

Addressing Terminal Cancer Pain in Hospice: A Quality Improvement Project

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Abstract

As the worldwide popularity of undertreatment surrounding cancer pain management especially in end of life (EOL) care continues, it is imperative for EOL healthcare clinicians to have the right tool and knowledge base to address such issue. This DNP project is developed with the intent to address the struggle and undertreatment of pain regarding adults experiencing a life-limiting illness (hospice patients). Terminally-ill patients commonly experience distressing symptoms such as pain. The new implementation of the cancer pain protocol can help bridge the gap of sub-optimal treatment surrounding pain control and management in the field of EOL or hospice care. This quality improvement (QI) project aims to improve EOL care practice and patients' outcome through optimal cancer pain management by improving pain levels and providers' compliance with the newly introduced cancer pain protocol intervention at the project site. This was demonstrated through the use of evidence-based research and theoretical framework design of the rapid-cycle improvement technique: Model for Improvement/Plan-Do-Study-Act (PDSA) Cycle to help deliver improvements in the quality and safety of healthcare (Taylor et al., 2014). The cancer pain protocol intervention positively impacted the hospice facility (project site) through reduction of pain rate levels and improvement of providers' protocol compliance as seen at the end of the QI project implementation phase (see data results/analysis).