



# Certified Physician Assistants' perceptions of PA education in preparing for end-of-life discussions



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## INTRODUCTION

- End-of-life (EOL) care involves the medical and emotional management of terminally ill patients and their families.
- Certified Physician Assistants (PA-Cs) must be trained and prepared to facilitate EOL care discussions.
- According to the 5th edition of the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) Accreditation Manual for Standards, as of 2020, the curriculum must include instruction in palliative and EOL care through classroom and clinical exposure.
- There is a gap in the literature when it comes to evaluating PA education on EOL conversations. Previous studies involve medical students, residents, and nurses, but fail to assess the PA school curriculum.

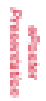
## PURPOSE

- The purpose of this observational study is to investigate whether PA-Cs perceive that their PA education and clinical exposure were effective in preparing them for EOL discussions in their professional careers.

## METHODS

- Inclusion Criteria**
- PA-Cs who have practiced for at least 1 year.
  - PA-Cs with post-graduate EOL discussion exposure.
- Exclusion Criteria**
- PA-Cs who have practiced for less than 1 year.
  - PA-Cs with no post-graduate EOL discussion exposure.

- Wagner College IRB approval was granted.
- An a priori power analysis revealed that the minimum sample size needed to achieve significance was 142 respondents at an 80% power and  $\alpha = .05$  (G-power Version 3.1.9.6 [Germany]).
- Survey was adapted from a previous study, C-COPE<sup>®</sup> with a content validity index of 0.94 with strong internal consistency and stability.
- An anonymous survey created using SurveyMonkey<sup>®</sup>(San Mateo, CA) and was electronically distributed to AAFP state chapters, social media groups, and clinical rotation preceptors.
- Sample size was  $N = 184$  respondents.
- Data analyzed with IBM SPSS Statistics Version 26 (Armonk, NY).



• Data analyzed with IBM SPSS Statistics Version 26 (Armonk, NY)

Figure 1

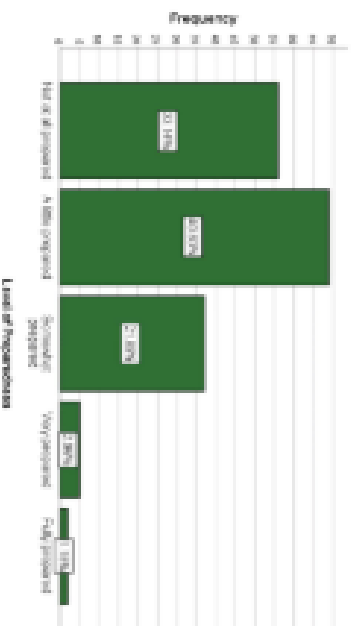


Table 1

Variables	n	Spearmann rho	p value
Number of EOL discussions in PA school with post-graduate PA	169	0.452	< .01
Level of post-graduate PA with EOL discussions with terminal patient/their families when graduating PA school	169	-0.421	< .01
Number of EOL discussions in professional practice with post-graduate PA	169	-0.409	< .01
Level of ability talking with families about EOL concerns	169	-0.409	< .01
Number of EOL discussions in professional practice with post-graduate PA	169	-0.409	< .01
Level of ability talking with families about EOL concerns	169	-0.409	< .01

Respondents who prepared PA-Cs felt to have EOL discussions with terminal patients and their families after graduating from PA school. 73.5% of respondents reported that they felt not at all prepared or only a little prepared to have these conversations.

Displays Spearman's Rho correlation coefficients. The first correlation shows that those who reported fewer EOL discussions in PA school, were less prepared to facilitate such conversations in their professional practice. Likewise, the less EOL discussions PA-Cs had, the more difficult they found it to have conversations with patients and their families.

## CONCLUSIONS

- There is a significant relationship between education and clinical exposure regarding EOL discussions as PA students and preparedness to facilitate such discussions as PA-Cs.
- There is minimal training on EOL discussions and discussing death or dying with patients while in PA school.
- PA-Cs felt they were not prepared to have these discussions.
- The fewer EOL discussion participants had in their careers, the more difficult they found it to have conversations with patients and their families.

**Educational Reference**  
 EOL discussions between PA-Cs, patients, and their families: what conversations need to do its part in preparing PA-Cs for these conversations.

**Recommendations**  
 Providing SIM Lab and Case Studies on EOL care cases. Incorporating a Long Term Care setting rotation into each student's clinical schedule. Advising preceptors to allow students to observe EOL conversations with patients and families.

