

Caring Hearts: Partnering with Palliative Care to Advance Excellence in End-of-Life Care

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BACKGROUND

- Each year, approximately 45,000 pediatric patients die in the United States, highlighting the need for comprehensive end-of-life care. 1
- Delays in palliative care services are associated with increased physical, emotional, and spiritual distress for both patients and families.²
- Early palliative care interventions play a crucial role in facilitating shared decision-making and aligning care with patient and family goals.3
- The acute care multispecialty unit (MSU) was designated to care for non-oncology and non-intensive care pediatric patients requiring specialized end-of-life support.

PURPOSE

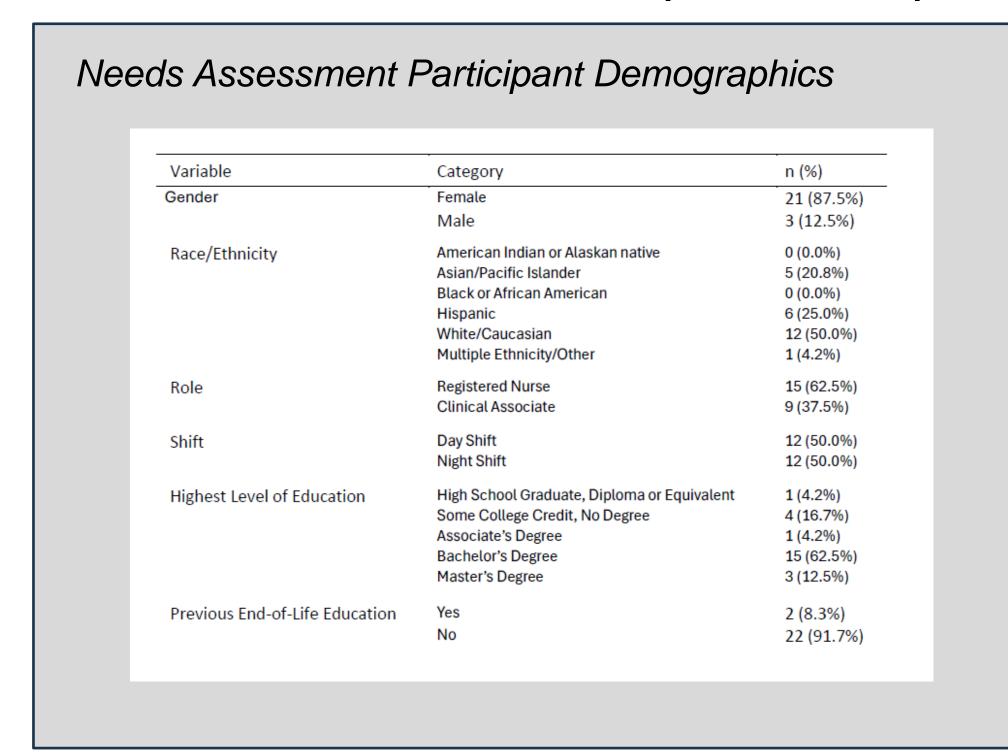
 To identify and address the educational needs of MSU staff to enhance their skills, knowledge, and confidence in delivering compassionate and comprehensive end-of-life care.

