PALLIATIVE NURSE CARE - EDUCATION AND TRAINING

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ABSTRACT

INTRODUCTION: Palliative care is a method, which improves the quality of life via control over the typical symptoms. The subject of palliative care are patients with life-threatening diseases. The activities follow the basic principles, which are directed to solving physical, mental, spiritual and social problems, as well as, assessment and treatment of the pain. The active communication and cooperation with the patients' relatives are also part of the duties of the nurse who provides palliative care. The specificity of palliative care requires specialized preparation, aimed at acquiring knowledge of the sphere, as well as development of certain skills and competences. The lack of a clinical subject in the field of palliative medical science is a great challenge for the training team in the process of presenting this subject and teaching the skills needed by the students.

AIM: The aim of this paper is to present the organization of the training of nurses in palliative care.

MATERIALS AND METHODS: After finishing their training, the students provide a feedback via a poll. The analysis of the results determined that the examined students have acquired sufficient amount of information. For the purpose of the practical training, approved nursing documentation has been presented during the exercises, which were held in the Department of Palliative Care at the Complex Cancer Center – Ruse (CCC). The students highly evaluate the documents provided for work, and they think that by introducing them in practice, the quality of care will rise significantly, the nursing care will get easier, and continuity will be achieved.

An electronic nurse file for palliative care was developed, allowing registration and evaluation of the activities performed.

CONCLUSION: From the survey of the students who have passed training in the discipline, a positive feedback is established. It appeared that they have received and absorbed a sufficient amount of information in the sphere of palliative nursing care.

Keywords: *training, nurse, palliative health care, assessment of the symptoms*

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INTRODUCTION

According to the World Health Organization, palliative care is a method which improves the quality of life of the patients and their families, who face the problems related to life-threatening diseases, by preventing and relieving the pain, assessment and cure of the pain, and solving physical, psychosocial and mental problems (1).

At the National Health Strategy, which accepts the comprehensive integrative principle, enshrined in the EU Strategy "Europe 2020", the continuously increasing costs of health care and the intensifying public frustration are being reported. The question of the rational use of health care is set, so the efforts are aimed at the morally acceptable conditions of lowering the expenses and optimizing the health systems (2).

Palliative medical science is part of the clinical directions, requiring significant funds. Not long ago it became a medical discipline with academic studies and a clinically regulated activity. In order to satisfy the needs of the patients who require palliative care, the application of an integrated approach and care is needed. It should be aimed at the physical and mental needs at the end of life, relieving the pain and other concomitant symptoms. Palliative care can be provided at the patient's home, at a hospice or at a hospital.

The specification of palliative care demands adequate professional preparation of the team of specialists, working in this field. The nurse who provides palliative care has to be motivated to work in a field, which is not preferable, must have a certain mindset, and possess qualities such as patience, compassion and empathy. Health care professionals need to possess good communication techniques and skills, self-control and ability to cope with stressful situations due to daily communication with patients in terminal stages of a disease, and also with their relatives. Implementing the basic aspects and principles of palliative care requires open communication with patients and their families, helping them with taking important decisions related to supportive treatment, symptom relief and quality of life of the patient. Clear differentiation of activities and better collaboration between its members is required.

The training of students in the subject of palliative nurse care is regulated as per the Instruction of Ordinance on Uniform State Requirements (OUSR) (3). The school discipline *Palliative Nurse Care* is incorporated as a mandatory one, in the curriculum of : 7.5.1 Nurse, from the professional direction 7.5 Health care in the field of higher education and 7.1 Healthcare and sports, for a Bachelor's degree. The subject comprises a workload of 30 classes, of which

