The Impact of Nursing Homes Staff Education on End-of-Life Care in Residents With Advanced Dementia: A Quality Improvement Study

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Abstract

Context. End-of-life care in nursing homes (NH) needs improvement. We carried out a study in 29 NHs in the Lombardy Region (Italy).

Objectives. To compare End-of-Life care in NH residents with advanced dementia before and after an educational intervention aimed to improving palliative care.

Methods. The intervention consisted of a 7-hour lecture, followed by two 3-hour meetings consisting of case discussions. The intervention was held in each NH and well attended by NH staff. This multicenter, comparative, observational study included up to 20 residents with advanced dementia from each NH: the last 10 who died before the intervention (pre-intervention group, 245 residents) and the first 10 who died at least 3 months after the intervention, (post-intervention group, 237 residents). Data for these residents were collected from records for 60 days and 7 days death.
Results. The use of “comfort hydration” (<1000 ml/day subcutaneously) tended to increase from 16.9 to 26.8% in the post-intervention group. The number of residents receiving a palliative approach for nutrition and hydration increased, though not significantly, from 24% pre- to 31.5% post-intervention. On the other hand, the proportion of tube-fed residents and residents receiving intravenous hydration decreased from 15.5% to 10.5%, and from 52% to 42% respectively. Cardiopulmonary resuscitations decreased also from 52/245 (21%) to 18/237 (7.6%) cases (p=0.002).

Conclusion. The short educational intervention modified some practices relevant to the quality of End-of-Life care of advanced dementia patients in NHs, possibly raising and reinforcing beliefs and attitudes already largely present.

**Key Words:** residential facilities, education; dementia; palliative care; nursing homes