

Palliative Care in LTC: Perspectives of Staff, Residents & Families

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Perspectives

- All Staff (PSW, nursing, maintenance, dietary, administration, housekeeping, etc.)
- Personal Support Workers
- Nursing Staff (RNs / RPNs)
- Families



All Staff

Quality in Action Scale Survey (QIAS)

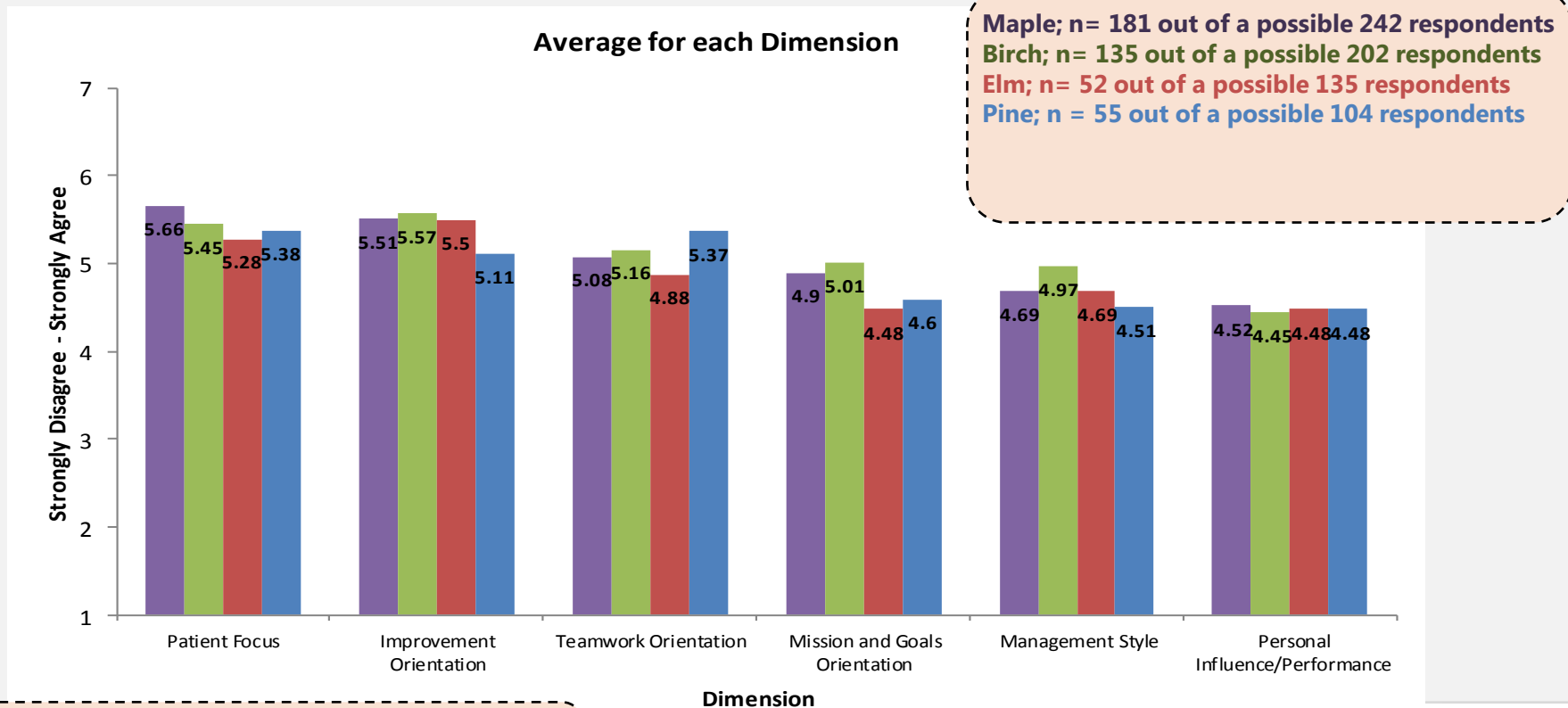
What is the QIAS survey?