15 classes of lectures and 15 classes of practical exercises, studied during the sixth semester. The curriculum annotation describes the aims, tasks and place of the discipline during the students' comprehensive training. The planned lecture subjects provide the performance of the set purposes and tasks of the training. The subjects for practical exercises are aimed at forming specific skills and competences. The use of visual and verbal scales for assessing the typical symptoms for patients with palliative trend, is required. The developed nursing documentation for the aims of training, which has to do with registering the performed clinical monitoring and assessment of the basic symptoms, provides succession, accountability and quality of the care. Also, scales for assessing the feeding, pain and the risk of decubitus, which are approved in the European countries, are included in the training process. The case studies covered in the training, involving ethical and moral issues related to euthanasia, the quality of life of patients and communicating the truth, allow development of the thinking and practical application of the acquired knowledge in medical ethics and medical psychology. The holistic approach is the basic working principle with palliative patients. Social knowledge and basic principles of teamwork are also essential in training and practicing palliative care. While studying the discipline, especially during practical exercises, the students come across many emotional experiences involving communicating the truth, the different points of view in regard to the pros and cons of euthanasia, as well as palliative care for children. The role of the lecturer is to show the different points of view of the problems by applying pedagogical mastery and using psychological techniques for lowering the stress during the training process.

MATERIALS AND METHODS

We have performed a literature analysis and synthesis of specialized literature covering information from Internet sources. We have included the development of nursing documentation and approbation. A survey method was used.

RESULTS AND DISCUSSION

The content of the lectures, developed for the purposes of the training, provides knowledge about the nature, the basic principles, tasks and aspects of

palliative care. Different points of view having to do with the philosophy of life and death are being considered, as well as the ethical and psychosocial problems of palliative care. Information about the interdisciplinary team who provides palliative care (PC), and the nurse's job description in terms of palliative care, is introduced. The types of organizational forms of palliative care are also introduced. The PC for patients in a hospice is considered in detail. The basic symptoms and syndromes of people, subject of palliative care, are differentiated, and there are also assessment, treatment and nurse care included. Palliative care for somatically ill people is organized in a way to cover all human body systems. Feeding in PC, as well as the assessment and the battle with pain at the end of life in palliative medical science, are the next topics included in the training process. Side effects from the oncological treatment and the psychological problems of the nurse who works with terminally ill patients, is part of the specificity of the discipline. The topic *The Child as a Patient Who Needs Palliative Care* is being introduced vastly and in detail.

The amount of theoretical material provides enough knowledge about the nature and the basic principles of palliative medical science, as well as about the organizational forms, and the role of every member from the palliative care team.

The practical exercises include: working with medical documentation and a developed nursing documentation, for the goal of the training, communication with the ill individuals and their relatives; discussing clinical cases.

The practical exercises are being held in a real environment at the Department of Palliative Care at the Complex Cancer Center (CCC) in Ruse. Working in small groups provides opportunity for active participation in the exercises for all the students. The topics of the practical exercises, are revealed at the end of the previous class. The preliminary preparation provides knowledge on the subject and opportunity for clinical work with patients. The topics of practical exercises are aimed at: differentiation between the ordinary and palliative care, considering the roles of the members of the palliative care team, and a detailed discussion and acquaintance with the nurse's job description. The process includes form-

ing an assessment and clinical monitoring of the basic symptoms, acquaintance and work with specially developed nursing documentation for the purpose, which includes: protocols for evaluation of the clinical symptoms and registration cards for the results obtained, as well as an electronic nurse file. All stages of the nursing process are practically applied, as it focuses on the evaluation of needs and planning of individual nurse care. In connection with the assessment of the risk of decubitus, a specially developed scale of Waterlow is used, and preventive activities and measures are done in practice. For pain assessment, the students acquaint themselves with, and work with standardized verbal and analog scales. During the exercises the students work out a clinical evaluation and nurse care of people with anorexia-cachexia syndrome (ACS), and apply the Rules of Conduct as per Clinical path №253. For the exercises, which deal with palliative care for children, discussion of cases is envisaged, as well as working in small groups and roleplay. While dealing with the electronic nurse file, the students have the opportunity to suggest ideas for optimizing the process of nurse care and activities documentation.

A feedback in the form of a survey of satisfaction and quality of the students training, was received after a passed course by undergraduate students from the Nurse program of the University of Ruse "Angel Kanchev". Thirty students were examined. Regarding the question: *Do you think the information you have studied during your training process in palliative care is sufficient in both theoretical and practical aspect?*: 88% of them were fully satisfied and thought that the amount of information was enough and provides basic knowledge of the field; 10% of them thought that the amount of information was enough, but it was hard to understand, and 2% of the respondents thought that more information is needed.

