Developing Nurses as Palliative Care Advocates Through Education

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Statement of the Problem

Nurses often feel unprepared to act as palliative care (PC) advocates because they lack knowledge of what PC is, are insecure identifying appropriate patients, and lack comfort communicating PC needs with the primary medical team.

Literature Review

- Research supports nurses as PC advocates, but notes multiple barriers that prevent them from assuming this role including: lack of knowledge about PC, screening tools, patient identification, and communication skills to request PC consult.[1-7]
- Access to PC continuing education can increase nurses' comfort, confidence, and ability to advocate for the service.[5]
- Small group work, Readers' Theater, and didactic reviews are effective for skill enhancement.[3,7]

Purpose

To determine if a one-hour didactic/interactive session can improve nurses' PC knowledge, skill in using standardized screening tools for patient identification, and comfort in requesting a PC consult.

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Methods

- Quality Improvement project at Valley View Hospital, Glenwood Springs, Colorado
- One-hour session (Fall 2018) using supportive modalities to improve 29 nurses' PC knowledge, familiarity with screening tools, and comfort requesting PC consult.[3, 8-11]

Didactic Information	Boost Criteria	Small Group Work	Readers' Theater
Palliative Care Services	1. Would you be surprised if this patient died in the next year? No= PC	2-4 participants per group	Participants each play a part to learn how to use new communication tools
Patient Selection	2.Does this patient have an advanced or progressive serious illness? Yes= PC	Reviewed patient scenarios and applied Boost Criteria and Disease Trajectory	Removes the pressure of improvisation
Disease Trajectories	Report results in IDT rounds	Large group discussion on use of inclusion criteria	Builds empathy for fellow teammates

- Analysis: 11-item survey compared pre/post session competencies focusing on degree of improvement.
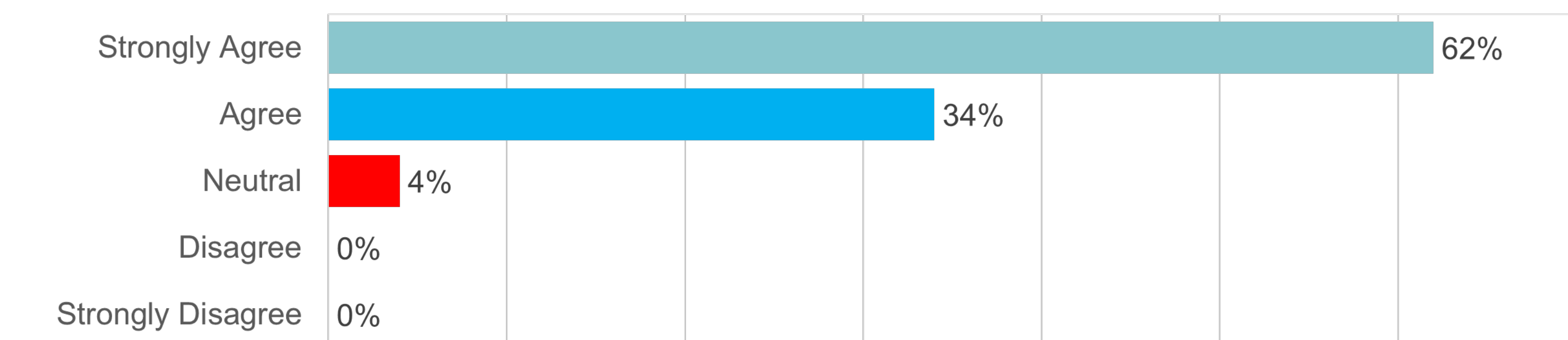
Limitations

