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## **NH Staff Need More Than Workshops to Contribute to Care Quality Improvements for End-of-Life Residents**

Ensuring quality end-of-life care for long-term care facility (LTCF) residents is a key role for nursing home (NH) staff, who must provide goal-directed, personalized interventions to ensure comfort and quality of life for these individuals. At the same time, promoting advance care planning may decrease the need for hospital care and is associated with fewer emotional symptoms related to dying. However, according to a study in the August issue of *JAMDA*, training workshops for staff alone are unlikely to produce meaningful care quality improvements for residents at the end of life.

In *Effects of Staff Training on Nursing Home Residents' End-of-Life Care – A Randomized Controlled Trial*, the authors investigated whether learner-centered staff training in palliative and end-of-life care would benefit residents' health-related quality of life (HRQoL) or reduce their hospital stay in a two-year follow-up. They found that HRQoL, measured by a 15-Dimensional Health-Related Quality-of-Life instrument, declined in both the control and intervention groups during the 24-month study period.

Hospital inpatient days were similar between the two groups. Specifically, the intervention group had a mean 1.87 days/person/year in the hospital, compared to 0.81 days for the control group. Additionally, there was no difference in the mean number of emergency department (ED) visits. Ultimately, there was no difference in mortality between the two groups.

The authors suggested, "External palliative specialist nurse consulting on selected residents might reduce hospitalizations and improve quality of dying. Therefore, future training interventions should provide residents and families with information about advance care planning and equip facilities with the possibility for palliative care specialist consultation." They also observed that care team training "should note the different learning needs of different occupational groups such as physicians who have an important role in decisions about hospitalization and symptom management."

The study was conducted by researchers at University of Helsinki, Department of General Practice and Primary Health Care, Helsinki, Finland; Department of Social Services and Health Care, Helsinki Hospital, Geriatric Clinic, Helsinki, Finland; National Institute of Health and Welfare, Helsinki, Finland; Center for Life Course Health

Research, University of Oulu, Finland; and Helsinki University Hospital, Unit of Primary Health Care, Helsinki, Finland.

[Read the article](#) for more information on the findings above and more details about the study. To contact the researchers or *JAMDA* editor for an interview, please email [emullally@paltc.org](mailto:emullally@paltc.org).

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