**Integration of Palliative Care Practices in an Emergency Department: A Standardized Palliative Care Referral Process**

Andrea C. Brown, DNP, RN, FNP-C

**PROJECT PURPOSE**
+ Address the gaps in the current practice and integrate palliative care (PC) practices in the Emergency Department (ED)
+ Development of a Standardized PC Referral Process

**METHODOLOGY**
- Setting: 500-bed academic hospital located in metro Atlanta.
- Needs assessment identified a lack of a standardized process for PC referrals
- Problem identified
- Multidisciplinary team:
  - PC Multidisciplinary Team (Director, Physician, NP)
  - ED Multidisciplinary Team (Medical Director, Nursing Director, Chief NP, NP, Nursing Educator, Social Worker, Pharmacist, Chaplain)
  - Additional Team Members (Physicians, Acute Care NP, Oncology NP)
- Development of an educational handout
- Inservice utilizing PC educational handout and PC Quiz for Nursing (PCQN)
  - Attendees: 3 Nurse Practitioners, 2 Registered Nurses
  - Pre and Post testing PC Quiz for Nursing (PCQN)
- Development of a Standardized Palliative Care Referral Process

**PROBLEM/BACKGROUND/ROL**
Absence of a standardized PC consult/referral process
ED staff lack of knowledge of PC practices results in a discontinuity in care for these patients
ED patients with PC needs experience delay or omission of a PC referral
PC services not readily available in the ED setting

**THEORETICAL FRAMEWORK**
Rosswurm & Larrabee EBP Model

- Assess the need & readiness for practice change
- Ask an answerable research question
- Synthesize best evidence

- Evaluate practice change
- Implement practice change
- Design practice change

**RESULTS/EVALUATION**
1st phase
Development of educational handout
PCQN tool was utilized at educational in-services
Pre-testing & post-testing for measurement of education
Inferential statistics used to determine significant differences between pre and post testing

![Graph showing mean and 95% CI for Pre and Post phases](image)

2nd phase
Implementation of standardized PC referral process
Evaluation - referral tracking system, results pending

**PRACTICE IMPLICATIONS**
This project demonstrated that PC education of ED staff is an important aspect in the integration of PC practices in the ED.

**Future implications**
The findings of this project could inform the development of educational interventions and implementation of a standardized PC referral process will increase access to PC for patients in the ED with PC needs.