- Small number of participants
- Single institution
- Initial positive impact may waiver over time
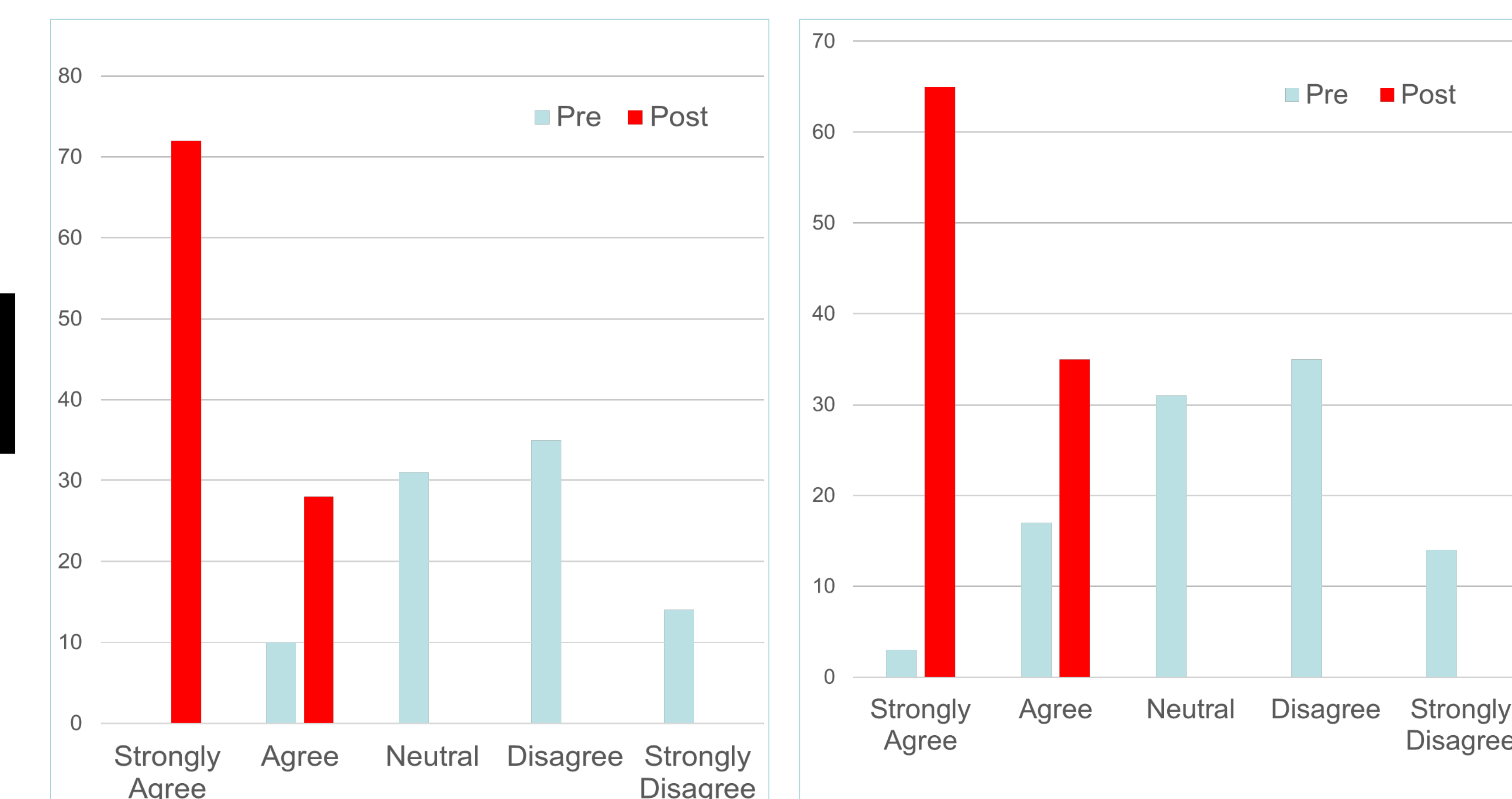- Requires phase 2 of this QI project to determine effect on PC referral

Results

Post session, RN has increased comfort identifying patients appropriate for PC and requesting consult

Strongly Agree	62%
Agree	34%
Neutral	4%
Disagree	0%
Strongly Disagree	0%

RN can identify patients who may benefit from a palliative care referral using the BOOST assessment tool

RN can describe what makes a patient an appropriate referral for PC to a member of the primary medical team and use communication skills to advocate for PC referral

Conclusion

A one-hour session that combines didactic information about PC, small group work, and readers' theater can increase a nurse's comfort, confidence, and ability to act as PC advocate. Phase 2 of the QI project will determine effect on PC referral.