

Title: Normalizing Palliative Care for Advanced Cancer Patients Through Education and Consistent Exposure.

Author: Adonica Racicot, RN, BSN, OCN

Background: Numerous studies demonstrate that early incorporation of palliative care leads to improved patient and family experiences when dealing with a cancer diagnosis. At the Dana Farber Cancer Institute satellite clinic at Milford Regional Medical Center, advanced cancer patients are referred late or not at all to palliative care.

Objectives: The purpose of this quality improvement project was to determine if education and daily palliative care discussions would increase palliative care referrals and improve provider and oncology nurse comfort levels in discussing palliative care with their patients.

Methods: For a period of three months, formal and informal education on the benefits of palliative care to patients was provided at nursing and provider team meetings. Nurses and providers were queried routinely as to whether their patients would benefit from a palliative care consultation referral.

Providers and nurses completed a six-question confidential descriptive survey pre and post intervention to determine comfort level in discussing palliative care and advanced care planning (ACP) and identification of the worry level of taking away hope and perceived feelings of giving up on patients.

Findings: Referrals increased by 53% from the preintervention period. The survey demonstrated a 7.5% increase in comfort discussing palliative care along with a 20.6% increase ($p = 0.02$) in awareness of how time affects introducing palliative care. A 4% increase in worry of taking away hope was noted while perceived feelings of giving up on patients decreased by 33%. Comfort level in discussing ACP did not change while perceived frequency of ACP discussions decreased by 12.5%.

Conclusions: Education and routine discussion of palliative care referrals may have contributed to an increase in referrals to palliative care. Ongoing education, discussion, and support to these areas would likely improve provider and nursing comfort.