Developing Skills in Evidence Based Palliative Care

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Introduction
That palliative care is high quality and evidence-based is one of the guiding principles of the 2018 Australian National Palliative Care Strategy. Evidence-based practice is the provision of care informed by the best available evidence and clinician experience which respects patient preferences and values.

Evidence-based practice in palliative care therefore requires the clinician to consult with the person and their family to plan care in accordance with individual preferences and values, available resources, and standards of best practice. With a rapidly growing and varied body of palliative care research, this can represent an overwhelming prospect for both the experienced and inexperienced clinician.

What is Evidence?
Evidence is information that comes closest to the facts of a matter. The form it takes depends on the context. The findings of high-quality, methodologically appropriate research are the most accurate evidence. Because research is often incomplete and sometimes contradictory or unavailable, other kinds of information are necessary supplements to or stand-ins for research. The evidence base for a decision is the multiple forms of evidence combined to balance rigour with expedience – while privileging the former over the latter.

Why use Evidence?
Evidence informs our choice of appropriate treatment and services by highlighting potential benefits and harms of what we do. It is an important part of evidence-based practice.

Begin with the right question
Whether you want to generate research evidence or use it, defining a question that is relevant and answerable is a key starting point. In many cases this can be as simple as defining the population of interest, the intervention or what is being done, what we are comparing this to, and the outcome or what we expect to happen.

Take the test: A commonly used aid to formulate a research question is P.I.C.O. What do each of the letters stand for?

Level of Evidence
Levels of evidence are defined based on potential for bias, this forms the evidence hierarchy or pyramid.

Evidence in Palliative Care
In palliative care research the use of the most rigorous individual research design, randomised controlled trials (RCTs), is growing.

However, cohort- and case-control studies based on observation without randomisation, and qualitative studies based on interview are more common. As with most study types there are guidelines on how these studies should be conducted and reported. Adhering to this allows study quality and relevance to be appraised.

Using Evidence
When using evidence to inform decision making it is important to consider your local context and the quality of any evidence. Systematic reviews combining multiple studies to assess outcome consistency and generalisability are placed at the top of the evidence hierarchy. However, review quality must also be considered before including them in any decision-making.

Conclusions
CareSearch simplifies the process of finding and applying evidence in palliative care. Here we have examined some important basics required to make use of the increasing volume and variety of research evidence in palliative care.

References:

Finding out more
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