Background

• Death is a common event in hospitals and other healthcare facilities. (Gomes & Higginson, 2008; Hand, 2013)
• The majority of these patients will receive some form of post mortem nursing care.
• Interventions used in post mortem care are largely derived from tradition rather than evidence.
• Policies concerning post mortem care vary by institution (Smith-Stoner & Hand, 2012)
• Mortuary practitioners are the next care giver and in a position to provide an expert opinion concerning the effectiveness of post mortem nursing care.
• Similar research has occurred and been published (Hand, 2013, Hand, 2014), but within the geographic confines of a single Midwestern state.
• Further inquiry is needed with a larger geographic scope.

Methods: Approach & Sampling

• A qualitative descriptive approach is used.
• A convenience sample of approximately 200 mortuary practitioners will be contacted via email and phone and invited to participate.
• Participants complete an open ended web based questionnaire addressing the following areas pertaining to post mortem nursing care:
  • Positioning of the body
  • Use of ties and ligatures
  • Removal of tubes and drains
  • Oral Care and Denture Appliances
  • Bathing and Sanitation
  • Labeling and Shrouding

Methods: Data Analysis

• NVIVO qualitative analysis software will be used in data analysis.
• Steps in data analysis include:
  • Reading each response several times
  • Initial coding to identify themes
  • Clustering based on similarity
  • Elimination of duplication, final theme labeling.
  • Identifying key exemplars. (Hand, 2013; Smith-Stoner & Hand, 2012; Stoner, Hand, & Foley, 2010)

Results and Discussion

• Data collection and analysis is currently in progress. It is anticipated that results will be available June 2015.

Implications

• Potential implications include:
  • Education- Curricular modifications pertaining to post mortem nursing care based evidence.
  • Practice- Opportunity to approach post mortem care and the development of policy and procedure from a perspective of evidence versus tradition.
  • Research- Strong need for further inquiry on an international level and to examine how patient/family preferences are incorporated into post mortem nursing care.

References


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