



Post Mortem Nursing Care Effectiveness as Perceived by Mortuary Practitioners

Mikel W. Hand, EdD, MSN, RN, OCN, NE-BC, NEA-BC

Assistant Professor of Nursing



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.

Purpose/Aims

- The purpose of the study is to examine post mortem nursing care effectiveness from the perspective of the Mortuary Practitioner.
- Specific aims are:
 - To describe how commonly observed post mortem nursing care interventions are perceived to help or hinder achieving a desired cosmetic appearance of the deceased patient.
 - To identify and describe recommendations for alternative care practice that differ from what Mortuary practitioners commonly observe.

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)

Acknowledgement: This study has been funded by a University of Southern Indiana 2014 Faculty Research Creative Work Grant: \$4094.00

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

- Gomes, B., Higginson, I.J. (2008) Where people die (1974-2030): past trends, future projections and implications for care. *Palliative Medicine*, 22(1), 33-41.
- Hand, M.W. (2013) Postmortem/last offices nursing care effectiveness as perceived by US licensed funeral directors. *End of Life Journal*, 3(4), 1-9.
- Hand, M.W.* (2014). Lasting Impressions: Using the perspective of the funeral director to guide post mortem nursing care practice. *MedSurg Matters*, 23(6), 4-6.
- Smith-Stoner M., Hand M.W. (2012) Expanding the concept of patient care: analysis of postmortem policies in California Hospitals. *Medsurg Nursing*, 21, 360-366.
- Stoner, M., Hand, M.W., & Foley, R. (2010) Patients with cancer: Experiences of medication management. *Journal of Hospice and Palliative Care Nursing*, 12, 105-106