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Delirium is a complex syndrome and has a difficult diagnosis in early stages.

**Aims:** To determine the frequency of Delirium in palliative patients admitted to two hospital units, a short stay (SS) and a medium-large stay (MLS), describe the characteristics of patients and delirium, and the utility of the Memorial Delirium Assessment Scale (MDAS).

**Methods:** Prospective longitudinal study of patients with advanced disease hospitalized) for a period of 1 month. We use MDAS as clinically screening and follow up in the 1st, 3rd and 7th day. We excluded patients with language barriers or low conciseness, severe cognitive impairment or mayor psychiatric illness.

**Results:** N: 55 patients: 32 (SS) and 23 (MLS), 25% were lost by lack of monitoring. The median age was (67:75), mean of Palliative Performan Status (PPS) (60:40). The mean drugs during hospitalization (15:8). The most common psychoactive drugs: corticosteroids opioids and benzodiazepines. Delirium prevalence: 20 (49%), being more frequent in the SS: 45%, reversibility was (50%:20%), median severity at diagnosis was low-moderate in both units. The most frequent type and cause was hypoactive and infectious (53%). Died after the diagnosis (62%:80%) with lower survival in MLS. Psychoactive drugs were slightly modified after diagnosis All patients started neuroleptic or increase doses after diagnosis (54%). The MDAS tool was useful for the diagnosis and evaluation. We found difficulties in the assess of the global cognitive: disorientation, short-term memory impairment, impaired digit span, and disorganized thinking in patients with excessive sleepiness or fatigue.

**Conclusions:** The prevalence and the type of delirium were similar to other studies. UCE seems to have higher prevalence and reversibility and patients were exposed to more number of drugs. Infectious cause was high. We found difficulties in the application of MDAS in patients with low PPS. The results are not definitive because of a preliminary sample.

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### A Qualitative Evaluation of the Intervention Project „Hospice and Palliative Care in Nursing Homes” in Eight Nursing Homes, a Two Year Process

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**Background:** From 2009 to 2012 Hospice Austria carried out the intervention project “Culture of Hospice and Palliative Care in Nursing Homes” (a 2-year organizational development process including advanced training in palliative geriatrics, in which 80% of all employees participated.) The NPO-Competence Center of the Vienna University of Economics and Business was commissioned with the implementation of an evaluation.

**Aims and questions:** The evaluation surveyed the effects of the intervention project and analyzed it against the background of the goals stipulated.

**Main scientific question:** What effects does the intervention project have on the most significant target groups?

**Methods:** A multiple case study design was chosen in which two respectively three pilot nursing homes were selected as subjects for a single case study. Upon completion of the intervention a pre-post design was used to determine the changes in comparison to the initial state. In addition, surveys were taken during the project which enabled feedback on the results.

**Results:** Hospice culture and palliative care have been anchored to a higher degree in everyday life in the homes. An active debate about the topic took place amongst employees. Palliative groups and palliative care representatives in the homes have become an integral part of everyday life. Interdisciplinary cooperation has been improved. Personal wishes of tenants during the end stage of dying are being better met, complementary therapies have increased and pain therapy was improved. Relatives and other loved ones are better informed about the topic and more strongly integrated. It became apparent that medical care and palliative medical care are insufficient and recurring personnel shortages occur.

**Conclusion:** Due to the project, overall improvements regarding quality on the various levels could be achieved, for tenants as well as for caregivers and relatives.

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### Preliminary Validation of the Spanish Version of the Frommelt Attitudes toward Care of the Dying Scale (FATCOD)

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**Aims:** The attitudes that student nurses may hold towards end-of-life care is a key aspect to consider during their

training. Using a sample of nursing students the aim of this validation study was to analyse the psychometric properties of the Spanish version of the Frommelt Attitudes Toward Care of the Dying Scale (FATCOD) and to examine its relationship with other variables.

**Method:** Subjects. Participants were 423 nursing students (79 males and 344 females) with a mean age of 22.43 years (SD= 5.34, range 18-47). Instruments. Participants responded to a questionnaire that contained the Spanish versions of the following instruments: a) Frommelt Attitudes Toward Care of the Dying Scale (FATCOD); b) Trait Meta-Mood Scale (TMMS-24); and c) Collett-Lester Fear of Death Scale (CLFDS). Procedure. After obtaining permission from the scale's author a Spanish version of the FATCOD was produced by means of a back-translation procedure involving four bilingual professionals. The nursing students responded individually and voluntarily to the questionnaire (three scales) in a usual classroom setting. Anonymity and confidentiality were ensured throughout the process.

**Results:** Analysis of the internal consistency of the Spanish version of the FATCOD yielded an alpha value of 0.78. This was followed a principal components analysis with varimax rotation. Although the scree plot shows the existence of two significant factors, the factor loadings' distribution suggests that it should be used as a unidimensional scale. Finally, the correlation coefficients showed that the FATCOD was positively and significantly correlated with the TMMS, and negatively and significantly correlated with the CLFDS.

**Discussion:** The results indicate that the Spanish version of the FATCOD has similar psychometric properties to those of the original scale. Therefore, it can be regarded as a valid instrument for assessing the attitudes of Spanish-speaking nurses towards end-of-life care.

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### **Life or Death - A Ten-year Nationwide Follow-up of Parents of Children with SMA Type 1 or 2**

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**Aim:** Overall aim is to obtain information on how parents perceive their involvement and decision-making in the care of their child with spinal muscular atrophy, SMA type 1 or 2, with severe respiratory distress during the first year. Besides medical care, it entails the ultimate question about life or death.

**Method:** The questionnaires were developed based on interviews with 8 bereaved and non-bereaved parents of children with SMA. The questionnaire was then tested on parents of children with SMA born earlier than year

2000 or later than 2010. The reference group of parents and health care professionals also participated in the improvement of the questionnaires. The National Board of Health and Welfare was contacted to identify children born between the years 2000 to 2010 in Sweden and later diagnosed with SMA type 1 or 2. Subsequently, we identified the parents through the Swedish Tax Agency. Sixteen parents of eight living children with SMA type 1-2 and 62 bereaved parents of 32 deceased children were sent a letter of invitation in mid February 2013. In order to be eligible for the study parents had to have an identifiable phone number. Seventy parents of 37 children have been contacted personally by phoned and asked about their willingness to participate. Four parents declined participation, all of them bereaved. Subsequently a questionnaire was mailed to those who agreed to participate. Descriptive statistics will be used to analyze data besides content analysis of free hand comments by the parents.

**Results:** Until now 13 of 14 parents (93%) of a living child with SMA and 45 of 56 bereaved parents (80%) have responded. Among the eligible, all but one child is represented in the study by at least one parent.

**Significance:** The project is expected to provide guidance from parents of children with SMA complicated with respiratory distress during the first year to health care professionals on how to improve care and information on treatment and prognosis.

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### **Online Learning: A Scoping of the Literature for a Study in Integrated Palliative Care**

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**Background:** A study of patient-centered integrated palliative care pathways in advanced cancer and chronic disease, InSup-C (EC FP7 funded) plans to develop online learning modules to disseminate and promote best practice in this field across Europe.

**Aims:** To identify the key components of effective online learning models in higher and professional development education with particular reference to palliative and end of life care contexts.

**Methods:** A search was conducted for papers that reported peer reviewed studies using MEDLINE, ERIC, CINAHL, AMED, PsycINFO and Academic Search Complete databases. The main subject term: online learning, was used in combination with evaluat\*, research, palliative, and end of life as free text terms. This yielded 1441 results. Further filtering and removing duplicates reduced this to 1084 of which 26 papers were selected for narrative review. Of