



Inpatient Palliative Care in a Rural Community Hospital: A Needs Assessment



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Statement of the Problem

- Inpatient palliative care is available in 72% of hospitals with >50 beds in the U.S.¹
- Rural hospitals are less likely to have dedicated palliative care services.²
- Palliative care provision is limited by lack of understanding and infrastructure.³

Background/Literature Review

A search of relevant evidence from 2015-2020 supported the positive effects of an inpatient palliative care service. It also identified common barriers, including lack of knowledge and training with respect to palliative care.

Purpose/Aims

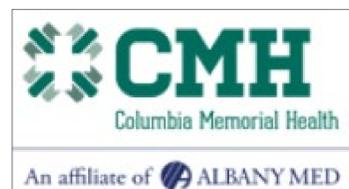
- This quality improvement's purpose is to:
1. Administer a palliative care needs assessment survey
 2. Evaluate palliative care literacy among providers
 3. Identify barriers to provision of palliative care
 4. Identify educational opportunities for providers related to palliative care

Methods

- **Design:** Needs assessment querying 19 areas of palliative care knowledge/interest
- **Sample:** Inpatient health care providers (n=164) **Setting:** A 192-bed community hospital in Hudson, New York
- **Data analysis:** Descriptive statistics
- **Timeline:** 4/1/22-5/15/22

Findings/Results

Responders: MDs, APPs, RNs, and SWs
Response rate: 44%
Satisfied with current PC services: 33%
Misinformed about current services: 33%
 Many had limited understanding of specific PC services available in the hospital.
Communication: Nearly 20% expressed discomfort speaking with patients about limited prognosis.
Prior PC education (2 year look back): 55%
Preferred training modalities: Web-based and lunchtime modules
Obstacles to PC training: Scheduling and compensation
Population most needing PC: Elderly



Implications

- Accurate knowledge of the nature of palliative care and currently available services is limited, but there is interest in future education about the subject.
- Data gathered in this survey offer a guide to the development of future palliative care education modules.

Limitations

Very few hospital administrators completed the survey. Due to the current nursing shortage, many short-term nurses did not receive the survey. Both factors limit the generalizability of the data.

Acknowledgements/References

Mentors: Maurice Scott, M.D.; Regina Fink, PhD, APRN
References:

1. Center to Advance Palliative Care. (2019). America's care of serious illness: A state-by-state report card on access to palliative care in our nation's hospitals. <https://www.capc.org> > documents > download
2. Fink, R. M., Oman, K. S., Youngwerth, J., & Bryant, L. L. (2013). A palliative care needs assessment of rural hospitals. *Journal of Palliative Medicine*, 16(6), 638-644.
3. Kennedy, R., Abdullah, N., Bhadra, R., Bonsu, N. O., Fayeziadeh, M., & Ickes, H. (2019). Barriers to effective use of palliative care services in the acute care setting with emphasis on terminal noncancer diseases. *Indian Journal of Palliative Care*, 25(2), 203-209.