Assessment of the Knowledge Regarding Palliative Care among Staff Nurses Working in Selected Hospitals and to Disseminate an Information Booklet

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Abstract

Background: Palliative care as "an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. "Terminal illness or endstage disease is an incurable disease that cannot be adequately treated and is reasonably expected to result in the death of the patient. This term is more commonly used for progressive diseases such as cancer or advanced heart disease than for trauma. In popular use, it indicates a disease that will progress until death with near absolute certainty, regardless of treatment. Any child or adult who has a serious or life-threatening illness, such as cancer, heart failure, or neurological or other disorders, may benefit from palliative care. It can be started at any time, no matter your illness or stage of disease. Objectives: To assess the knowledge regarding Palliative Care among staff nurses working in selected hospitals of the city and to disseminate an information booklet. To assess the knowledge regarding Palliative Care among staff nurses. To associate the pre test knowledge score with selected demographic variable. To disseminate an information booklet regarding Palliative Care among staff nurses. Methodology: A Non experimental study with descriptive research design is used among 100 staff nurses working in selected hospitals of the city and are available at the time of data collection. The non probability convenient sampling technique was used. Data was collected on Knowledge regarding palliative care among staff nurses was assessed by administering the questionnaire regarding palliative care .Information booklet was given on the same day after the pre-test. The collected data was coded, tabulated and analyzed by using descriptive statistics and inferential statistics. Result: Study shows that 70% of the staff nurses had good level of knowledge score. 28% of the staff nurses had average level of knowledge score, 2% of the staff nurses had very good level of knowledge score. Conclusion: Thus it was concluded that assessment of knowledge regarding palliative care among staff nurses working in selected hospitals of the city was good. Staff nurses was having good knowledge in area of symptoms management and role of a nurse in palliative care. But overall nurses may have need to attend more training programme on palliative care to improve quality

Keywords: Palliative Care; Staff Nurses; Information Booklet; Knowledge Terminal Illness.

Introduction

Palliative care is any form of treatment that concentrates on reducing a patients symptoms, improving quality of life and supporting patient and their families. Palliative care is the active total care of patient with advance illness. The focus is no longer on curative treatment, but on quality of life.¹

Unfortunately, because of this misunderstanding, many patients with chronic illnesses never even know palliative care is an appropriate option. Many people think it is just for cancer patients, but that is not the case. Patients with heart disease, lung disease, neurological diseases and dementia are also appropriate for palliative care. Palliative care is there to look at the patients and family as whole and see how we can help improve everyone's quality of life.²

A nurse's role in palliative care is different from other

Specialties. Although all nurses are skilled in caring for patients, palliative nursing means being available to the patients 24 hours a day to manage their pain and discomforts and to provide support to the families. A nurse doesn't just have a single role in palliative care. Instead, it's a series of roles geared towards providing support to both patients and families during one of their most difficult times. These roles fall on top of the conventional duties that nurses are expected to perform, like assessing symptoms and carrying out treatment plans.³

Background of the Study

Terminal illness or end-stage disease is an incurable disease That cannot be adequately treated and is reasonably expected to result in the death of the patient. This term is more commonly used for progressive diseases such as cancer or advanced heart disease than for trauma. In popular use, it indicates a disease that will progress until death with near absolute certainty, regardless of treatment. A patient who has such an illness may be referred to as a terminal patient, terminally ill or simply terminal. There is no standardized life expectancy for a patient to be considered terminal, although it is generally months or less.⁴

In 2018, an estimated 1,735,350 new cases of cancer will be diagnosed in the United States and 609,640 people will die from the disease. The number of new cases of cancer (cancer incidence) is 439.2 per 100,000 men and women per year.⁵

Need of the Study

In India, it is estimated that 14.5 lack people are living with the disease, with over 7 lack new cases being registered every year and 5,56,400 deaths which are said to be cancer related. An estimated 71 per cent of all cancer related deaths are occurring in the age group between 30 to 69 years-6

Palliative care is intended right from the starting of the treatment of cancers in conjunction with chemotherapy and radiotherapy. It is estimated that in India the total number of people who need palliative care is likely to be 5.4 million people a year. In India it is estimated that the prevalence of patients who require Palliative Care are 10 million, 1 million with cancer and 7 million with other life limiting conditions. This would work out to approximately 1 million patients for Maharashtra.⁷

Problem Statement

A descriptive study to assess the knowledge regarding Palliative Care among staff nurses working in selected hospitals of the city and to disseminate an information booklet

Objectives

Primary Objectives:

To assess the knowledge regarding Palliative Care among staff nurses working in selected hospitals of the city and to disseminate an information booklet.

