Oral Defense Announcement
University of Missouri – St. Louis Graduate School

An oral examination in defense of the dissertation for the degree
Doctor of Nursing Practice with an emphasis in Adult Gerontology Nurse Practitioner

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Implementation of the Integrated Palliative Outcome Scale (IPOS) into Palliative Care Practice

Date: July 10, 2019
Time: 1:40 p.m.
Place: Nursing Administration Building

Abstract
Problem: The Visiting Nurse Association of Greater St. Louis (VNA) has a grant funded, Advanced Illness Management (AIM) program that has a goal of relieving the symptom burden in palliative care patients, thus improving quality of life. The Integrated Palliative Outcome Scale (IPOS) is a tool for providers to identify symptoms. In 2017, the IPOS was implemented at the VNA. It was determined in a previous project that IPOS symptoms were addressed by providers less than 95% of the time leaving patients to suffer from symptoms of chronic illness and reducing their quality of life.

Methods: Educational training sessions were developed for providers along with a “cheat sheet” of documentation tips to address burdensome symptoms identified in the IPOS. The education for providers included the importance of addressing all reported symptoms with pharmacologic or nonpharmacologic interventions such as patient education, physical therapy, or counseling services and the impact the interventions have on the AIM program, grant funding, and the quality of life for palliative care patients.

Results: The sample included 33 visits among 4 providers. The most common symptom was poor mobility, which was addressed and documented by providers 100% of the time, which is an improvement compared to the last study in which poor mobility was addressed only 67% of the time. Family anxiety was the next most commonly reported symptom with a documented intervention 72% of the time which is the same rate as the last study. Weakness was the third most commonly reported symptom with a documented intervention 93% of the time compared to 83% in the previous study. The most prevalent symptoms between the previous study and the current study are weakness, patient anxiety, family anxiety, poor mobility, depression, and not being at peace. The number of symptoms identified in the post-education group were fewer than the number of symptoms identified in the pre-education group. Prevalent areas such as weakness, poor mobility, and depression were treated greater than 90% of the time.

Implications for Practice: Palliative care focuses on improving the quality of life for chronically ill patients by managing the physical, psychosocial, and spiritual needs of the patient (National Hospice and Palliative Care Organization, n.d.). This project has demonstrated the need for a greater focus on addressing symptoms that negatively impact the quality of life for palliative care patients. Additional training is needed to adequately address psychosocial symptoms. Providers expressed concern over the extra time need for documentation. Additional efforts should focus on the reduction of documentation time which would allow more time for providers to collaborate with patients and families on interventions to address burdensome symptoms.

Defense of Dissertation Committee
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