Module 1
Introduction to Palliative Nursing
Module 1: Introduction to Palliative Nursing
Participant Outline

I. INTRODUCTION
   A. Nurses play a major role in caring for patients with serious illness and their family caregivers
   B. A major influence in health care is a society that views aging negatively and denies death
   C. The rise in life expectancy, enhanced technology, and increased healthcare spending add to the complexity of caring for individuals with serious illness

II. THE NEED FOR IMPROVED PALLIATIVE CARE
   A. Chronic, serious illness and its impact on care
   B. Demographic and social trends
      1. Age of death
      2. Cause of death
      3. Demographics of death and various conditions/diagnoses
   C. Trajectories of individuals with serious illness from diagnosis to end of life
      1. Sudden, unexpected death
      2. Steady decline, short terminal phase
      3. Slow decline, periodic crises, death
      4. Lingering, expected death
   D. Family caregivers
      1. Physical burdens
      2. Emotional strain
      3. Financial implications/burdens
      4. Demographics of caregivers – Millennials vs. aging

III. DEFINITIONS AND PRINCIPLES OF HOSPICE AND PALLIATIVE CARE
   A. Hospice
      1. Definition of hospice
      2. History
      3. Services included
   B. Palliative care
      1. Definition
      2. History
      3. Growth of palliative care across the US
      4. Philosophy and delivery of care
   C. Continuum of care/palliative care
      1. Address values and preferences of care
      2. Manage pain and symptoms
      3. Assist with medical decision making
      4. Provide support to patient/family caregivers

IV. BARRIERS TO QUALITY CARE FOR INDIVIDUALS WITH SERIOUS ILLNESS
   A. Understand the limitation of health care
   B. Inadequate palliative care training for professionals
C. Workforce shortages of palliative care specialists in all disciplines  
D. Need for a solid evidence base for palliative care through research  
E. Delayed access to hospice and palliative care services  
   1. Services misunderstood  
   2. Inadequate consideration to cultural issues around serious illness  
   3. Rules and regulations  
   4. Denial of death  
F. Lessons learned  
G. Prognostic tools  
   1. Estimating prognosis  
   2. Survival predictors  

V. VETERANS  
A. Definition of a Veteran  
B. Department of Veterans Affairs (VA)  
   I. VA motto  
   II. Eligibility and enrollment  
   III. VA hospice and palliative care program  
   IV. History of development of palliative care in the VA  

VI. QUALITY OF LIFE MODEL  
A. Addressing multiple dimensions of care to achieve quality palliative care  
   1. Physical well-being  
   2. Psychological well-being  
   3. Social well-being  
   4. Spiritual/cultural well-being  
B. Maintaining hope  

VII. ROLE OF THE NURSE  
A. Assure access to quality palliative care  
B. Use presence  
C. Maintain a realistic perspective  
D. Provide consistency across all settings  
E. Expand concept of healing  
F. Provide education  

VIII. CONCLUSION  
A. Nurses need clinical knowledge and skill about caring for individuals with serious illness  
B. Nurses are essential to access to quality palliative care  
C. “Doing for” and “being with”  
D. Resources for Veterans