Secondary objectives:

To assess the knowledge regarding Palliative Care among staff nurses.

To associate the pre test knowledge score with selected demographic variable.

To disseminate an information booklet regarding Palliative Care among staff nurses.

Operational Definition

Assess: In this study assess means, the organized systematic continuous process of collecting data from staff nurses regarding Palliative Care.

Knowledge: In this study knowledge means, responses obtained from the staff nurses regarding their knowledge on Palliative Care.

Palliative care: In this study palliative care is an interdisciplinary approach to specialized medical and nursing care for people with terminal illness.

Staff nurses: In this study staff nurses refers to GNM, B. Sc. Nursing/ B. B.Sc. Nursing and P.B. B.Sc.\P.C. B.Sc. Nursing qualified registered nurses working in the selected hospitals of the city.

Hospital: In this study hospital refers to an institution providing medical and surgical treatment and nursing care for sick people.

Information booklet: In this study information booklet means a small, thin book with paper covers, typically giving information on a palliative care.

Disseminate: In this study disseminate means to distribute information booklet regarding palliative care among staff nurses.

Assumption

- Staff nurses may have knowledge regarding palliative care.
- There will be association between knowledge score and selected demographic variable.

Delimitation

This study is delimited to the staff nurses who:

- Are having M.sc nursing qualification.
- Presently working in operation -theatre and causality.
- Have attended educational programme on palliative care.

Conceptual Framework

 The conceptual framework for present study is developed from "General System Model", by WHO SEARO (1995).8

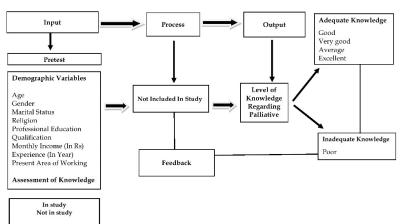


Fig. I.1: Conceptual Framework: Based On General System Model (WHO1995).

Review of Literature

In the present study the literature reviewed has been organized into the following categories:

- I. Literature related to palliative care.
- II. Literature related to nurses knowledge on palliative care.
- II. Literature related to information booklet.

Methodology

Research approach: Quantitative research approach. Research design: Descriptive research design. Research setting: Selected hospitals of the city.

Variables

Demographic variables: Age, gender, marital status, religion, professional educational qualification, monthly income (in Rs.), experience (in year), present area of working, etc.

Population: All staff nurses working in hospitals.

Target population: All staff nurses working in selected hospital of the city

Accessible population: Staff nurses working in selected hospitals of the city and are available at the time of data collection and who were fulfilling the inclusive criteria.

Sampling

Sample: 100 registered staff nurses working in selected hospitals. Sampling technique: Non probability convenient sampling technique. Sample size: 100 staff nurses working selected hospitals of the city.

Sampling Criteria

Inclusive criteria: Inclusive criteria was

Staff nurses who are:

- Registered nurses having RGNM, B.Sc. nursing and P.B. B.Sc. Nursing/ P.C.B.sc. nursing qualification.
- Willing to participate in study.
- Available at the time of data collection.

Exclusive criteria - Exclusive criteria was

Staff nurses who:

- Are having M.sc nursing qualification.
- · Presently working in operation theatre and causality
- Have attended educational programme on palliative care.
- Are not willing to participate in study.
- Are not available at the time of data collection.

Tool and Technique of Data Collection

The tools used in this study consist of two sections:

 $\it Section~A:$ Consist of semi structured question naire on demographic variables.

Section B: Self Structured questionnaire on knowledge regarding palliative care.

Validity: For the content and construct Validity of tool was determined by 27 experts. Tool was valid for the study.

Reliability: Guttmann Split Half method formula was used. The correlation coefficient 'r' of the questionnaire was 0.8116.

Pilot Study: Study is conducted for a period of 7 days. Permission was taken from concerned authority from the selected hospitals of the city. The investigator approached the 10 sample individually. The pilot study was feasible in time, money, material, and resources.

Procedure for Data Collection

- Permission was obtained from concerned authority.
- The samples were approached in small groups on a daily basis.
- Before giving the questionnaire self introduction was given by the investigator and the purpose of the study mentioned.
- Consent of the samples were taken. The pre-test questionnaire were distributed to the samples and collected back after 10-15 minutes.
- After the pre-test the investigator administered the information booklet (on knowledge regarding palliative care).