The *Quality in Action Scale* (QIAS) survey was developed to measure the culture of healthcare institutions as it relates to quality. Six dimensions are measured (see chart)

<i>Dimension</i>	<i>Example</i>
<i>Patient Focus</i>	'Most people here think it is important to ask patients what they want.'
<i>Management Style</i>	'I can usually believe what I hear from management.'
<i>Teamwork Orientation</i>	'In this organization, people in different departments or programs try to help each other out.'
<i>Improvement Orientation</i>	'Trying to improve the way the work gets done is part of everyone's job.'
<i>Mission and Goals Orientation</i>	'Most people here know how their work contributes to this organization's mission.'
<i>Personal Influence/ Performance</i>	'In my work situation, I have little control over how things are done.'

All Staff

Quality in Action Scale Survey (QIAS)



Support Services included social work, spiritual care, life enrichment, volunteers and employees who designated themselves as "other".

All Staff

Frommelt Attitude Toward Care of the Dying (FATCOD)

What is the FATCOD Survey?

The *Frommelt Attitude Toward Care of the Dying (FATCOD) Scale* is a 30-item scale designed to measure participants' attitude toward providing care to dying people.

Maple overall average = 4.08 out of 5

Birch overall average = 4.07 out of 5

Elm overall average = 4.05 out of 5

Pine overall average = 4.06 out of 5



Personal Support Workers

Psychological Empowerment in the Workplace Survey (PEiW)

What is the PEiW survey?

The *Psychological Empowerment in the Workplace* (PEiW) survey was developed to measure four dimensions of work life.

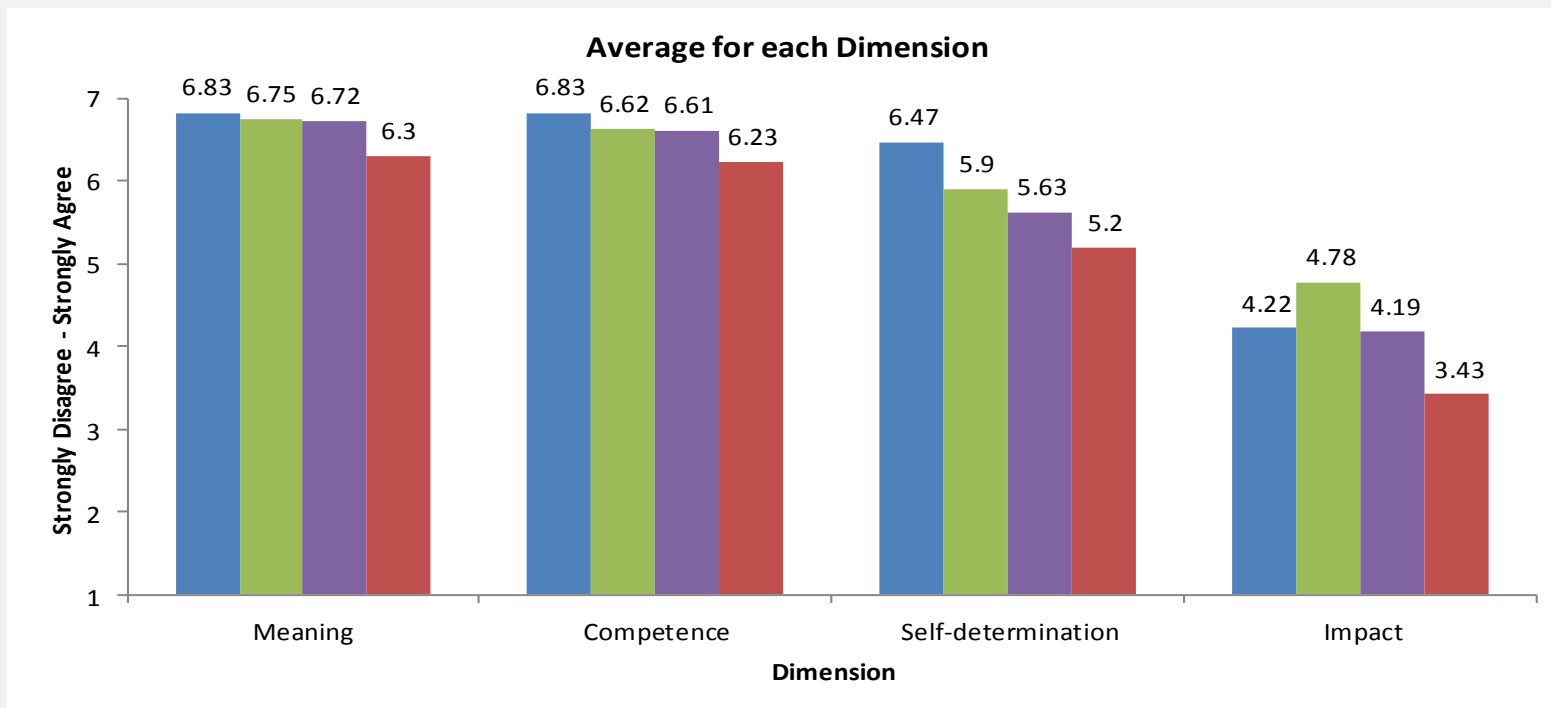
What is empowerment?

