American Association of Heart Failure Nurses Position Paper in Response to ANA and HPNA Call to Action: Nurse Lead and Transform Palliative Care

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Reviewed by AAHFN Advocacy Committee:

Background:

In March 2017, the American Nurses Association Board of Directors approved a call to action document imploring the nursing community to make bold actions to support seriously ill and injured patients, families, and communities in delivery of quality palliative care in all care settings and by every nurse. The Steering Committee for this document identified five palliative care focus areas to examine: practice, education, administration, policy and research and further made recommendations for action within these focus areas (1).

Heart Failure (HF) nurses are intimately involved with providing care to patients and their families across the continuum of HF care from acute to chronic and often chronic to acute as well as the progression of the disease. In addition, HF nurses provide assistance with advance care planning and how to live with a chronic illness as well as enhance decisional communication to assure goal concordant care. Foundational to all stages of HF care is treatment of the disease including palliation of symptoms and addressing goals of care (3,4). However, per the call to action paper, research suggests there is limited education and implementation of palliative care to this population. Per the Call to Action, the American Association of Heart Failure Nurses (AAHFN) is challenged to provide leadership and strong action in this edict (1).

Heart failure remains one of the fastest growing cardiovascular diseases today, with more than 600,000 new cases per year and continues to hold a 5 year, nearly 50% mortality (3). In addition, HF management remains quite challenging; due to changing symptomology and natural disease progression. Palliation of symptoms and advance care planning are a principal care requirement for management of this disease, in addition to expert communication which arms patients and their families with the knowledge necessary to manage expectations and outcomes (4).

Position Statement:

Based on the aforementioned Call to Action, the American Association of Heart Failure Nurses (AAHFN) intends to take an active role in the integration of palliative care, as mandated in the following areas: practice, education, administration, policy and research.

Practice:

1. Develop and support Palliative Care experts within our organization.
2. Partner with organizations such as Hospice and Palliative Nurses Association and Daisy Foundation.
3. Provide access to training, such as End of Life Nursing Education Consortium (ELNEC) and continuing education at AAHFN live meetings, webinars.
4. Link existing education material to AAHFN website and other reputable external sources.
5. Create an advisory panel for palliative care issues. Panel should be ELNEC-prepared or certified in Palliative Care.

**Education:**

1. Ensure that Certified Heart Failure Nurse (CHFN) certification provides validation in principles of Palliative Care.
2. Provide AAHFN faculty’s expertise to other organizations to develop innovative palliative care solutions, models, and common approaches unique to the HF population.
3. Create and provide appropriate curriculum and education to be delivered via annual meeting, additional live education and webinars.

**Administration:**

1. Support the development of innovative care models and strategies that incorporate Nursing as primary Palliative Care providers.
2. Encourage increased on the job Palliative Care training for Nursing.
3. Collaborate with certifying and accrediting organizations whom encourage primary Palliative Care education and inclusion in care.

**Policy and Advocacy:**

1. Understand and trend state and federal regulatory initiatives and guidelines.
2. Provide educational resources to patient, families, communities, populations, peers and organizations.
3. Advocate for Palliative Care issues at the state and national levels.

**Research:**

1. Facilitate Palliative Care research considering anticipated Nursing and Physician shortages.
2. Study the role and benefit of primary Palliative Care skills when specialty Palliative Care experts may not be available in all settings.
3. Address the need for workforce wellness among Palliative Care providers by examining the complex factors related to fatigue, burnout and sustainability.

**Conclusion:**

Heart failure care is a specialty within Nursing which provides Palliative Care at all phases of the disease process and across the care continuum. The American Association of Heart Failure Nurses (AAHFN), as an organization, is poised to support, educate and drive practice which enhances the care to patients, families, and population. The Call to Action provides guidance for the ultimate goal of better resource allocation, increased fiscal responsibility and improved patient outcomes.
References


