

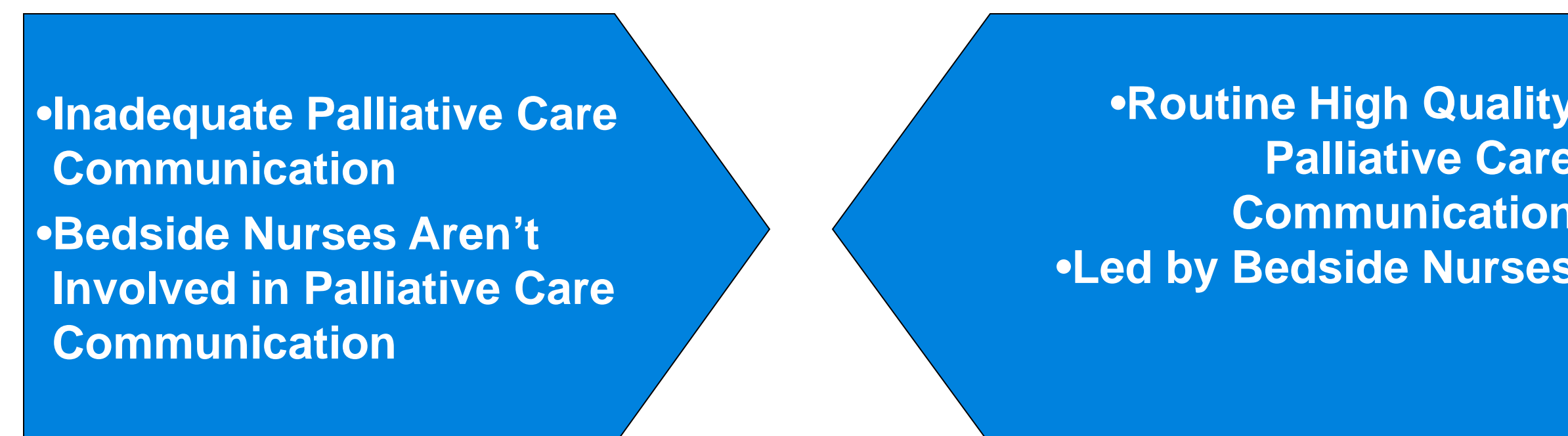
California Health Improvement Project (CHIP)

IMPACT: A Palliative Care Education Initiative for Acute Care Bedside Nurses

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Problem Statement and Underlying Causes

Seriously ill patients are frequently hospitalized. Unfortunately, many hospitalized patients receive inadequate palliative care communication, including emotional support and goals of care discussions. As patient's closest bedside clinicians, nurses are perfectly positioned to lead palliative care communication, yet they often lack the training to serve this role.



Project Description

Implemented a palliative care communication training program that empowers bedside nurses to lead communication about prognosis, goals of care, and palliative care among patients, families, and physicians. It is based on our successful IMPACT-ICU (Integrating Multidisciplinary Palliative Care into the ICU) program.

Goal and Objectives

Goal: The goal of this project is to equip bedside nurses on acute care units at UCSF Medical Center with communication tools to lead palliative care communication.

Output-oriented Objective: By September 2016, we will conduct 4 x 8 hour long workshops for acute care nurses at UCSF Medical Center, training a total of 60 nurses.

Outcome-oriented Objective: By September 2016, the percentage of 60 nurses on UCSF acute care units who report that they are "very confident" in their palliative care communication skills with patients, families, and physicians will increase from 20% to 50%.