Description of Tools

The analysis and interpretation is given in the following sections:

Section - I: Description of staff nurses working in selected hospitals with regards to their demographic variables.

Age, Gender, Marital Status, Religion, Professional Educational Qualification, Monthly Income (In Rs), Experience (In Year), Area of Working Etc.

Table no. IV-1: Table showing frequency and percentage wise distribution of staff nurses working in selected hospitals according to their demographic variables.

Demographic		T	n=100
Variables		Frequency (F)	Percentage (%)
Age (In years)	21-30	65	65
	31-40	21	21
	41-50	14	14
	≥51	0	0
Gender	Male	11	11
	Female	89	89
Marital Status	Married	46	46
	Unmarried	54	54
	Divorced	0	0
	Separated	0	0
	Widow/Widower	0	0
Religion	Hindu	51	51
	Muslim	2	2
	Christian	4	4
	Buddhist	43	43
	Others	0	0
Professional	RGNM/GNM	93	93
Education Qualification	B. B.Sc./B.Sc. Nursing	5	5
Quainication	PB. B.Sc./PC. B.Sc. Nursing	2	2
Monthly Income (In	Below 10000	3	3
Rs)	10001-15000	64	64
	15001-20000	27	27
	≥ 20001	6	6
Experience (In Years)	< 1	4	4
	1-5	63	63
	5-10	19	19
	>10	14	14
Area of Working	Medical Ward	22	22
	Surgical Ward	25	25
	Orthopedic Ward	10	10
	Critical Care Unit	24	24
	Other Ward	19	19

Section II: Description on assessment of knowledge score of staff nurses working in selected hospitals regarding palliative care.

Table no. IV-2: Table showing frequency percentage wise distribution of Assessment of knowledge score of staff nurses working in selected hospitals regarding palliative care.

			n=100	
	Score Range -	Level of Knowledge Score		
Level of knowledge		No of staff Nurses (f)	Percentage (%)	
Excellent	81-100%(21-25)	0	0	
Very Good	61-80% (16-20)	2	2	
Good	41-60% (11-15)	70	70	
Average	21-40% (6-10)	28	28	
Poor	0-20%(0-5)	0	0	
Minimum score		6		
Maximum score		16		
Mean knowledge score		11.88±2.11		
Mean % Knowledge Score		47.52±8.47		

Section III: Description on area wise assessment of knowledge of staff nurses working in selected hospitals regarding palliative care.

Table IV-3: Table showing area wise Assessment of level of knowledge for history among staff nurses working in selected hospitals of the city.

				n=100
Knowledge for history (Total 6 question)	No of staff nurses responded correctly (f)	Percentage (%)	No of staff nurses responded wrong (f)	Percentage (%)
The word Palliative is derived from the root word 'Pallium'- which means, clock or	27	27	73	73
Palliative care is any form of treatment that concentrates on all, Except	44	44	56	56
Can Support organization was founded in Delhi in the year	21	21	79	79
The international association of palliative care was registered as public trust and society in	17	17	83	83
The Indian association of Palliative care was registered in	40	40	60	60
The founder of the palliative care movement was	28	28	72	72

Table IV-4: Table showing area wise Assessment of level of knowledge for palliative care and organization among staff nurses working in selected hospitals of the city.

n=100

				11 100
Knowledge for palliative care and organization (Total 10 question)	No of staff nurses responded correctly (f)	Percentage (%)	No of staff nurses responded wrong (f)	Percentage (%)
Palliative care is holistic care that include aspects that is knowing	80	80	20	20
All are the dimensions of palliative care except	30	30	70	70
The Indication for palliative care include	70	70	30	30

Palliative care can be implemented in	35	35	65	65
Palliative care team includes	85	85	15	15
When patient have loss of bladder and bowel control keep the patient in	31	31	69	69
Practical care and assistance needed to the patient in late stage care assist in	35	35	65	65
Respite care is given for a sick elderly and disabled person that is known as	35	35	65	65
In palliative care Grief support prepare the family for	48	48	52	52
Emotional comfort can be provided by	60	60	40	40

Table IV-5: Table showing area wise Assessment of level of knowledge for role of nurse and management of symptoms among staff nurses working in selected hospitals of the city.

				n=100
Knowledge for role of nurse and management of symptoms (Total 9 question)	No of staff nurses responded correctly (f)	Percentage (%)	No of staff nurses responded wrong (f)	Percentage (%)
In palliative care pain can be controlled mostly through	55	55	45	45
Major side effect of medication in cancer patient is	65	65	35	35
Xerostomia means	50	50	50	50
Xerostomia is managed through	36	36	64	64
Stomatitis is an inflammation of	45	45	55	55
Common side effect of chemotherapeutic drugs is	71	71	29	29
Alopecia is managed through	74	74	26	26
A comfortable and peaceful environment help in palliative care to	63	63	37	37
Promote spiritual comfort in palliative care through	46	46	54	54

Table No. IV-6: Table showing overall area wise Assessment of knowledge of staff nurses working in selected hospitals of the city with level of knowledge.

