

Title

Improving Familiarity with Palliative Care through Interdisciplinary Clinician Education

Authors

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Statement of the Problem

Interdisciplinary clinicians have variable familiarity with palliative care (PC). Past PC educational conferences at Denver Health have lacked a collaborative interdisciplinary focus and a sustainable curricular framework.

Background

Clinicians commonly misunderstand the role of PC, and lack of education in PC remains a barrier to its effective integration. Even short, targeted educational interventions can increase clinicians' confidence delivering primary PC, recognition of patients appropriate for specialty PC, and interdisciplinary collaboration. An interdisciplinary approach to PC education is perceived positively by participants.

Purpose

To improve interdisciplinary clinicians' primary PC skills through a series of interdisciplinary educational sessions.

Methods/Measures

We designed and delivered bi-monthly interactive educational sessions covering primary PC topics for interdisciplinary clinicians interested in PC. Attendees rated their pre-session vs. post-session knowledge of, and confidence with, PC. Total number of inpatient PC consultations was measured monthly.

Findings

Five sessions were delivered between June 2022 and February 2023. Mean attendance was 15 participants per session. Attendees represented diverse disciplines, and approximately half were not members of the core PC team. The proportion of participants who strongly agreed that they 1) understand the PC team role, 2) feel confident identifying patients who benefit from PC, and 3) feel confident applying basic PC skills increased from pre-session to post-session (respectively, 35.7%, 37%, 44.4% pre-session vs. 75%, 64.3%, 67.9% post-session). 100% of participants agreed or strongly agreed that the overall quality of the session was high, and that they learned something applicable to their practice. Number of inpatient PC consults per month did not change during the intervention period compared to the prior 6 months.

Implications for Practice

A bi-monthly interdisciplinary education curriculum can effectively increase clinicians' PC knowledge and skills. Future directions include increasing and diversifying attendance, preparing additional conference topics, and further measuring effect on inpatient PC consultations.