Empowerment is the state of feeling you have control of your own destiny. In the workplace, it includes the ability to think, behave, take action and control your work and decision-making in autonomous ways.

<i>Dimension</i>	<i>Example</i>
Meaning	'The work I do is meaningful to me.'
Competence	'I am self-assured about my capabilities to perform my activities.'
Self-determination	'I have considerable opportunity for independence and freedom in how I do my job.'
Impact	'My impact on what happens in my department is large.'

Personal Support Workers

Psychological Empowerment in the Workplace Survey (PEiW)



- Pine
- Birch
- Maple
- Elm

Pine; n= 24 out of a possible 44 respondents
Birch; n= 72 out of a possible 102 respondents
Maple; n= 86 out of a possible 124 respondents
Elm; n= 47 out of a possible 53 respondents

Personal Support Workers

Supervisory Support

What is the Supervisory Support Survey?

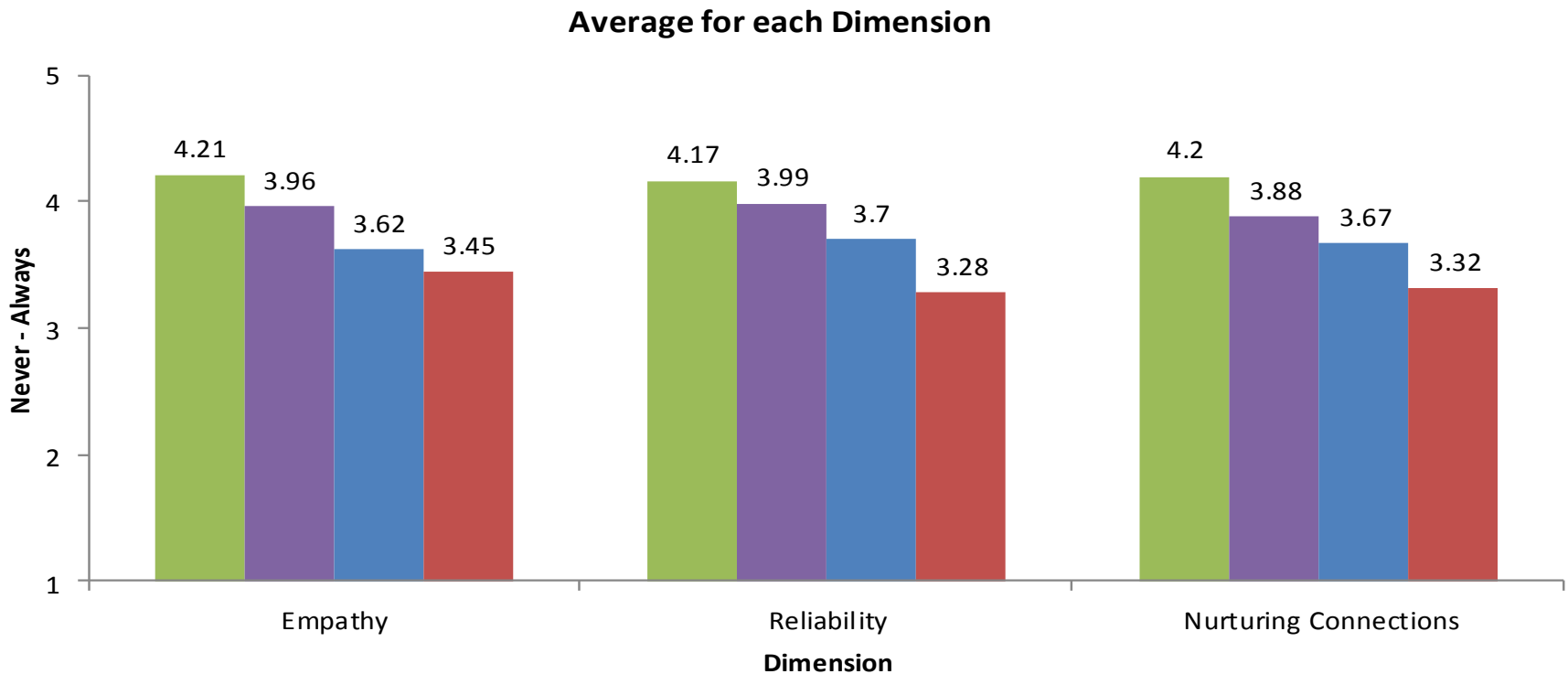
The *Supervisory Support Survey* was developed to measure three dimensions of supervisory support within long-term care settings.

<i>Dimension</i>	<i>Example</i>
<i>Empathy</i>	'My supervisor tries to meet my needs.'
<i>Reliability</i>	'I can rely on my supervisor when things are not going well.'
<i>Nurturing Connections</i>	'My supervisor respects me as a person.'

Personal Support Workers

Supervisory Support

Birch; n= 73 out of a possible 102 respondents
Maple; n= 86 out of a possible 124 respondents
Pine; n= 24 out of a possible 44 respondents
Elm; n= 31 out of a possible 53 respondents



RN and RPN

Self-Efficacy in End-of-Life Care

What is self-efficacy?