Area	Frequency (f)	Mean	SD	Range
History	6	1.77	0.86	0-4
Palliative Care and organization	10	5.09	1.18	2-7
Role of nurse and management of symptoms	9	5.05	1.53	1-8

Section IV: Description on association of knowledge score with selected demographic variables shows that.

There is association of knowledge score with age, professional education qualification, and year of experience and none of the other demographic variables were associated with knowledge score.

Discussion

AfafAbd El-Aziz Basal1, GehanAbd El-Hakim Younis (2017) conducted a descriptive study, to assess the critical care nurses' knowledge, practice, Obstacles and helpful measures toward palliative care for critically ill patients. Three tools were used for collecting data. Tool I is a structured interview questionnaire sheet to collect data about nurses' socio demographic data and knowledge. Tool II is an observational checklist for nurses' practice regarding palliative care and tool III is nurses' perception of obstacles and helpful measures towards palliative care for critically ill patients. The results of the study reported that more than three quarter (77.1%) and (48.6%) of critical care nurses in medical and oncology ICUs, respectively, had unsatisfactory score of knowledge. More than half (51.4%) and 25.7% of nurses in Medical and Oncology ICUs respectively had poor practice while more than one third (34.3%) and 40% of nurses in medical and oncology department respectively had good practice score.9

Conclusion of the Study

Three quarter (77.1%) and (48.6%) of critical care nurses in medical and oncology ICUs, respectively, had unsatisfactory score of knowledge. In present study 70% of the staff nurses had good level of knowledge score. 28% of the staff nurses had average level of knowledge score, 2% of the staff nurses had very good level of knowledge score. However none of the staff nurses were having excellent level of knowledge score and poor level of knowledge score.

Implication of the Study

The findings of this study have implicated in nursing education, community and medicine practice and research.

Nursing Practice:

- Health care services are an essential component of community health care nursing, the role of the personnel is to conduct and participate in national programme to increase knowledge related to palliative care among staff nurses.
- Information booklet would serve as a ready reference material for the health team members. The information is particularly useful for the nurses for educating the relatives and other health team members the benefits of palliative care.

Nursing Education:

- Nurse who are up to date with the knowledge regarding palliative care are the better person to impart their knowledge to the nursing student which will ultimately decrease the mortality related to diseases.
- Descriptive study will help to know the current knowledge of staff nurses. And will help the nurse educators to plan the teaching accordingly.
- Students must be given clinical field assignment, in which they
 must be given opportunity to interact with people and create
 awareness regarding palliative care.
- Teacher training programs must also include the palliative care.

Nursing Administration

- Findings of the study can be used by the Nursing Administrator in creating policies and plans for providing education to the staff nurses and health professionals.
- In-service education must be conducted for the nurses to create awareness regarding palliative care.
- E-learning education must be conducted for the nurses to create awareness regarding current concept of palliative care.

Nursing Research

- The findings of the study have added to the existing body of the knowledge in relation with knowledge of palliative care which will enhance the knowledge and would help to keep it updated. Even though the nurses knowledge was found to be good, many more areas can be improved with the help of study data.
- Researchers may utilize the suggestions and recommendations for conducting further study.
- The tool and technique used has added to the body of knowledge and can be used for further references.

Limitation

- The study was conducted only on staff nurses.
- The study was limited to measure the knowledge of staff nurses in selected hospitals of the city.
- The tool for data collection was prepared by investigator herself.
 Standardized tool was not used.

Recommendations

- A similar study can be replicated on a larger population for a generalization of findings.
- A Study may be conducted to evaluate the effectiveness of planned teaching programme on knowledge regarding palliative care.
- A similar study can be carried out to evaluate the effectiveness of video assisted teaching programme on knowledge regarding palliative care.
- A self instructional module can be used to assess the effectiveness on palliative care among staff nurses.
- A study can be carried out to evaluate the planned teaching programme on palliative care among staff nurses working in cancer hospitals.

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