



## Service Priorities and Programmes Electronic Presentations

**Convention ID:** 739

**Submitting author:** Mr Tat Lam SHUM

**Post title:** Registered Nurse, HHH, KEC

### **Promotion of End-of-Life Care in a Medical Ward**

*Shum TL(1), Ko PS(2), Wong SH(1), Kwok Y(1), Chan KP(1), Lam WM(1), Chan CO(1)*

*(1)Department of Medicine, Haven of Hope Hospital, (2)Palliative Care Services, Kowloon East Cluster*

### **Keywords:**

End-of-Life care

Knowledge transfer (PC)

Care reminder

### **Introduction**

From April to October 2017, a pilot program to promote end-of-life (EOL) care was launched in the medical ward in Haven of Hope Hospital. It consisted of a working group on EOL care to develop, implement and oversee the pilot program; six monthly nursing palliative care (PC) rounds and mini-lectures to enhance nurses' PC knowledge; and a "Care reminder for patients in the last days of life" to guide frontline nurses and doctors in providing EOL care for patients with Do-Not-Attempt Cardiopulmonary Resuscitation (DNACPR) issued. The care reminder is a checklist covering medical assessment, nursing and psycho-spiritual care, bereavement care, and care in the dying scene.

### **Objectives**

To evaluate the impact of the training program on nurses' self-perceived competence in PC; To examine compliance of the medical ward with the care reminder

### **Methodology**

Nurse participants completed the 50-item "Palliative Care Nursing Self-Competence Scale" with 10 domains before and after the training program. Each item was rated from 0 to 5, with a higher score indicating higher self-perceived competence. The total score of each domain ranged from 0 to 25. Compliance with the care reminder was examined by checking whether it was used in eligible patients and how many areas covered in the care reminder were applied.

### **Result**

Nine senior nurses participated in the training program. Their self-perceived competence improved particularly in the following three domains: average total score increased from 15.3 to 20.9 in symptom control, from 13.6 to 21.2 in personal and professional issues related to nursing care, and from 14.8 to 22.2 in care in the last hours of life. During the study period, 35 patients with DNACPR orders died in the medical ward. The care reminder was used in 16 cases (45.7%) and the average compliance rate of individual care reminder areas was 95.2% among them. For the

patients that the care reminder was not used (n = 19), either their condition deteriorated rapidly within seven hours (n = 6), or no justifiable reason was provided (n = 13). Conclusion: This pilot program helped nurses to build up self-perceived competence in PC. However, efforts are needed to increase frontline staff's awareness of using the EOL care reminder.