

Conversations Before the Crisis:

The Impact of an Educational Intervention on Goals of Care Discussions

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preparing palliative care professionals

Statement of the Problem

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Effectively eliciting patient goals of care is a skill that requires training, practice, and feedback, yet most healthcare organizations in the mid-south do not provide training on guiding goals of care (GoC) conversations. Education in conducting value-based GoC conversations presents opportunities for improved patient outcomes.

Literature Review

- A literature review revealed a lack of high-quality research evaluating the effects of educational interventions on clinician comfort.
- While many articles focus on the effectiveness of communication training related to the occurrence, quality, and documentation of GoC conversations, few concentrate on clinician comfort with conducting GoC discussions.

Purpose

To determine the impact of an educational intervention on clinician comfort in conducting high-quality value-based GoC conversations.

Methods

Population: Clinicians in the mid-south

- 9 APNs, 6 RNs, 3 LPNs from various specialties
- Average of 1-3 GoC conversations per week
- 72% with 11+ years of healthcare experience

Implementation: Seven 45-minute educational sessions presented to small groups of clinicians

Setting: Online via video platform

Timeline: Summer 2022

Evaluation: Participants completed a 13-item pre-/post-session survey to rate their comfort in conducting

value-based GoC conversations

Analysis: Change in clinician comfort post session



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Findings

- 33 clinicians completed a pre-session survey, 22 attended an educational session, and 18 completed a post-survey
- 27% increase in ability to define "value-based" GoC
- 100% of post-survey respondents felt comfortable having value-based GoC conversations versus 79% pre-survey
- 21% increase in comfort communicating prognoses
- 39% increase in comfort using prognostic tools

Implications

- A short educational session can increase clinician comfort in conducting GoC conversations.
- Focusing future research on settings such as the emergency department may present opportunities for improved patient outcomes in other populations.

Limitations

- Inconsistent access to clinicians resulted in a limited sample size.
- There was a disproportionate number of returned pre-surveys compared to post-surveys.