

Quality improvement in End-of-Life Care

Shana Stanley

Lakeview College of Nursing

Dr. Ariel Wright

6/17/2022

Quality improvement in End-of-Life Care

Quality improvement is an essential process in the progression of the nursing practice. The continuation of changes that benefit the nursing practice and patient outcomes are linked to quality improvement and its process. Exploring categories within QSEN, such as patient-centered care and teamwork, helps nurses better prepare for the ever-changing future of the profession. Quality improvement and QSEN work hand in hand to use strategies and competencies to promote skills and attitudes to improve positive change and outcomes (QSEN Institute, 2020). The improvement of end-of-life care is beneficial not only to the patient but also to the staff. Finding new ways to create better outcomes for the patient in the end stages of care is essential to improving the quality of the perception of the end-of-life stage. Looking at things like comfort, pain management, and staff competency helps nursing move forward during this difficult time.

Article Summary

Introduction (note that the key points is flush to the far left)

Dealing with the end-of-life care can often be overwhelming for staff and patients. It is not always easy to communicate directives or patient needs if the patient is deemed unable to do so. This strain put on staff can cause many issues within the care process. This study further examines how end-of-life care may be improved by reinforcing and educating on palliative care (di Giulio et al., 2019). By providing education on palliative care and collecting data to prove its

validity or necessity, this study helps pinpoint needed improvements in end-of-life care, especially among non- decisional patients.

Overview

The article chosen is *The Impact of Nursing Homes Staff Education on End-of-Life Care in Residents with Advanced Dementia: A Quality Improvement Study*. This article aims to research ways to promote understanding and comfort to those in the end stages of life, specifically those with dementia. By understanding the need of patients during this time, nurses can further anticipate the needs of the dying patient (di Giulio et al., 2019). This article falls under the category of patient-centered care within the QSEN model. Using subcategories in the model, such as understanding the concepts of pain and how to manage it, links to the further understanding of the improvement of end-of-life care (QSEN Institute, 2020, table 1). By further understanding how to assess pain and possible barriers of therapeutic communication regarding a patient with dementia, the quality of end-of-life care can be further assessed and modified to meet the patient and staffing needs (QSEN Institute, 2020, table 1).

Quality Improvement

The quality improvement within this study is applied in the long-term health setting; however, it could also be implemented within in-home care and possibly the hospital setting. Pre-implementation of techniques and attitudes found in this study would first require the willingness and openness of staff participating. Staff would need to be willing to sit through training and competency modules and be willing to practice what was learned in training. During the training process, staff retention would need to be a high priority; yes, new staff can always be

trained. However, staff retention is necessary for implementation to achieve positive outcomes. That said, facilities would need to be willing to pay staff adequately to promote retention. This may cause extra funding for dementia unit staff since special training is needed. After education is completed, there needs to be a willingness to participate in ongoing quality improvement data collection. For example, regular chart auditing, further staffing education, and family education will be needed. These extra training may cause the institution implementing them to need to find extra financial resources. This cost may also be passed down to the client or family. If that is the case, further education will be needed to help families understand the importance of end-of-life comfort and the difficulties of dementia (di Giulio et al., 2019).

Application to Nursing

Here add in a summary of the information learned to the application to practice. Follow the MEAL paragraph formatting and use Grammarly.com. Be sure to cover all aspects within the rubric. Be sure to use double space and to tab over for your first line of a new paragraph.

Practice

Paragraph goes here discussing the application to practice. Review the rubric for full requirements. Follow the MEAL paragraph formatting and use Grammarly.com.

Education

Paragraph goes here discussing the application to education. Review the rubric for full requirements. Follow the MEAL paragraph formatting and use Grammarly.com.

Research

Paragraph goes here discussing the application of research. Review the rubric for full requirements. Follow the MEAL paragraph formatting and use Grammarly.com.

Conclusion

Write a conclusion here in your overall paper. Review the rubric for full requirements. Follow the MEAL paragraph formatting and use Grammarly.com.

References

di Giulio, P., Finetti, S., Giunco, F., Basso, I., Rosa, D., Pettenati, F., Bussotti, A., Villani, D., Gentile, S., Boncinelli, L., Monti, M., Spinsanti, S., Piazza, M., Charrier, L., & Toscani, F. (2019). The Impact of Nursing Homes Staff Education on End-of-Life Care in Residents With Advanced Dementia: A Quality Improvement Study. *Journal of Pain and Symptom Management*, 57(1), 93–99. <https://doi.org/10.1016/j.jpainsymman.2018.10.268>

QSEN Institute (2020). *QSEN Competencies*.
https://qsen.org/competencies/pre-licensure-ksas/#quality_improvement

*As you can see the reference is centered and is bolded. The first line is NOT tabbed over, all other lines are, this is called hanging indentation. All references are double spaced. All

sources should be listed in alphabetical order. Be sure to use the APA 7th edition and guide for your reference page.