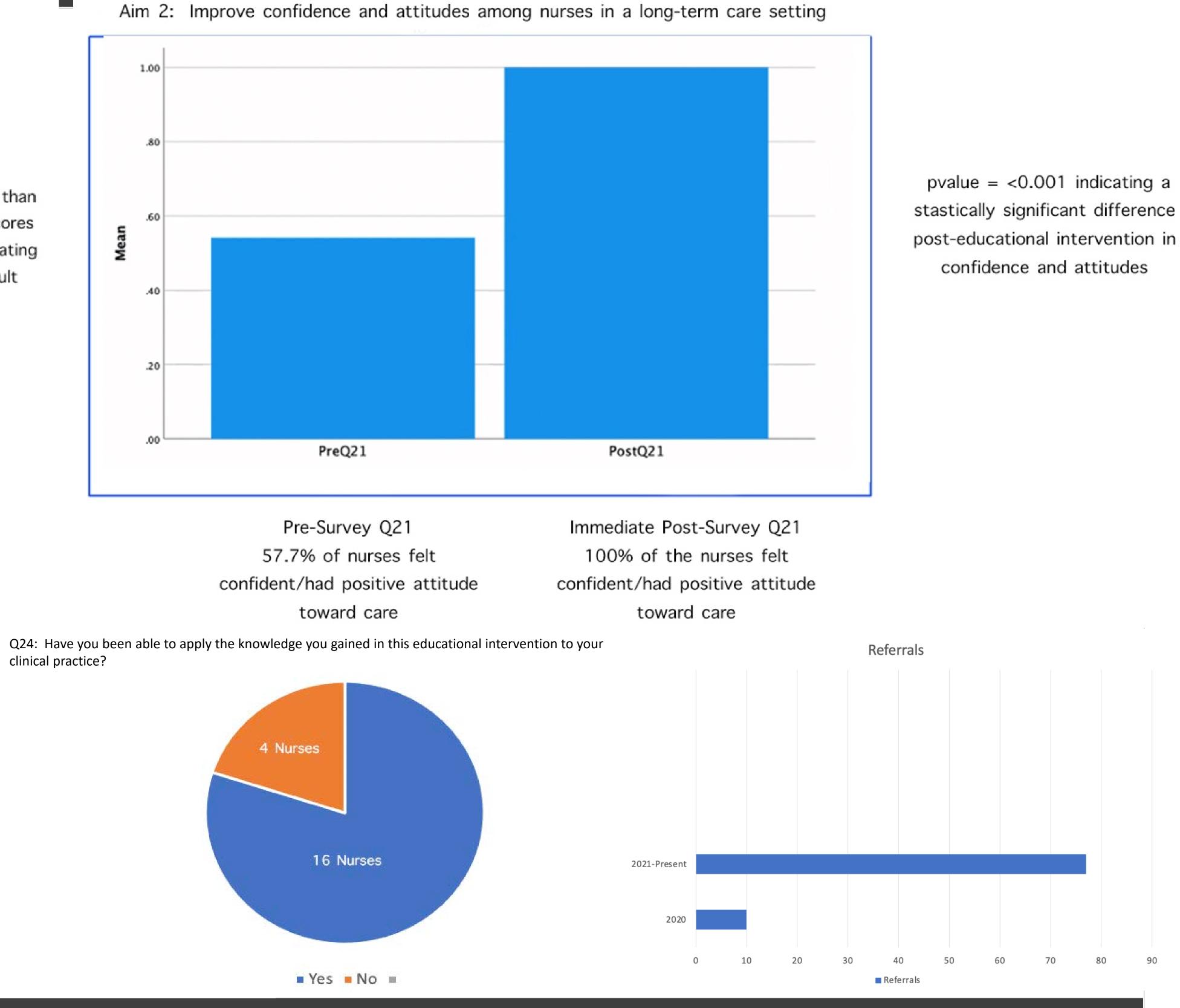


p<.001.

