End of Life Care

Erica King

Lakeview College of Nursing

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End of Life Care

End-of- life care is something that is deeply personal to the individual and the families involved. There are a lot of hard decisions to be made at this point in the patient's care. Some of the harder decisions should be made ahead of time in order to avoid complications when the patient has passed away. Hospice care is one type of healthcare that deals with the end of a patient's life. This type of care is not only for the patient but also for the family and a holistic approach is used. Not only does hospice care deal with keeping the patient as comfortable as possible while in the dying process, but it also deals with the spiritual, social, and psychological aspects of care (Park et al., 2021). There is a lot of literature about end-of-life care, hospice, and diseases that affect the elderly. A literature review takes information that already exists about a topic and summarizes it together in order to build a basis for future research.

Factors of hospitals associated with an independent hospice care unit

This journal article talks about how hospice is provided in hospital settings in countries like South Korea. The United States offers hospice services in a variety of settings including in the patient's own home and so this study shows how hospice in a hospital setting is different. One of the hypotheses for this study that was done was that hospitals more often offer hospice services when they have a high number of terminally ill patients that are seen at that hospital. Whether hospice care is done in a hospital or other setting was what prompted this research study.

Key Points (note that the key points is flush to the far left *delete this comment)

This study focuses on hospitals in Korea that have 100 beds or more (Park et al., 2021b). The study was done using a cross-sectional design (Park et al., 2021b). To study the hypothesis discussed earlier, the researchers decided to use 6 different features of hospitals that reflect the characteristics of hospice wards in the hospital (Park et al., 2021b). Characteristics that were used in the study include things like the proportion of cancer patients, disease severity, cost per patient, and staffing levels (Park et al., 2021b). The research was done using data from the health insurance services. The P value is discussed in the section on statistical analysis. It states that the P value was less than .05 (Park et al., 2021b). The study found that 20% of the hospitals that were studied had a hospice unit (Park et al., 2021b). The studies hypothesis was found to be correct and correlated with the data that the researchers used.

Assumptions

The authors are trying to determine if certain characteristics correlate with the number of hospice units in hospitals. The authors are concerned with figuring out why hospitals do or don't decide to correlate hospice units within their facilities. Thinking that one of the correlations about high-risk disease patients in a hospital and the likelihood of having a hospice unit because of aspects such as these is great thinking. The data collected offered knowledge to the authors to correlate their hypothesis with actual data that proved their correlations were correct.

Deficit/Conclusion

I accept the author's thinking in this study. I agree that certain correlations can be made about the reason hospitals choose to have a hospice unit or not. From the data gathered, the hypothesis was proven to be true about things like more cancer patients being a reason for a

hospital to have a hospice unit at the facility. Nursing can benefit from the knowledge found in this study because nurses are a huge part of hospice care. The vast majority of the care that hospice patients receive is directly from the nurse. If nurses can figure out the correlations between hospitals having hospice units and the reasons, they can help to advocate for patients to be able to receive these services in their facilities. Advocating for our patients is one of the most important aspects of being a nurse.

→ *THIS IS WHERE PART 1 ENDS! THE NEXT SECTION (SECOND ARTICLE TITLE HERE) IS WHERE PART 2 BEGINS!*

Second article title here (Level 1 Heading, see your APA book * delete this comment)

Here add in a summary of the article. 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.

Key Points

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Assumptions

Paragraph goes here discussing the assumptions of the article. Follow the MEAL paragraph formatting and use Grammarly.com.

Deficit/Conclusion

Paragraph goes here discussing the conclusion of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Do you accept the authors' line of reasoning? What are the implications for this article? If nursing fails to accept this line of reasoning, what would the implications be?

Third article title here (Level 1 Heading, see your APA book * delete this comment)

Here add in a summary of the article. 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.

Key Points

Paragraph goes here discussing the key points of the article. Follow the MEAL paragraph formatting and use Grammarly.com.

Assumptions

Paragraph goes here discussing the assumptions of the article. Follow the MEAL paragraph formatting and use Grammarly.com.

Deficit/Conclusion

Paragraph goes here discussing the conclusion of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Do you accept the authors' line of reasoning? What are the

implications for this article? If nursing fails to accept this line of reasoning, what would the implications be?

Conclusion

Write a conclusion here in your overall paper. Follow the MEAL paragraph formatting and use Grammarly.com. Provide a summary/conclusion of the analysis of all three articles. Discuss how the information can improve:

- Patient outcomes
- Nursing practice
- Evidence-based practice/Quality Improvement efforts
- Healthcare as a whole

References

Park, Y., Chang, H., & Shin, H. (2021). Factors of hospitals associated with an independent
hospice care unit. *Journal of Hospice and Palliative Nursing*, *23*(6), 584–590.
https://doi.org/10.1097/njh.0000000000000806