

T12 Effectiveness of an Interdisciplinary Pediatric and Neonatal Palliative Care Simulation Program in India

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Background & Significance: Palliative care is a human right to which all children should have access; however, pediatric and neonatal palliative care resources are limited in India. The World Health Organization identified the nation of India as having the poorest inequity score for newborn and child health in the Southeast Asian Region. This disparity underscores the need for improved healthcare access and services for children, particularly those in underserved and limited resource regions.

Purpose: The purpose was to determine the impact of a pediatric and neonatal palliative care education and simulation program among health providers and ancillary support team in India. A secondary aim was to assess relationships between sociodemographic variables, health provider and ancillary support team expertise, and their pre-/post-test results.

Problem: A 2019 needs assessment conducted by US (United States) and Indian nursing and medical faculty and clinicians, specifically revealed a gap in neonatal and pediatric palliative care services offered by hospital facilities in the Bengaluru region.

Methods: A quantitative one-arm pre-test/post-test and descriptive correlational design was used to determine the impact of the interprofessional pediatric and neonatal palliative care education and simulation program among health providers and ancillary support team in India. The sponsoring university IRB determined it to be Non-Human Subjects Research.

Results: Post-intervention scores were significantly higher than pre-intervention scores for self-assessment, education assessment, and knowledge assessment of the Indian healthcare team. The mean score of barriers to palliative care utilization had no significant difference between the pre- and post-intervention.

Discussion/Conclusions: A three-day educational and simulation workshop was developed and held in Bengaluru, India. Data collected demonstrated that following the educational and simulation intervention, health care provider knowledge of palliative care increased. This suggests educational and simulation activities can enhance neonatal and pediatric palliative care knowledge among providers, elevating standards of care globally.

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