

Abstract Final Draft

Title: Educating Health Care Professionals in Inner City Health Center about Palliative Care and Hospice

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Problem Statement: Spanish-speaking and Medicaid patients with serious illness may not understand palliative care (PC) and hospice. Inner City Health Care (ICHC) professionals may not be acquainted with PC or hospice services which could result in failing to offer this added support to the seriously ill.

Background: A database literature search was conducted using PubMed, with uninsured Latino and/or Medicaid patients >65 years as limits. The articles reviewed support the need for educational interventions focused on professionals who serve Spanish speaking and other ethnic minority patients, and older patients. Knowledge and skill gaps have been documented at the graduate level among professionals in relationship to utilizing and practicing palliative care. The studies documented that educational interventions may not only address knowledge and skill gaps among health professionals but could also increase their confidence in discussing and providing palliative and hospice care.

Purpose: This project's purpose was to determine the effect of an educational intervention on ICHC professionals' knowledge, attitudes, and beliefs about PC and hospice.

Methods: A 60-minute educational presentation defined PC/hospice including the benefits and resources available for patients with life-limiting illness. Training was offered in person or by zoom. A 10-item survey was developed measuring pre-/post knowledge, attitudes, and beliefs about PC and hospice and was administered immediately following the educational presentation.

Findings: Twenty professionals attended. Fourteen (70%) completed the survey. The survey documented improved knowledge and understanding of PC and hospice, and changed attitudes as evidenced by increased comfort in discussing these services with patients, and an improved willingness to refer patients with serious illness to PC or hospice.

Practice Implications: The educational intervention is an important first step in reducing the confusion between the services offered by PC and hospice and improving the likelihood of referring ICHC patients with serious illness to either PC or hospice.