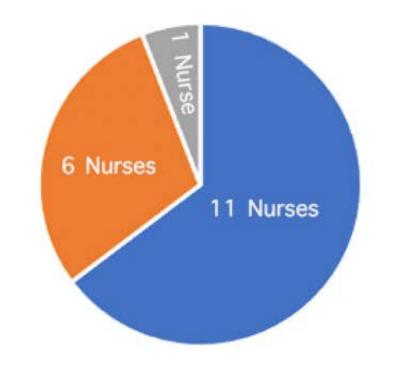
women (F)

Additional Data: Knowledge was retained at 30-days post educational intervention; The quantitative review revealed that eleven nurses (61%) felt the information was useful; six nurses (33%) felt the information was helpful or increased their preparedness for managing palliative and hospice patients

Results

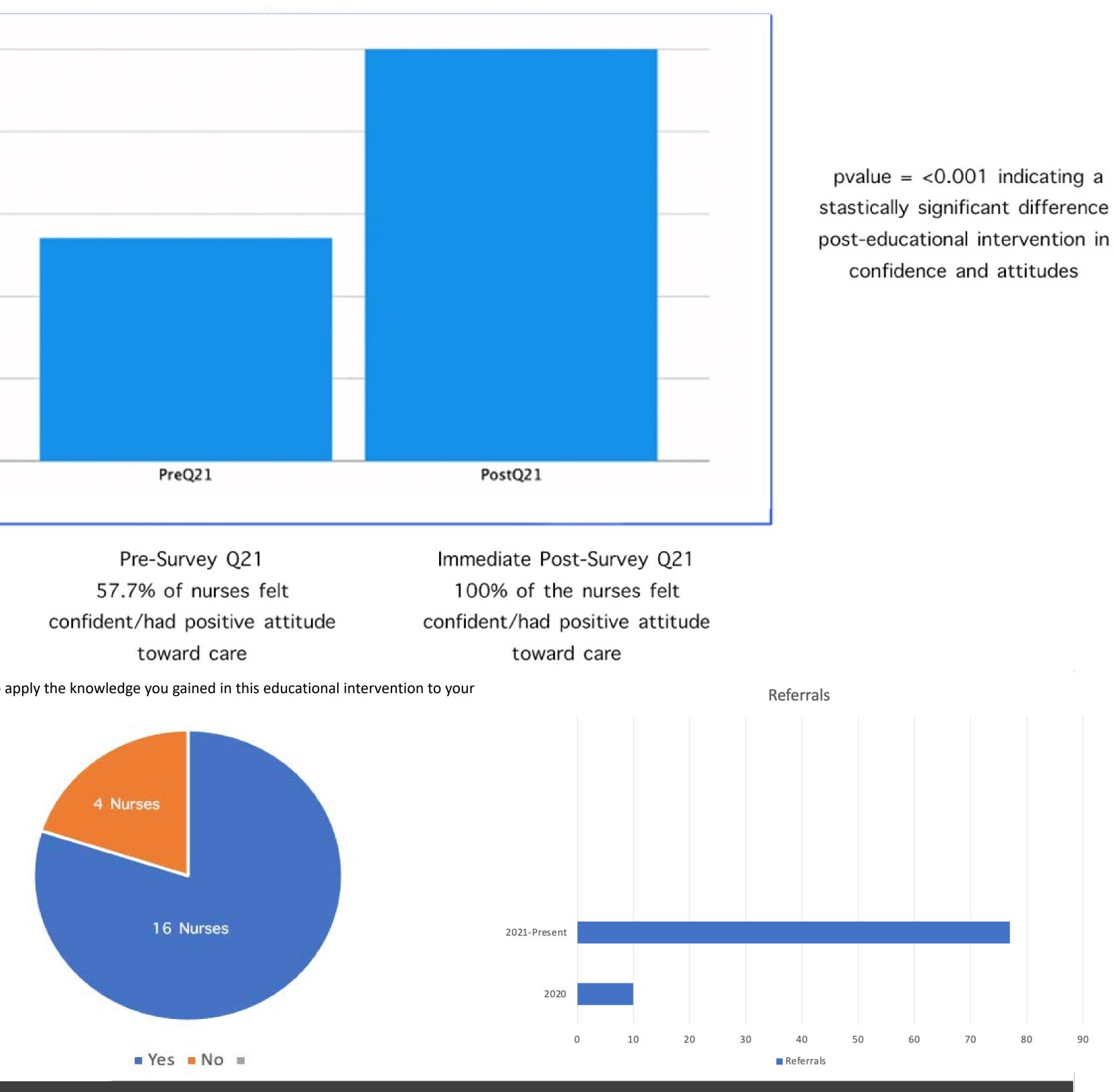


Q23: How has this educational experience enhanced or improved your knowledge of hospice and palliative care?



- Information was useful
- Information was helpful/increased prepardness
- Effect was not known

clinical practice?



Results

Findings: 100% (24 Nurses) of the nurses working at the facility completed the first and second survey. 22

Pre-survey scores were lower than

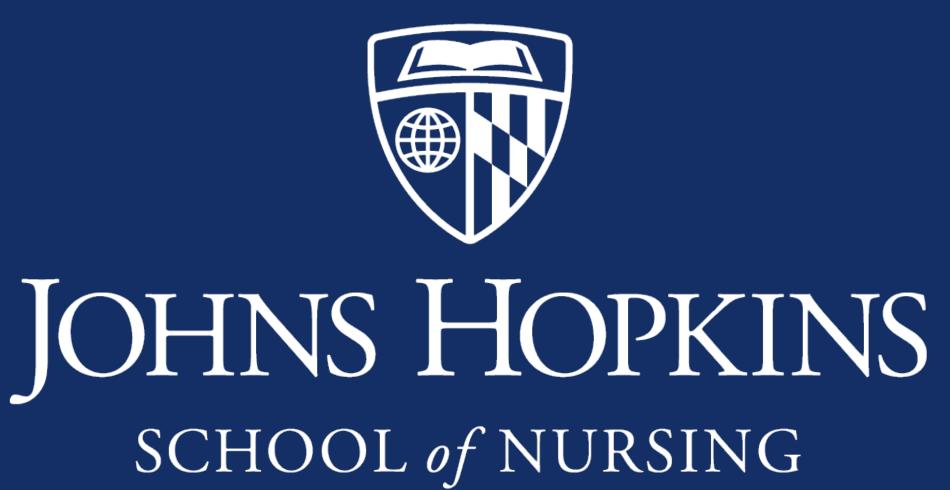
the Immediate post-survey scores

with a pvalue of <0.001 indicating

a statistically signficant result

Knowledge: The mean score of the pre-assessment questions (11.83) compared to the post-intervention scores (17.96) reveals a significant increase in knowledge post-survey vs. pre-survey, p<.001.

Confidence and Attitude: Additionally, there was a statistically significant difference in the proportion of respondents who reported confidence and attitudes pre- (57.1% confident) vs. post-survey (100% confident), • The use of an educational intervention increased nursing knowledge, improved attitudes and increased confidence in providing palliative care for residents of a longterm care facility. **SUSTAINABILITY:** The Director of Nursing, Nursing Home Administrator and Facility Educator have committed to continue to use and develop the palliative care education and resource website created for this project. Palliative care will be built into yearly competencies for nursing staff through the use of this website as well. • The facility nurse practitioner will integrate these into the Advanced Disease Symptom Management program used to identify patients who could benefit from palliative care with transition to hospice when needed. An incidental finding is that after this educational intervention was that hospice referrals increased from 10 total in all of 2020 (during COVID) to 77 referrals from January, 2021 to now with an exponential increase after the educational intervention.



Conclusions