Effectiveness of an Educational Intervention on Palliative and End-of-Life Care for registered Nurses in Lebanon

May Khoury, RN, MSN,
Mary Arevian, RN, MPH, Corresponding author,
Souha Fares, PhD,
Ghina Al Khatib, RN, MSN
BACKGROUND

- Palliative Care (PC) and End-of-Life (EOL) care is evolving worldwide and in Lebanon in particular. (Grant et. al. 2009)
- PC provides as good or better outcomes than curative care alone, cost effective, alleviates pain and suffering for patients and caregivers alike. (Daher et. al. 2013)
- Kazanjian (2012) evaluated a program for educating RNs to embrace PC in a community hospital. The participants reported improvement in confidence and comfort and empowered them to treat patients effectively.
In Lebanon, for palliative care services to become widely available, affordable, and socially acceptable, education of patients and professionals is urgently needed.

It is only through offering a course in Palliative and End-of-Life Care that nurses can make an impact upon the quality care of their patients and families. (Daher et. al. 2013).
A National Committee for Pain Relief and Palliative Care was created by the Ministry of Public Health (decree no 1/486) in 2011.

The focus of this committee was on four broad areas: Education; Practice; Research and Public Policy.
Literature on evaluations of educational intervention for practicing nurses on PC and ELO care is scarce.
The purpose of this article is to assess the effectiveness of an educational intervention on palliative and end-of-life care for nurses at the American University Beirut Medical Center (AUBMC) and recommend future educational programs.
METHOD

- Design

- A quasi experimental pre- post-test to assess the effectiveness of a PC continuing educational intervention.
METHOD

- Sample

A convenient sample of 45 registered nurses selected from the American University of Beirut, Medical Center (AUBMC) dealing with Palliative and End-of-Life care from different clinical units participated in a continuing education workshop.
Educational Program

- The Basics in Palliative and End-Of-Life Care workshop was a one-credit course.
- Goal: to equip nurses with knowledge, attitudes, and skills to provide the best possible Palliative and end-of-life care to their patients and families.
Objectives of the educational program

1. Practice end-of-life care for clients under their care.
2. Identify facts and challenges of pain relief and palliative care.
3. Critically analyze gaps, elements, models and key concepts of PC and ELO care.
4. Evaluate types of pain and accordingly implement pain management modalities.
5. Develop skills in communicating bad news.
METHOD

- Facilitators/faculty:
  Local PC experts physicians and nurses provided lectures.

Content adapted from the EPEC Education for Physicians of End of Life Care Curriculum.
Instrument:

Each participant completed a Pre-Post-test. A total of 34 multiple choice questions prepared by the lecturers. In addition to the objective test process evaluation was conducted to evaluate the overall content and organization of the educational offering.
METHOD

▶ Analysis

Demographic characteristics of participants were summarized using descriptive statistics.

Total test scores, before and after attending the sessions were summarized by means, standard deviations (SD) and range and compared using the paired t test...

A two-tailed test was used and a p-value less than 0.05 was considered significant.
Results

- Demographics:
  - Majority of the participants were females (77.8%),
  - Most of them working in the oncology units (44.4%),
  - Followed by medical-surgical units (33.1%).
  - Critical care units (13.3%) and five nurses from the multiple sclerosis and post anesthesia units.
## Results

### Table 1 - Demographic characteristics of the attending nurses

<table>
<thead>
<tr>
<th></th>
<th>Count</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender (Female)</td>
<td>35</td>
<td>77.8</td>
</tr>
<tr>
<td><strong>Unit</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oncology</td>
<td>20</td>
<td>44.4</td>
</tr>
<tr>
<td>Medical surgical</td>
<td>14</td>
<td>31.1</td>
</tr>
<tr>
<td>Critical</td>
<td>6</td>
<td>13.3</td>
</tr>
<tr>
<td>Other*</td>
<td>5</td>
<td>11.1</td>
</tr>
</tbody>
</table>

*Other include multiple sclerosis, post anesthesia care unit and respiratory care unit
RESULTS

- 39 participants completed both the pretest and the posttest.

- Mean pretest score of 48.53 (SD = 9.23) and post-test score of 70.05 (SD = 12.35). The minimum score on the pretest was 29 maximum 65 while on the post-test the minimum and maximum scores were 47 and 88 respectively.

- The paired t test showed significant increase between the pre and post test scores \( t (38) = 11.07, p < 0.001 \) with a 95% confidence interval for the mean difference of (17.58, 25.45).
results

Table 2. Difference between the pretest and posttest scores (N = 39)

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Pre</th>
<th>Post</th>
<th>Mean difference posttest-pretest</th>
<th>95% CI, mean difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total test score</td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td></td>
<td>49.30</td>
<td>8.95</td>
<td>70.54</td>
<td>12.62</td>
</tr>
</tbody>
</table>
Results of process evaluation

- All participants were satisfied with the program, found it very beneficial and indicated that they learnt a lot, especially communication skills, pain management and support of the caregivers.

- Participants enthusiasm and confidence indicated the program constituted a good learning experience for them.

- However, expressed concern that the material was too much to be covered in one day and recommended to offer it over two days.
Discussion

- Although evaluation of the effectiveness of an educational initiative was a first attempt, results indicated positive findings in knowledge, attitudes, and skills for PC and ELO care among participants.

- It is worth mentioning that evaluative studies on PC and ELO care are scarce in nursing literature for comparison. One study by Kazanjian et. al. (2012) reported positive findings among nurses.
LIMITATIONS

Test not validated however; the questions were based on current PC and EOL care literature, identified by the experts in the area.

- Participants were chosen by nurse educators based on their need and contact with patients that require Palliative and end-of-Life care.
STRENGTHS

- Added to the limited body of evaluation of educational programs PC-ELO care for health professionals specifically nurses.

- Collaboration School of Nursing and AUBMC.

- Interdisciplinary partnership between RNs at AUBMC and academic faculty in nursing and medical school.
Implications for Nursing

- For nurses to feel comfortable, confident and efficient in implementing PC and ELO care to improve clinical practice and quality care. Providing structured workshops are important.
Conclusion

There is a clear need to develop and evaluate educational interventions to improve and deliver quality PC and ELO care for clients suffering from cancer or other incurable conditions.
ACKNOWLEDGEMENT

- RNs participating and sharing their experiences.

- The Lecturers, for their efforts, time and enthusiasm.
Thank You