Most evocative were the exercises, which include the ethics principles and tasks for palliative care. The topics considering death and the process of dying, were perceived with negative emotions. After the training process, the students' opinion on the concept of *best death* was researched, 60% of them have classified the answers in the following way: uppermost they pointed out *death in sleep*, secondly *death in s.o. own house, or surrounded by his rel-*

atives, thirdly *painless death*, and finally, *sudden death*. All students' general opinion was that patients should choose where they die. Figure 1 shows the answers of students about the best place for the patients

Figure 1. Location of death

to be during the final moments of their life.

Figure 2 visualizes the students' opinion on the patient dying in his/her house.

Death at the patient's house

Figure 2. Advantages of death at the patient's house

According to 58% of the respondents death at the patient's house would give them supportive environment, 8% thought that this would provide the opportunity for free visits by the relatives and time to say goodbye to them, and 34% of the respondents thought that death at the patients' house would help them keep their dignity. In connection with the cases that dealt with communicating the truth, the nature and perspectives of the patients' disease as well

as their option of choosing, all students have given an affirmative response.

In connection with the considered pros and cons of applying euthanasia and assisted suicide to patients with unfavorable prognosis of disease, 65% of the students supported the idea of legal regulation and applying euthanasia and assisted suicide. Figure 3 shows the students' researched opinion of the pros and cons of euthanasia and assisted suicide.

Figure 3. Pros and cons of euthanasia and assisted suicide

The students' arguments in favor of euthanasia were that life prolongation of patients on account of life's quality is unacceptable, and that everyone has the right to choose how one should die. In their arguments, the students gave an explicit condition, that euthanasia could only be applied to terminally ill people and after being legally regulated, which would make abuse impossible.

The approbation of the developed nursing documentation from the team of palliative care trainers was accomplished at the Department of Palliative Care at CCC-Ruse during the practical exercises. The students' opinion survey showed that 90% of them consider the developed documentation useful. Their answers are arranged by importance: uppermost for them was that the introduction of this documentation would increase the quality of patient care, second - the nurse's job would be made easier this way, and third - registering the daily activities done by the nurse would become possible this way. Only one of the students thought that this documentation was completely useless. The opinion survey about the necessity of making an assessment of the risk of decubitus on the Waterlow scale is very important for

the nurse's organization of work, as it is set as an activity in CP 253(4). Most of the respondents (75%) thought that the Waterlow scale was necessary, because it registers the risk of seemingly non-risk patients, and by applying preventive measures, money provided for decubitus wounds treatment would be spared and the quality of life would be preserved.

The last question of the survey was aimed at exploring the students' attitude towards working in a palliative care ward. Figure 4 presents their answers, as well as the conditions under which they would start working in this sphere of healthcare.

Figure 4. Choice of palliative care ward as a place of work

As seen from the results, 64% of the respondents at this stage of training do not wish to work in this sphere. In the end of third year of education, a great part of the students have already made their future professional choice. The rest of them make their final decision after carrying out their internship. We find that the variety of problems, the plight and the lack of perspective from the treatment, as well as the encounters with death, are part of the reasons why trainees do not wish to work in the sphere of palliative care. A part of the respondents (22%) would accept working with palliative patients, provided all members of the palliative care team are present - a doctor, a psychologist, a caseworker, and volunteers.

CONCLUSION

Palliative nurse care is a complex and interdisciplinary field, which requires specific preparation and certain personal qualities. The lack of a clinical

discipline in the sphere of palliative care during the training of the nurses presents a serious challenge for the palliative nurse care training team when introducing the discipline to the students.

The amount and content of the envisaged thematic units in the training process, guarantees the students' acquaintance with basic knowledge, forming of skills and competence for working with patients who need palliative care. A positive feedback as well as enough amount of provided information, are being determined by surveys among students, who have passed a course in palliative nurse care. The constant development of science, as well as every sphere in health care, requires continuing education and acquisition of new knowledge, skills and competence.

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