

Attitudes of Nursing Staff in a Maternal Child Unit Regarding Palliative Care



L. McAnear, MSN, RN, NNP-BC, E. Carter-Griffin DNP, RN, ACNP-BC R. Gilder MS, RN

Problem Area

Death in the neonatal period affects not only the patient and the family, but the nursing staff. Lack of education in palliative care puts undue stress on the staff and causes negative attitudes.

- Decreases morale of the staff
- Patient care is compromised
- Lack of policy and guidelines negatively affect the staff and patient.

Project Purpose or Objective

To determine whether implementing education/training on palliative care compared to no education, affect the attitudes and comfort level regarding end of life care.

Framework

Palliative Care (supportive and end of life care)

A: Establish eligibility of fetus or baby for palliative care

B: Family care

C: Communication and

documentation

(British Association of Perinatal Medicine, 201)

Methods

Design: Pretest, posttest, 30-day posttest design measured nurses comfort and involvement levels prior to an educational intervention, immediately after the intervention and 30-days post intervention.

Population: The sample was a convenience sample of nurses from an inpatient hospital.

Measures: The Bereavement/End of life Attitudes About Care of Neonatal Nurses Scale (BEACONNS) measured comfort level and factors influencing involvement with families.

Procedure: One hour educational training sessions were held. The information presented was presented as a PowerPoint. Prior to the session, the staff took a pretest. Immediately following the session they took a posttest and repeated the same posttest 30 days later. Statistical Analysis: Kruskal Wallis test

Results

Comfort Score: Null hypothesis is rejected. Scores were higher at the post-intervention and the 30 day post-intervention than the pre-intervention (Kruskal-Wallis, N 97, KW 15.387, df 2, p <0.05). There was not a statistical significance between the immediate post intervention and the 30 day post-intervention.

Involvement Score: Null hypothesis is retained. There is not a statistical significance at 95% confidence, p=0.106.

Total Score: Null hypothesis is rejected (Kruskal-Wallis, N 97, KW 12.205, df 2, p <0.05). Scores were significantly higher at post intervention group compared to pre-intervention (p<0.05), and were also significantly higher at 30-day post intervention (p<0.05), yet were not significantly different between post and 30-day post test scores.

Practice Implications

- •Provide training and education in palliative care to all nurses.
- •Continue researching how to promote a positive change in attitudes towards end of life care
- •Continuously provide learning opportunities for the staff
- •Implement policy and procedures for palliative care

Limitations

- Small sample
- Decreased generalizability
- Short educational sessions
- Not completing all questions on survey's
- •Seasonal variation is the biggest threat to validity.

Conclusions

The implementation of proper education will change the nurse's attitudes, comfort level and improve the overall experience of the staff, family and patient

(Zhang & Lane, 2013).