

Abstract

Death is a common occurrence in the hospital setting, but studies indicate that nurses lack knowledge and are uncomfortable caring for seriously ill or dying patients. Education may improve nursing knowledge and care, but there may be many competing mandatory education requirements. Any widespread education program must be brief, easy to administer, and available to nursing staff working different shifts.

A 30-minute online introduction to palliative care (PowerPoint presentation with audio) was created to address this perceived knowledge deficit. Registered nurses (n = 23) working on a general medical unit participated in the project. The Palliative Care Quiz for Nursing (PCQN) was administered prior to the viewing the educational presentation, immediately after, and three weeks later. There was a significant deficit in nurses' baseline knowledge (average score on pretest 57.6%). There was a significant improvement in the mean average scores on the post-test quiz (72.2%) that was sustained (70.4%) when retested three weeks later. Nurses believed the education was informative and most indicated they would change their practice.

There was acceptance of the online format, although many nurses would prefer a live presentation. The results highlight deficiencies in palliative care nursing knowledge and provide direction for nursing palliative care educational endeavors in the hospital setting.

Background

- Competent nursing care is essential for those with advanced disease in the areas of pain and symptom management, and care of the imminently dying.
- Nurses must possess the knowledge and skills to care for people with advanced disease and at the end-of-life.
- Results from surveys of staff nurses indicated a lack of knowledge and comfort with the care of people with advanced disease (Autor, Storey, & Ziemba-Davis, 2013; Fox, 2007; Schlairet, 2009; White & Coyne, 2011).
- Nurses constitute the largest taskforce component in the hospital setting and work different shifts. Educational activities must be adjusted to accommodate the varying work schedules.
- Online education is utilized in many areas of health-care education, and studies are emerging about its use in palliative care education
- Based on the perceived need for a convenient, brief, easy to access, palliative care education for nurses, the following question was formulated: "Would an online introduction to palliative care improve inpatient nurses' knowledge about palliative care?"

Objectives

- Evaluate the effect of an online educational program on nurses' knowledge of palliative care
- Evaluate acceptability of content and mode of education

Methods

- Creation of thirty minute narrated PowerPoint presentation "Introduction to Palliative Care" based on National Consensus Project Guidelines for Palliative Care (2013)
- Delivery of presentation to 23 registered nurses (RNs) on a medical unit in an urban teaching hospital
- Pretest, posttest, follow-up posttest using the widely used, validated tool - Palliative Care Quiz for Nursing (PCQN) (Ross, McDonald, & Guinness, 1996)
- Verbal question and answer session to evaluate content and format; modified standardized evaluation form

Results

- Mean average pretest score 57.6% increased to 72.4% (p = .001) on posttest and was sustained at 70.4% (p = .001) on the follow-up posttest three weeks later.
- Participants reported that the presentation was informative and the online modality was acceptable.
- Most participants indicated they would change practice after the education. Examples of planned changes in behavior:
 - Discussion about palliative care with patients
 - More attention to pain/symptom management
 - Inclusion of family as part of unit of care
- Requests for future education included:
 - Pain Management
 - Spiritual Care
 - Communication skills

Mean percentage of Correct Responses: Palliative Care Nursing Quiz

| Question | Response | Pretest | Posttest | F-up |
|--|----------|--------------|--------------|------------|
| 1. Palliative care is appropriate only in situations where there is evidence of a downhill trajectory or deterioration. | F | 82.6% | 86.9% | 80.9% |
| 2. Morphine is the standard used to compare the analgesic effect of other opioids. | T | 47.8% | 100% | 90.4% |
| 3. The extent of the disease determines the method of pain treatment. | F | 47.8% | 30.4% | 33.3% |
| 4. Adjuvant therapies are important in managing pain. | T | 86.9% | 100% | 100% |
| 5. It is crucial for family members to remain at the bedside until death occurs. | F | 39.1% | 60.9% | 71.4% |
| 6. During the last days of life, the drowsiness associated with electrolyte imbalance may decrease the need for sedation. | T | 17.4% | 34.5% | 42.8% |
| 7. Drug addiction is a major problem when morphine is used on a long-term basis for the management of pain. | F | 43.5% | 69.6% | 61.9% |
| 8. Individuals who are taking opioids should follow a bowel regimen. | T | 100% | 100% | 100% |
| 9. The provision of palliative care requires emotional detachment. | F | 78.3% | 69.6% | 71.4% |
| 10. During the terminal stages of an illness, drugs that can cause respiratory depression are appropriate for the treatment of severe dyspnea. | T | 69.6% | 86.9% | 76.2% |
| 11. Men generally reconcile their grief more quickly than women. | F | 73.9% | 86.9% | 71.4% |
| 12. The philosophy of palliative care is compatible with that of aggressive treatment. | T | 30.4% | 69.6% | 42.8% |
| 13. The use of placebos is appropriate in the treatment of some types of cancer pain. | F | 65.2% | 91.3% | 95.2% |
| 14. In high doses, codeine causes more nausea and vomiting than morphine. | T | 52.2% | 86.9% | 80.9% |
| 15. Suffering and physical pain are synonymous. | F | 47.8% | 43.5% | 57.1% |
| 16. Demerol is not an effective analgesic in the control of chronic pain. | T | 47.8% | 86.9% | 76.2% |
| 17. The accumulation of losses renders burnout inevitable for those who seek work in palliative care. | F | 43.5% | 26.1% | 42.8% |
| 18. Manifestations of chronic pain are different from those of acute pain. | T | 73.9% | 73.9% | 76.2% |
| 19. The loss of a distant or problematic relationship is easier to resolve than the loss of one that is close or intimate. | F | 52.2% | 82.6% | 80.9% |
| 20. The pain threshold is lowered by anxiety or fatigue. | T | 52.2% | 56.5% | 47.6% |
| TOTAL PCNQ | | 57.6% | 72.2% | 70% |

Introduction to Palliative Care

Palliative Care

"Palliative care means patient- and family-centered care that optimizes quality of life by anticipating, preventing and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate patient autonomy, access to information, and choice."

National Quality Forum, 2006

Excerpt from PowerPoint presentation narration

"Welcome to this introduction to palliative care. Most of you probably already take care of people with advanced disease and those at end of life and may feel very competent in your care. For others you may have some questions or concerns about how to best care for these patients and their families. This brief introduction to palliative care may answer some of your questions or spark your curiosity to learn more."

Conclusions

- Findings are consistent with other studies. There is lack of nursing knowledge in the care of persons with advanced disease and at the end-of-life.
- A brief educational intervention improved nurses' knowledge about palliative care. Knowledge was sustained on retesting three weeks after education.
- Online education was acceptable to participants.
- Reported change in nursing behaviors included addressing the possibility of palliative care with patients. This is a step toward improving the care of people with advanced disease.

Implications for Education/Practice/Research

- Education should be tested on larger sample with follow-up tests at six months and one year to evaluate knowledge retention.
- Future quality improvement projects should evaluate changes in nurses' behaviors and changes in patient outcomes.
- Further research should compare the use of online education with instructor led education.

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