Lessons learned from introducing “Last-Aid” courses at a university hospital in Germany

Evelyn Mueller,1 Georg Bollig,2,3,4 Christopher Boehlke,1,4
1Clinic for Palliative Care, Medical Center, University of Freiburg, Faculty of Medicine, Freiburg, Germany
2Palliative Care Team, Medical Department Sønderborg/Tønder, South Jutland Hospital, Sønderborg, Denmark
3Palliative Care research group, Medical Research Unit, Institute of Regional Health Research, University of Southern Denmark
4Last Aid International, Schleswig, Germany
Palliative Care research group, Medical Research Unit, Institute of Regional Health Research, University of Southern Denmark
Palliative Care Team, Medical Department Clinic for Palliative Care, Medical Center, University of Freiburg, Faculty of Medicine, Freiburg, Germany

Background
The “Last-Aid” course curriculum has been created by an international working group to educate citizens about the care of the dying. Over the last three years “Last-Aid” courses were successfully established in the community setting in several European countries. We hypothesized that education needs concerning care of the dying are especially high in hospital staff not directly involved in the treatment of patients, because care of the dying is not included in their vocational training. However, they are often indirectly involved in the processes of dying patients.

Aims:
To introduce “Last-Aid” courses at a university hospital and evaluate their acceptance.

Methods
The courses are comprised of four sessions a 45-minutes:
1. care at the end of life
2. advance care planning and decision making
3. symptom management
4. cultural aspects of death and bereavement

The courses were announced on the hospital’s intranet platform and evaluated by an anonymous survey in the last session including Likert-scales and open response questions. Each course was held with 17-20 participants.

A pre-survey was conducted using open questions (33 participants) to assess goals and expectations of participants. The answers were categorized and formed the basis for the items of the goals in the final survey (Figure 3).

Results
all offered three courses were fully booked (n=56)
55 of 56 (98.2%) participants took part in the evaluation survey

Who attends to “Last-Aid” courses in a hospital setting?

full range of professions reaching from hairdresser, laboratory staff, administration, but also nurses and physicians
78% (n=43) non-medical personal
mean age of participants: 48 years (sd=14.2), 94% women (n=52)

How much direct contact to patients do participants have?
Heterogeneous population of participants: staff with and without patient contact registered for “Last-Aid” courses.

4. Discussion/Conclusion

• “Last-Aid” courses were well accepted and helped to reduce information deficits on care of the dying in a heterogeneous population of hospital staff
• Feeling burdened by death and dying in a professional or private context seems to be a main reason for staff to attend the courses: burdened personal had specific learning goals: supportive services and facilities, preparation for emotional aspects of death and dying, and preparation for medical / nursing aspects
• Medical staff in contrast to non-medical staff asked for courses with an extended curriculum, in order to meet their learning goals
• “Last-Aid” courses were more suitable to educate non-medical hospital staff about care of the dying

References