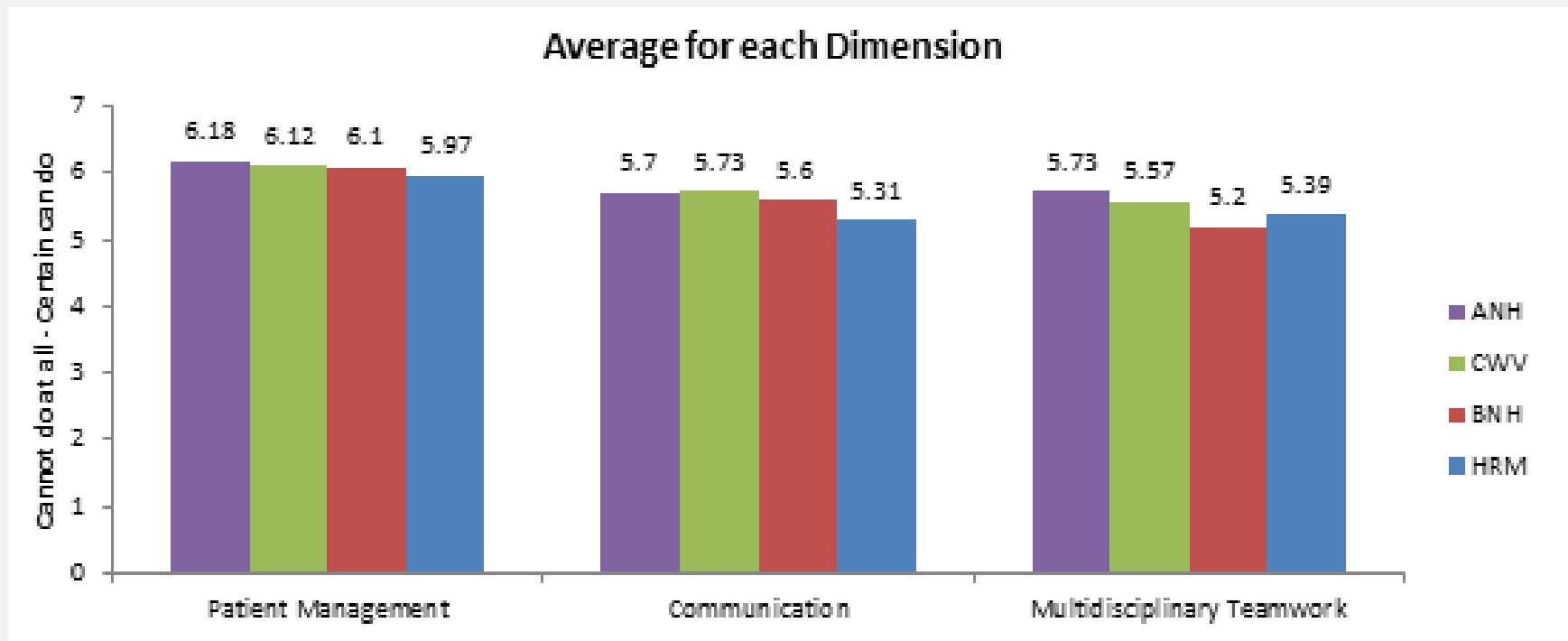
Self-efficacy refers to the belief in one's ability to perform a specific behaviour or skill.

<i>Dimension</i>	<i>Definition</i>
<i>Patient Management</i>	Subscale includes items related to assessing physical, emotional, and spiritual needs; managing common palliative symptoms; providing emotional support to both the client and family; and providing culturally-sensitive care.
<i>Communication</i>	Subscale includes items related to discussing the course of illness with the client and family, discussing issues related to death and dying, talking about specific client concerns, and responding to questions: "How long have I got to live?" and "Will there be much suffering or pain?"
<i>Multidisciplinary Teamwork</i>	Subscale includes items related to working with other professionals to provide palliative care and referring clients to other types of health care providers (i.e., occupational therapist, physical therapist, spiritual worker, social worker) and services (i.e., complimentary therapies, psychiatric assessment).

RN and RPN

ANH # of respondents = 27 out of a possible 43
CWV # of respondents = 22 out of a possible 42
BNH # of respondents = 11 out of a possible 16
HRM # of respondents = 8 out of a possible 18