Outputs & Outcomes

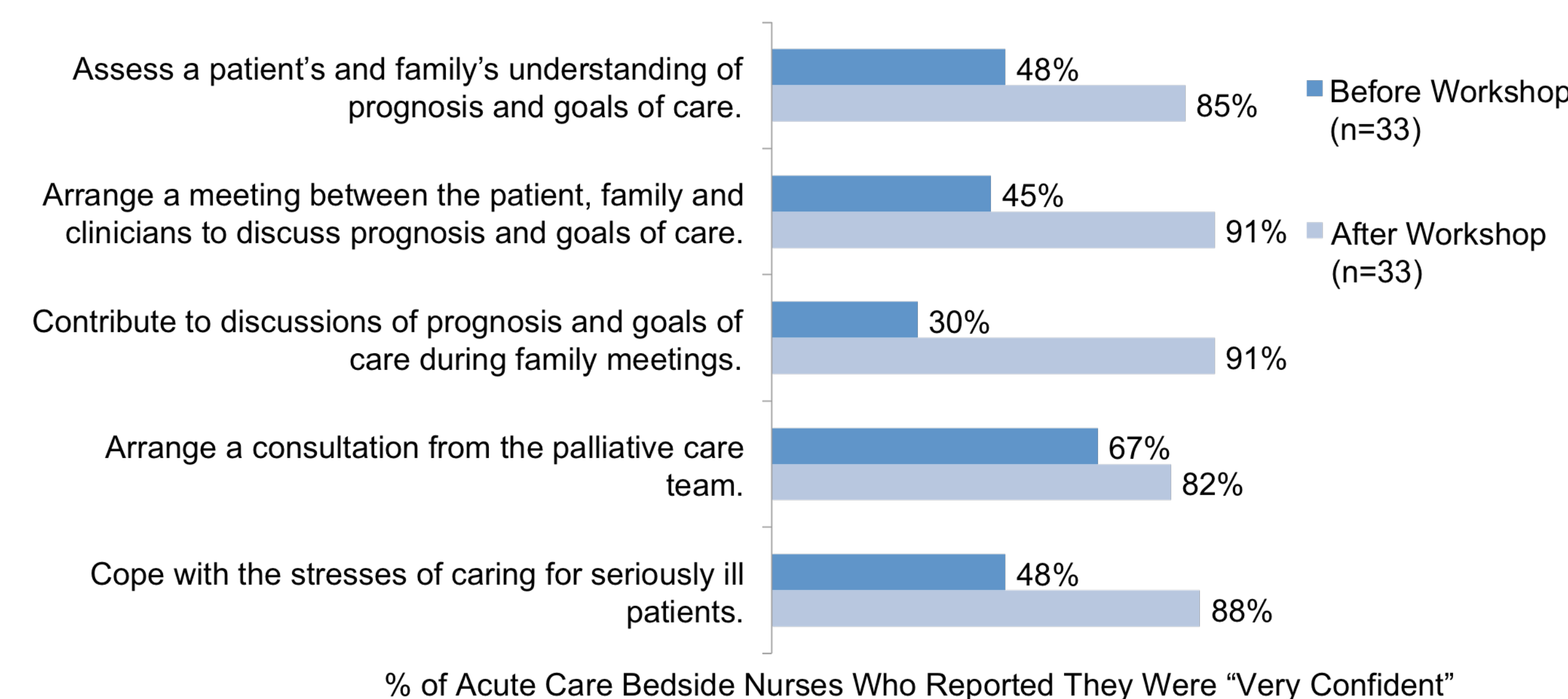
Outputs Achieved

We adapted the IMPACT curriculum from the ICU to the acute care setting, and conducted two x 8 hour long communication workshops for acute care bedside nurses (in May and November 2015). A total of 33 nurses completed the workshop.

Outcomes Achieved

Among nurses who completed the workshop, the percentage who reported that they were "very confident" in palliative care communication skills increased from 30-67% before the workshop to 82-91% after (Figure). Comments revealed that the workshop clarified nurses' role in palliative care, provided practical tools they could bring back to their practice.

Figure: Confidence in Palliative Care Communication. Participants rated their confidence before and after the workshop.



Selected Comments from Workshop Evaluations

- "I now have more grasp of what palliative care is and how to bring it about in my plan of care."
- "I realized what a big opportunity I have as a role of a nurse to help bridge the gaps in conversation among the patient, family, and medical team."
- "I feel better equipped to advocate for a patient/family's goals using skills: open questions and reflection."
- "It is a valuable role that nurse plays, the nurse is in many ways a catalyst."
- "I appreciate the role-play to get better ideas and ways to approach families and doctor."
- "I will certainly use the "skills to practice" tools, they are very easy to take back to my daily practice."
- "Discussing burn out was one of the most useful aspects. Its reassuring to hear that others are struggling too...Feeling less alone."

Lessons Learned

- Nurses' training and intimate, constant presence at the bedside makes them natural providers of palliative care.
- Hospital palliative care consultation services can expand their reach by training and supporting bedside nurses.
- Bedside nurses welcome palliative care communication training opportunities.
- Bedside nurse palliative care champions play a crucial role in creating and implementing trainings for their peers.

About My Organization

University of California, San Francisco (UCSF) Medical Center is an urban, tertiary referral center and also provides primary care services to patients living in the San Francisco area. My project was conducted in the inpatient hospitals, Moffitt-Long and Mission Bay. These hospitals together have a total of 689 beds, with the focus of much of the hospital care being on subspecialty referral level of care. Many of the patients hospitalized at UCSF Medical Center have serious illnesses and are receiving complex specialty treatments such as transplants, chemotherapies, and surgeries. Thus, the focus of this project is to train the front-line nursing staff to provide primary or generalist palliative care for this complex population.

Contact Me

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