

FW: CAPC National Seminar 2017 - Poster Submission

From Coletti, Donna

To Trovato, Gina, Generales, Nicole

Date 2017/08/08 23:17

Subject: FW: CAPC National Seminar 2017 - Poster Submission

Congratulations Ladies!!

Please read the below notice as the abstract has been accepted for a poster @ CAPC 2017.

Let's talk in the next few days to discuss this exciting news.

Dr. C

From: hallia.baker@mssm.edu [hallia.baker@mssm.edu]

Sent: Tuesday, August 08, 2017 12:10 PM

To: Coletti, Donna

Subject: CAPC National Seminar 2017 - Poster Submission

Dear Donna,

Thank you for your abstract poster submission to the CAPC National Seminar 2017. We are pleased to inform you that your abstract poster submission has been accepted for the poster session at the CAPC National Seminar!

We value the quality of your abstract work and anticipate seeing your work on display at the poster session. Conference attendees consistently appreciate the poster session as one of the highlights of their learning experience at the Seminar.

Details regarding the poster session along with preparation guidelines will be forwarded to you within the upcoming months.

Please confirm your acceptance to present your abstract via email to Derrick Sabater at derrick.sabater@mssm.edu and/or Hallia Baker at hallia.baker@mssm.edu by August 31, 2017.

Once again, thank you for your submission; we look forward to your participation and seeing you in November in Phoenix.

Brynn Bowman, MPA, Andy Esch, MD

Center to Advance Palliative Care

Seminar Planning Committee

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Improving Self-Efficacy for Palliative Care Through Simulation

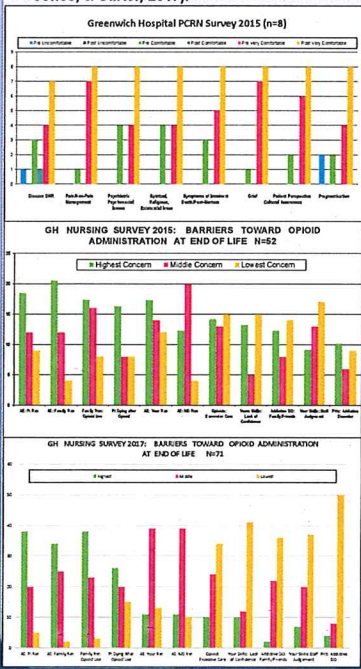
Nicole Generales BSN, RN-CHPN; Gina Trovato BSN, RN; Donna Coletti MD, MS
November 2017



Background

Greenwich Hospital is a 206 bed regional hospital affiliated with Yale New Haven Health System (YNHHS) with a multifaceted Palliative Care (PC) service. The service is comprised of a physician, chaplain, and an APRN that provides a dedicated educational program for interns, residents, physicians, clinical nurses and the Palliative Care Resource Nurses (PCRN).

A PCRN Self-Assessment Survey (Coletti et al., 2015) and hospital-wide nursing surveys (Coletti et al., 2015; Coletti, 2017) revealed a knowledge deficit in palliative and EOL care, consistent with the literature (Lippe, Volker, Jones, & Carter, 2017).



Objectives

Goal:

- Create an original simulation and assessment program to improve practitioner self-efficacy and knowledge about palliative care.

Learning Outcomes:

At the end of the program, participants will be able to:

- Identify appropriate patients for palliative care and assess the family's understanding of the patient's condition
- Explain the concept of palliative care, distinguish it from hospice care, and feel empowered to suggest this as an option for support to the patient and family if appropriate
- Integrate a conversation tool (i.e., Vital Talk tools such as Ask Tell Ask, Tell Me More, I Wish, etc.).

Methods

Pre- and post-survey: Palliative Care Self-Efficacy Scale (PCSES) survey (Phillips, Salamonson, & Davidson, 2011)

Palliative Care Self-Efficacy Scale				
Please rate your degree of confidence with the following patient/family interactions and patient management topics, by rating the relevant tool below:				
	1 = Need further basic instruction	2 = Confident to perform with close supervisor/coaching	3 = Confident to perform with minimal consultation	4 = Confident to perform independently
1	Asking patients questions about the dying process			
2	Supporting the patient or family member when they become upset			
3	Informing people of the support services available			
4	Discussing different environmental options (eg. hospice, home care)			
5	Discussing patient's wishes for after their death			
6	Informing family about the effects of patient medication			
7	Reacting to reports of pain from the patient			
8	Reacting to and coping with terminal dyspnea			
9	Reacting to and coping with terminal dyspnea (in wilderness)			
10	Reacting to and coping with nausea/vomiting			
11	Reacting to and coping with reports of constipation			
12	Reacting to and coping with limited patient decision-making capacity			

Simulation Program Design

- Pre-brief and orientation to simulation lab
- Simulation scenario is 7-10 minutes
- Participant receives report on patient (mannequin) and meets spouse (live actor)
- Debrief
- Education session
- Second simulation scenario
- Debrief
- Education session
- Handouts provided to supplement learning
- Simulation program length is 3.5 hours

Results

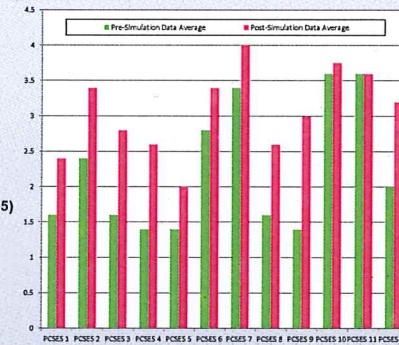
Palliative Care Self-Efficacy Scale (n = 5)

Pre-Test: Lowest perception of self-efficacy:

- Discussing different environmental options
- Discussing patient's wishes after their death
- Reacting to and coping with terminal dyspnea

Post-Test: Improvements in self-efficacy:

- Informing people of support services available (P<.05)
- Discussing different environmental options (P<.05)
- Reacting to and coping with terminal dyspnea (P<.05)



Implications

- Two simulation scenarios completed successfully (second more complex)
- Participants agreed or strongly agreed that learning will be applied in work setting
- Post-test scores support learning occurred
- Future considerations:
 - Increase sample size
 - Offer educational opportunity for all practitioners in hospital
 - Consider additional metrics to measure

Limitations

- Sample size is small and not generalizable

References

Coletti, D. (2017). *Nursing perspectives on opioid administration for pain management at the end of life*. Unpublished manuscript.

Coletti, D., Leaf, B., Archer, H., Acevedo, K., Culmone, K., & Hansley, M. (2015, November). *Identifying and addressing nursing barriers in EOL care*. Poster session presented at the meeting of the Center for Advancing Palliative Care, San Antonio, TX.

Lippe, M., Volker, D., Jones, T., & Carter, P. (2017). Evaluating end-of-life care education within nursing programs: A method for targeted curriculum evaluation. *Journal of Hospice & Palliative Nursing*, 19(3), 266-274. doi: 10.1097/NJH.0000000000000341

Phillips, J., Salamonson, Y., & Davidson, P. M. (2011). An instrument to assess nurses' and care assistants' self-efficacy to provide a palliative approach to older people in residential aged care: A validation study. *International Journal of Nursing Studies*, 48(9), 1096-1100. doi: 10.1016/j.ijnurstu.2011.02.015