Self-Efficacy in End-of-Life Care



RN and RPN

Palliative Care Quiz

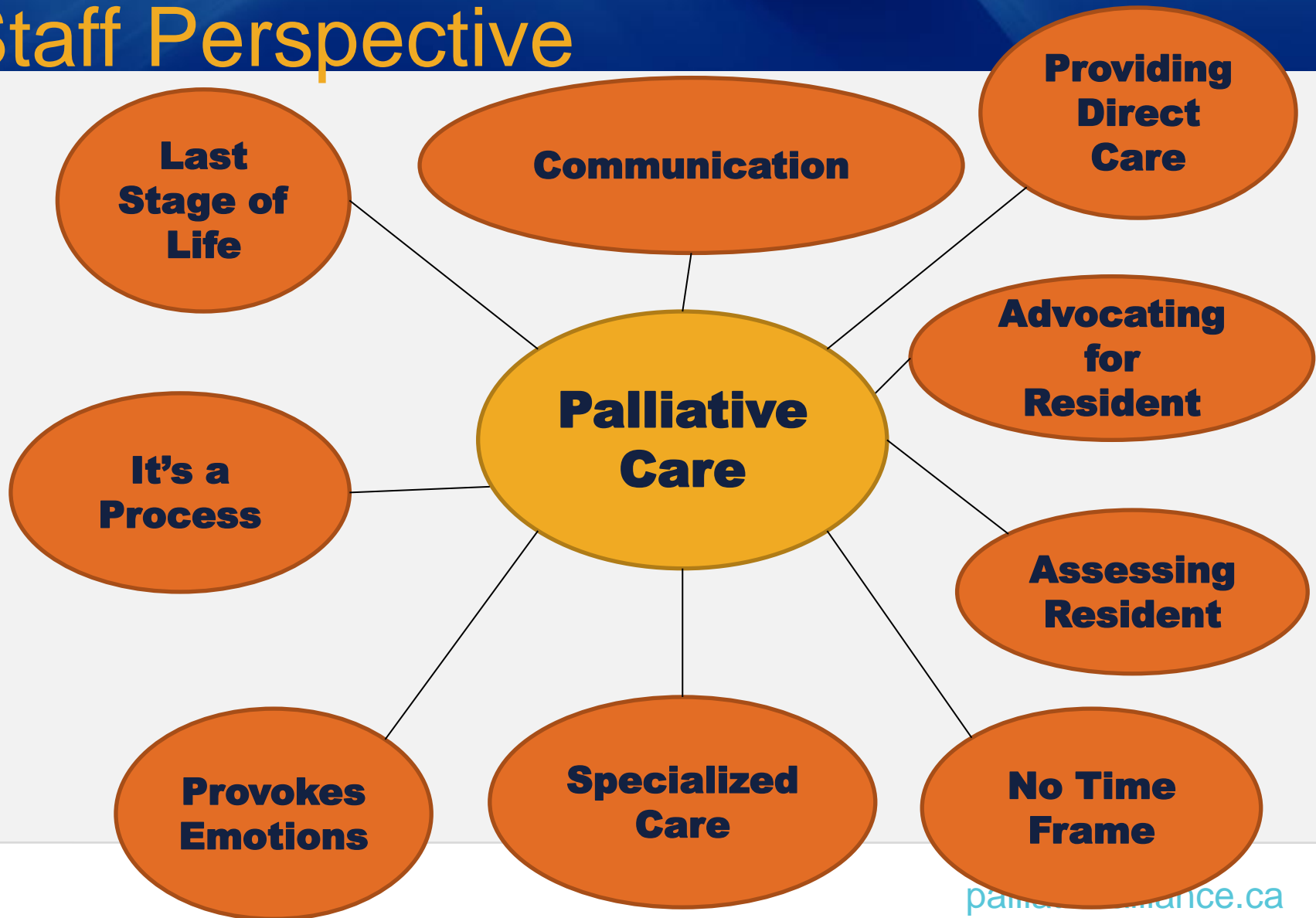
CWV # of respondents = 22 out of a possible 42
ANH # of respondents = 27 out of a possible 43
BNH # of respondents = 12 out of a possible 16
HRM # of respondents = 8 out of a possible 18

CWV average score = 63.4%
ANH average score = 62.98%
BNH average score = 62%
HRM average score = 52.5%

Example Questions: (True or False)

- Palliative care is only appropriate in situations where there is evidence of a downhill trajectory or deterioration. **F**
- Morphine is the standard used to compare the analgesic effect of other opioids. **T**
- The extent of the disease determines the method of pain treatment. **F**

