



HPNA Position Statement

Ensuring High Quality in Hospice and Palliative Care

The Hospice and Palliative Nurses Association (HPNA):

- Advocates for nurses to be involved with healthcare reform measures which provide and increase access to high-quality, seamless, and affordable patient care. The goal is to improve patient safety and health outcomes for all individuals (perinates, neonates, infants, children, adolescents, young adults, adults, and older adults).^{1,2}
- Supports the eight domains of high-quality palliative health care established by the National Consensus Project's *Clinical Practice Guidelines for Quality Palliative Care* to improve access to high-quality palliative care, including coordination, communication, and cultural inclusivity.²
- Encourages nurses and other members of the interdisciplinary team (IDT) to strive to achieve high-quality health care. By working together, the members of the IDT strive to meet the physical, psychosocial, emotional, and spiritual needs of hospice and palliative patients and families facing serious illnesses, the end of life, and bereavement.³
- Promotes nurses' accountability to the public, as interdisciplinary interprofessional team members responsible for the quality of hospice and palliative care provided to patients and their families.^{4,5}
- Promotes nursing care consistent with the American Nurses Association's *Nursing: Scope and Standards of Practice* and HPNA's *Palliative Nursing: Scope and Standards of Practice*, including evidence-based practice and quality improvement.^{4,5}

Background

Hospice is a comprehensive, holistic program of care and support for terminally ill patients and their families. Hospice care focuses on comfort care and quality of life instead of curative-focused care.⁶

Palliative care is specialized, interdisciplinary care for people living with serious illness. The goal is to improve quality of life for both the patient and family. Palliative care is provided by a specially trained team of doctors, nurses, and other specialists who work together to deliver care. The goals of care are based on the needs of the patient, not on prognosis. It is appropriate at any age and at any stage in a serious illness, and it can be provided along with curative, restorative treatment.⁷



Quality Essentials

The timing of hospice and palliative care promotes quality and value. Integrating quality care principles ensures high-quality assessments, fosters quality measure reporting, and promotes consistency of care in palliative care programs. Consistency within palliative care is essential because programs vary by site of care, constellation of team members, and resources. Quality essentials involved with palliative nursing include education, program development, clinical practice, research, healthy environments, collaboration, and leadership.

- Nurses are first-line providers for patients' clinical care. They have a constant bedside presence and, therefore, are a vital link to quality.^{4,5,8}
- Hospice and palliative nurses generate new ideas and areas of focus to ensure consistently high-quality care in their clinical practice.⁹
- Nurses can lead, champion, and contribute to research and quality improvement through application of guidelines of the National Consensus Project for Quality Palliative Care or the National Quality Forum.¹⁰

Education

Education is a primary driver for safe, high-quality patient care. Hospice and palliative nurses receive fundamental knowledge and skills in palliative care from undergraduate and graduate nursing programs and through continuing education. In 2021, the American Association of Colleges of Nursing (AACN) released *The Essentials: Core Competencies for Professional Nursing Education*, which establishes updated core competencies for nursing students through four spheres of care. One of those spheres is hospice, palliative, and supportive care, which require all nurses to have knowledge and proficiencies to care for patients in this sphere of care, across the lifespan, and with diverse perspectives.¹¹

Program Development

In 2018, the National Coalition for Hospice and Palliative Care—a coalition of palliative care organizations from across the United States—released the fourth edition of the *Clinical Practice Guidelines for Quality Palliative Care* to promote quality through organized and structured evaluation of care. The purpose of the guidelines is “to promote access to quality palliative care, foster consistent standards and criteria, and encourage continuity of palliative care across settings. Because there is shared responsibility for delivery and quality of palliative care across healthcare settings and over time, the emphasis is on collaborative partnerships within and between all care providers to ensure access, quality, and continuity of palliative care.”² Hospice and palliative nurses can integrate quality initiatives at the bedside by implementing elements of the clinical practice guidelines within their work settings.



References

1. National Academy of Medicine. The Future of Nursing 2020–2030. Accessed June 2, 2023. Available at: <https://nam.edu/publications/the-future-of-nursing-2020-2030>
 2. National Consensus Project for Quality Palliative Care. *Clinical Practice Guidelines for Quality Palliative Care* (4th ed.). National Coalition for Hospice and Palliative Care; 2018. Accessed June 2, 2023. Available at: <https://www.nationalcoalitionhpc.org/ncp>
 3. Rugh D. *Chapter 1: Patient Care: Assessment and Planning*. In: Martin B, Stokes T (Eds.), *Core Curriculum for the Hospice and Palliative RN* (5th ed.). Hospice and Palliative Nurses Association; 2022.
 4. American Nurses Association. *Nursing Scope and Standards of Practice*. Silver Spring, MD: Nursingbooks.org; 2021.
 5. Dahlin C. *Palliative Nursing: Scope and Standards of Practice* (6th ed.). Hospice and Palliative Nurses Association; 2021.
 6. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Hospice. Accessed June 2, 2023. Available at: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Hospice>
 7. Center to Advance Palliative Care. *Definition of Palliative Care*. Accessed May 17, 2023. Available at: <https://getpalliativecare.org/whatis/>
 8. National Academy of Medicine; National Academies of Sciences, Engineering, and Medicine. *Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being*. National Academies Press; 2019.
 9. Cohen MG, Althouse AD, Arnold RM, et al. Primary palliative care improves uptake of advance care planning among patients with advanced cancers. *J Nat Can Cen Net*. 12023;21(4):383-90. doi: 10.6004/jnccn.2023.7002.
 10. National Quality Forum. *Palliative Care and End-of-Life Care*. Accessed May 18, 2023. Available at: https://www.qualityforum.org/Topics/Palliative_Care_and_End-of-Life_Care.aspx
 11. AACN. *The Essentials: Core Competencies for Professional Nursing Education*. Accessed May 18, 2023. Available at: <https://www.aacnnursing.org/Portals/0/PDFs/Publications/Essentials-2021.pdf>
-



HPNA thanks the following individuals for their contributions to this position statement:
Constance Dahlin, MSN, ANP-BC, ACHPN, FPCN, FAAN, Amisha Parekh de Campos, PhD, MPH, RN, CHPN, and Betty Ferrell, PhD, FAAN, FPCN, CHPN.

This statement reflects the best available evidence at the time of writing or revisions.

Approved by the HPNA Board of Directors August 2021

Copyright ©2021, 2013, 2009 by the Hospice and Palliative Nurses Association

To obtain copies of this statement, please visit www.hpna.org.