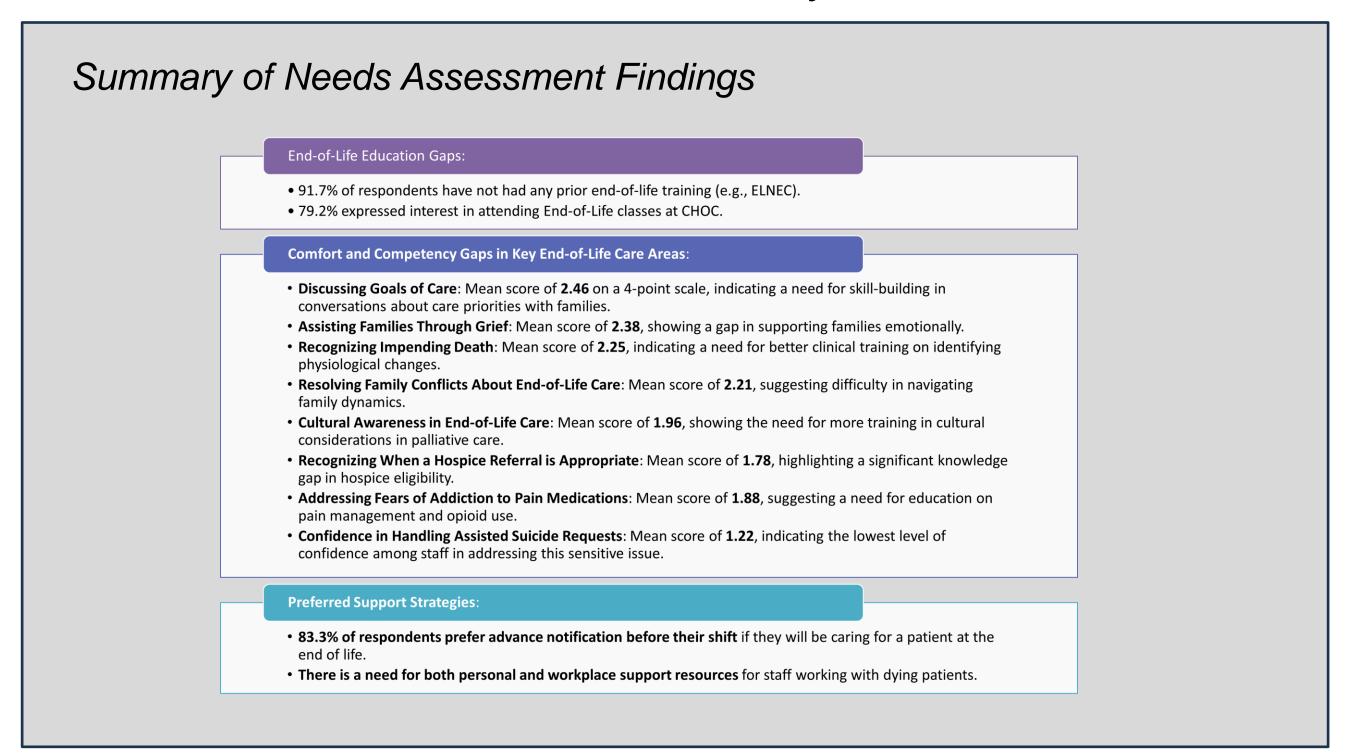
METHODS

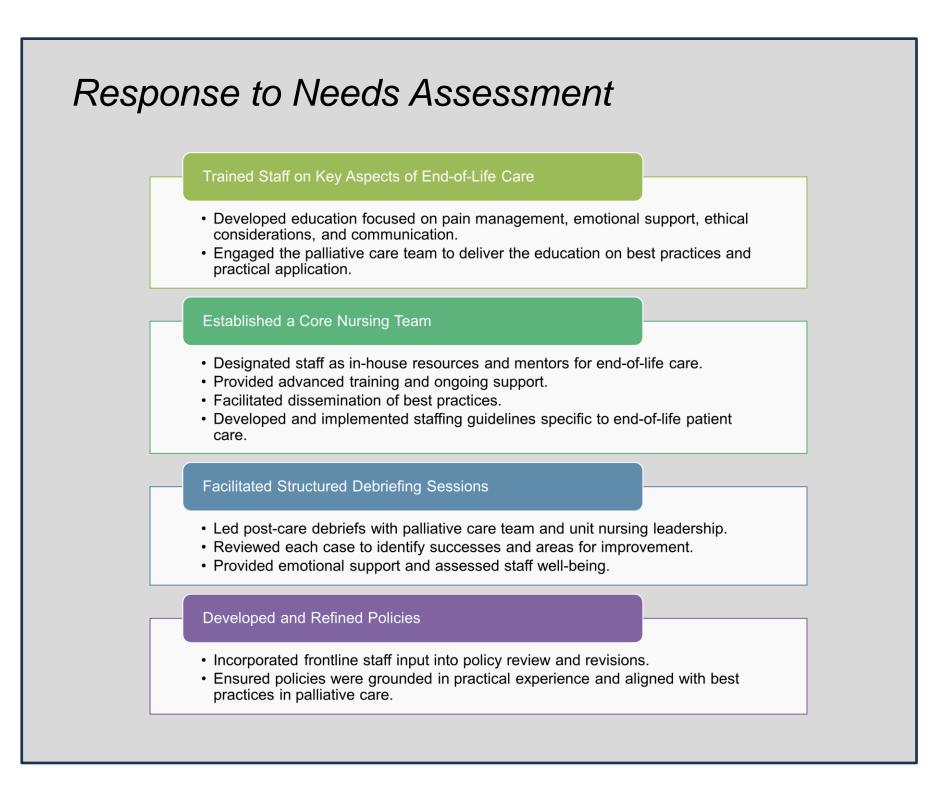
- Multidisciplinary Approach
 - Integrated the expertise of the interdisciplinary palliative care team to support staff in delivering high-quality, patient- and familycentered care.
- Educational Needs Assessment
 - Utilized the End-of-Life Professional Caregiver Survey, developed by the National Consensus Project for Quality Palliative Care, to identify educational needs and guide curriculum development.

RESULTS

24 MSU associates completed the pre-education needs assessment survey.







- 6 MSU associates completed the same survey one year later to assess the impact of the educational intervention.
- Training led to notable improvements in goals of care conversations (+0.71), cultural awareness in end-of-life care (+0.54), and recognizing impending death (+0.25).
- Remaining challenges included limited knowledge of hospice referrals and services, low confidence in addressing assisted suicide requests, and low confidence in family conflict resolution and grief support.

CONCLUSIONS

- A critical gap in end-of-life training was identified, with 91.7% of nurses lacking prior education.
- Structured curriculum and expert-led training improved staff confidence, care delivery, and mentorship.
- Ongoing education, debriefing, and policy refinement are essential for sustaining palliative care excellence.

REFERENCES

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- 4. Edson, J., Abecassis, L., Beke, D. M., & McGorman, T. (2024). Development of an institution-wide pediatric end-of-life summit. *Journal of Hospice & Palliative Nursing*, 26(1), 36–40.

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