What is Palliative Care Staff Perspective



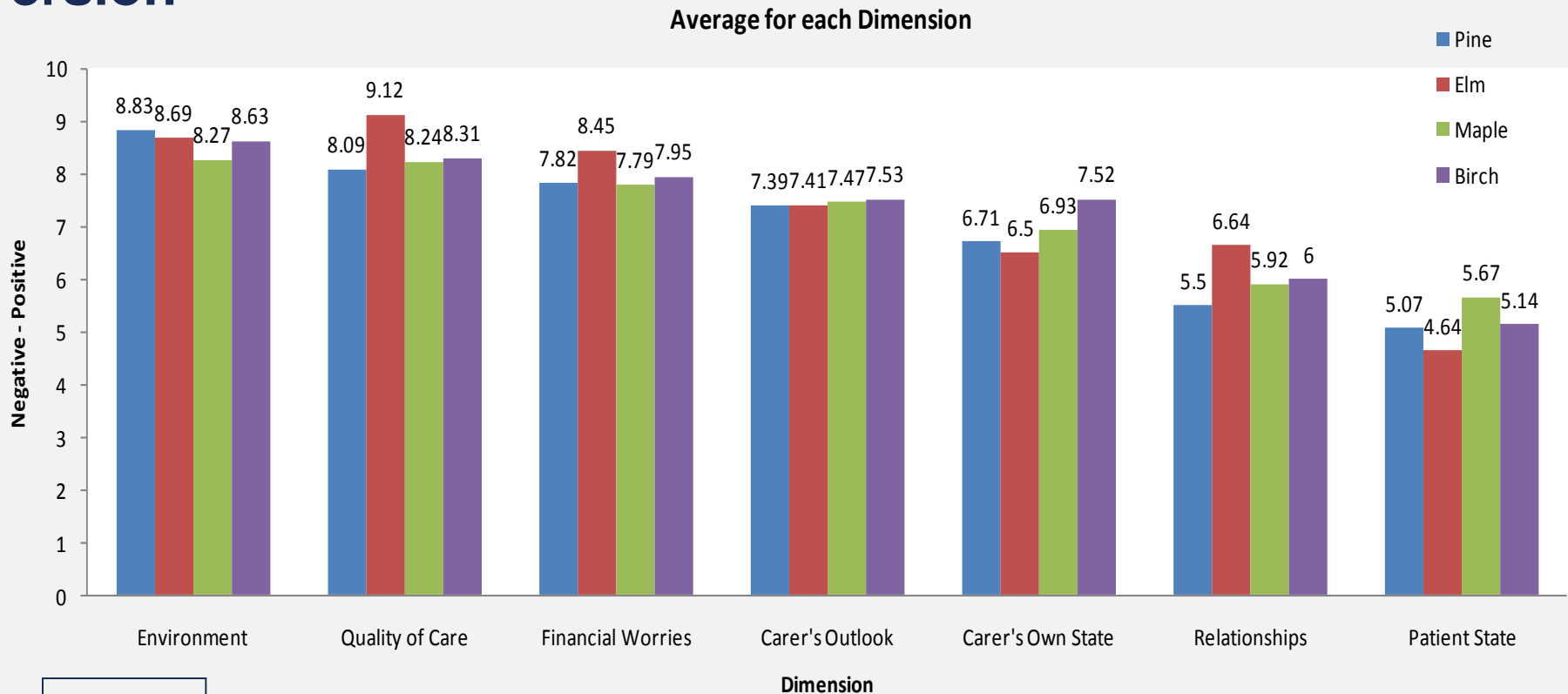
Families

Quality of Life in Life Threatening Illness: Family Caregiver Version

Dimension	Example
<i>Environment</i>	"I had the privacy I wanted"
<i>Patient State</i>	"The condition of _____ was distressing to me"
<i>Carer's Own State</i>	"I had time to take care of myself"
<i>Carer's Outlook</i>	"I was comforted by my outlook on life, faith, or spirituality"
<i>Quality of Care</i>	"I agreed with the way decisions were made for _____"
<i>Relationships</i>	"I felt my relationship with the people most important to me made my quality of life much better"
<i>Financial Worries</i>	"My financial situation has been stressful"

Families

Quality of Life in Life Threatening Illness: Family Caregiver Version



Pine; n=14
Elm; n=22
Maple; n=15
Birch; n=23