An Interdisciplinary Approach to End-of-Life Care in a Community Hospital Setting



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BACKGROUND: Why did you choose this project?

Among newer nurses at Fairmont Medical Center, there is an uneasiness and timidity in approaching end-of-life (EOL) conversations and providing end of life care. Literature review reveals that this challenge is a common occurrence in the career of a new nurse. To address this space for quality improvement this project has begun. In alignment with the 2025 WVU Medicine Strategic plan, this project will enable a more seamless end-to-end experience for the patients, families, and providers across the community we serve.

SMARTER OBJECTIVE:

This project will include a provider orientation poster with relevant clinical resources available at Fairmont Medical Center, the creation of an EOL care assessment tool for nurses, and an interdisciplinary EOL protocol pathway. This work will start in March 2025 with an initial completion date by the end of 2025. Improvement objectives will be measured through pre and post training evaluations and qualitative data obtained through clinical interactions and staff selfevaluations and reports.

IMPROVEMENT ACTION PLAN WITH ACTIONS TAKEN (What did you do to improve?)

- Launch literature review related to EOL care
- Assay available resources at FMC related to EOL care
- -Conduct informal poll of staff regarding EOL care process at FMC
- –Develop a project partnership between CUSP champion and chaplain
- Hold listening session with nurses on orientation
- -Collaborate with interdisciplinary medical team at FMC
- Review current EOL assessment tools for nursing

RESULTS: What did you find?

- -Literature review reveals that this challenge (an uneasiness and timidity in approaching EOL conversations and providing EOL care) is a common occurrence in the career of a new nurse
- -Results thus far in the preliminary steps of this project reveal nursing staff voicing relief at the acknowledgement of the issue and in learning about an action plan to address the need.

SCALE UP PLAN: How would you spread this to rest of your unit or other hospital units?

Scale up plans include a qualitative measurement of the efficacy of the EOL care assessment tool and interdisciplinary protocol pathway. Intentional reevaluation of staff EOL care literacy and EOL communication competencies will yield the next steps for improving clinical interactions.

SUSTAINABILITY PLAN: How would you assure this work continues following the same standards?

Integrate EOL education modules, EOL assessment tools, and an EOL interdisciplinary protocol pathway to be available for implementation by the end of 2025. There will be ongoing staff education surrounding the tool and pathway which will assess readiness for conversations and identify the triggers necessary for implementing interdisciplinary EOL care pathway.

LESSONS LEARNT:

Informal polling of staff clearly shows receptivity and welcome for an assistive tool to optimize team functioning at the intersection of patient centered, individualized care which follows a standardized pathway for compassionate and quality EOL care for patients and families.

