

Improving Nursing Knowledge of Comfort Modalities for Patients Receiving Hospice Care

Ashley L. D'Andrea BSN, RN

Lehigh Valley Health Network, ashley_1.dandrea@lvhn.org

Gabriela DePaulo BSN, RN

Lehigh Valley Health Network, gabriela.depaulo@lvhn.org

Follow this and additional works at: <http://scholarlyworks.lvhn.org/patient-care-services-nursing>



Part of the [Nursing Commons](#)

Published In/Presented At

D'Andrea, A., & DePaulo, G. (2016, August 19). *Improving Nursing Knowledge of Comfort Modalities for Patients Receiving Hospice Care*. Poster presented at LVHN Vizient/AACN Nurse Residency Program Graduation, Lehigh Valley Health Network, Allentown, PA.

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.

Improving Nursing Knowledge of Comfort Modalities for Patients Receiving Hospice Care

Ashley D'Andrea, BSN, RN

Gabriela DePaulo, BSN, RN

Lehigh Valley Health Network, Allentown, Pennsylvania

BACKGROUND / INTRODUCTION

- Initiation of Inpatient Hospice and Hospice Response Team in November 2015.
- Medical/surgical nurses unfamiliar with comfort measures in patient care.
- Nurses verbally admit to feeling uncomfortable with managing needs of patients at the end of life.

PICO

For medical/surgical patients receiving inpatient hospice care, does implementation of multiple comfort modalities for pain management compared to current practice yield increased nursing satisfaction with care and pain management?

METHODS

Qualitative and quantitative survey distributed to 6K nurses prior to education. Algorithm for comfort measures and hospice packet distributed upon admission to 6K.

Same pre-survey administered three weeks after re-education with hospice packet to assess learning.

OUTCOMES

Improvement in 6K nurses' comfort level of providing care to inpatient hospice patients.



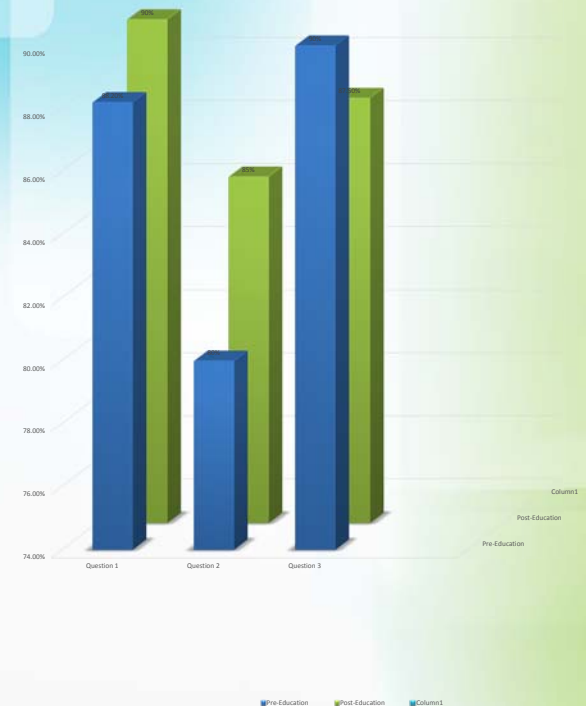
CONCLUSIONS

- 1.8% improvement in nurses' feeling that they effectively managed pain.
- 5% improvement in nurses' ability to identify ways to improve comfort in inpatient hospice patients.
- 2.5% decrease in nurses' effectiveness in implementation of comfort measures after identification.

REFERENCES

- Bowers, T. A., & Wetsel, M. A. (2014). Utilization of Music Therapy in Palliative and Hospice Care. *Journal Of Hospice & Palliative Nursing*, 16(4), 231-239 9p. doi:10.1097/NJH.0000000000000060
- Schofield, P., Smith, P., Aveyard, B., & Black, C. (2007). Complementary therapies for pain management in palliative care. *Journal Of Community Nursing*, 21(8), 10-14 4p.
- Subramanian, P., Allcock, N., James, V., & Lathlean, J. (2012). Challenges faced by nurses in managing pain in a critical care setting. *Journal Of Clinical Nursing*, 21(9/10), 1254-1262 9p. doi:10.1111/j.1365-2702.2011.03789.x
- Uronis, H. E., Currow, D. C., & Abernethy, A. P. (2006). Palliative management of refractory dyspnea in COPD. *International Journal of COPD*, 1(3), 289-304. doi: 10.2147/copd.2006.1.3.289

RESULTS



© 2016 Lehigh Valley Health Network

A PASSION FOR BETTER MEDICINE.™

610-402-CARE LVHN.org