



HPNA Value Statement
Hospice and Palliative Nursing

The Hospice and Palliative Nurses Association (HPNA) support and value that:

Licensed Practical Vocational and Registered Professional (RN) hospice and palliative nursing is:

- A specialty with its own art and science, unlimited by body system, diagnosis, prognosis, setting, or age.^{1,2}
- Critical to achieving healthcare goals of patients, families, communities, and populations through the end of life.^{1,2}
- Based on competencies that combine the science and art of professional nursing care and guided by a code of ethics.^{3,4,5,6}
- Validated by the achievement and maintenance of certification in the specialty, as well as continuing professional development.

APRNs:

- Represent a valuable resource in efforts to improve health care and increase access to high-quality palliative care for patients and their families living with serious illness.
- Have the knowledge and clinical judgment to provide primary palliative care, including advanced care planning, in all settings.^{8,9}
- Can model optimal patient care to all members of the interdisciplinary healthcare team and assume palliative nursing leadership roles in education, practice, research, and public policy arenas.^{10,11,12,13}

Palliative nursing leadership is: ^{14,15}

- A vital skill demonstrated across all levels and settings of palliative nursing practice.
- Demonstrated by actions to promote access, remove disparities, and ensure quality.
- Advanced by palliative nurse involvement with national nursing

associations; local, regional, and national healthcare initiatives; and other healthcare professionals to enhance the quality of palliative care.

- Transformative, leading to improved care of patients with advanced serious illness and influencing the values of care across all healthcare delivery settings.

Background

Palliative care evolved from the concept of hospice care, which predates the Middle Ages. Palliative nursing care began to emerge as a professional nursing specialty in the 1970s with the initiation of a hospice nurse curriculum by Florence Wald and the later significant contributions of Dr. Jeanne Quint Benoliel and Dr. Betty Ferrell. The work of these nurse leaders, along with landmark studies, reports, and significant nursing events, forged the way toward current standards of practice for comprehensive and compassionate care through the end of life. The Hospice and Palliative Nurses Association (HPNA) *Scope and Standards of Palliative Nursing*¹ and the HPNA *Scope and Standards of the Licensed Practical Vocational Nurse*² and sets out a chronology of these events and the history and evolution of palliative nursing. Licensed Practical Vocational and Professional hospice and palliative nursing is grounded in the positive traditions of past practices while shaping care for the future to meet the evolving needs of the population of patients with serious illness and chronic, complex conditions. Across the spectrum of health settings, hospice and palliative nursing is expanding to respond to the dynamic nature of health care.^{1, p.6, 2}

The National Consensus Project's *Clinical Practice Guidelines for Quality Palliative Care* and the National Quality Forum's *A Framework and Preferred Practices for Palliative and Hospice Care Quality* establish the standards for access to and provision of high-quality palliative care. The guidelines reflect a multidisciplinary orientation to address the need for primary- and specialty-level palliative care in multiple settings to achieve the best possible quality of life through relief of suffering, control of symptoms, and restoration of functional capacity, while remaining sensitive to patients' personal, cultural, and religious values, beliefs, and practices.^{16,17} Collaboration with all members of the healthcare team must occur for optimal interdisciplinary hospice and palliative care. The licensed practical vocational nurse and the professional hospice and palliative nurse are key in guiding the entire healthcare team to recognize serious or life-threatening situations and to provide the specialized care and support patients need in such situations.

Advanced practice registered nurses (APRNs) achieve a greater depth and breadth of knowledge and are distinguished by their ability to synthesize complex data; develop, implement, and coordinate comprehensive, holistic, patient-centered plans of care; and provide leadership in hospice and palliative nursing.^{8,10} They are uniquely qualified and positioned to address the myriad needs of individuals facing life-threatening, progressive illnesses.^{7,14} The value of the advanced practice hospice and palliative nursing role extends beyond

specialized and expanded knowledge, critical thinking, and evidence-based practice to enhanced communication skills that facilitate direct patient care through informed decision-making, patient and family education, and psychosocial-spiritual care.¹⁰

In 2017, the American Nurses Association (ANA) Professional Issues Panel, in association with HPNA, developed a paper titled “Call for Action: Nurses Lead and Transform Palliative Care.” It urges nurses in various roles and settings to lead and transform palliative care in practice, education, administration, policy, and research.⁹ Hospice and Palliative nursing leadership, at all levels of practice, encompasses clinical practice to promote excellence and evidence-based practice, education to ensure hospice and palliative care skill development, advocacy to guide changes to healthcare delivery and access, and research to grow and enhance the evidence.³ Hospice and Palliative nurse leaders promote the visibility of nursing as an essential partner in healthcare delivery in serious illness in all settings.^{1,14,15}

Definition of Terms

Advanced practice registered nurse (APRN): a nurse who has completed an accredited graduate-level education program preparing her or him for the role of certified nurse practitioner, certified registered nurse anesthetist, certified nurse midwife, or clinical nurse specialist; has passed a national certification examination that measures the APRN role and population-focused competencies; maintains continued competence as evidenced by recertification; and is licensed to practice as an APRN.^{8,10}

Code of ethics (nursing): a list of provisions that makes explicit the primary goals, values, and obligations of the nursing profession and expresses its values, duties, and commitments to the society of which it is a part. In the United States, nurses abide by and adhere to the *Code of Ethics for Nurses*.³

Collaboration: a professional healthcare partnership grounded in a reciprocal and respectful recognition and acceptance of each partner’s unique expertise, power, and sphere of influence and responsibilities; the commonality of goals; the mutual safeguarding of the legitimate interest of each party; and the advantages of such a relationship.^{2,8}

Leadership: Within the healthcare environment, nursing leadership involves critical thinking; proactive management; effective communication with patients, families, and healthcare colleagues; and stewardship of environmental, financial, material, and personnel resources.^{14,15,16} Leadership in palliative care is about influencing many constituencies, including patients, families, healthcare colleagues, healthcare systems, insurers, and communities, about its effect on quality and effective use of resources. Palliative care leadership spans all nursing roles and titles.¹⁷

Licensed practical vocational nurse: An individual who is licensed by a state agency to practice as a LPVN.

Palliative care: The Centers for Medicare and Medicaid Services defines palliative care as care that focuses on relief from physical suffering; addresses the patient's physical, mental, social, and spiritual well-being; and uses a multidisciplinary approach.¹⁸ This is further explicated through the National Consensus Project for Quality Palliative Care *Clinical Practice Guidelines*, which state, "Palliative care focuses on expert assessment and management of pain and other symptoms, assessment and support of caregiver needs, and coordination of care. ... It is a person- and family-centered approach to care, providing people living with serious illness relief for the symptoms and stress of an illness".¹⁹

Palliative nursing: Palliative nursing embraces and reflects a holistic philosophy of care provided to individuals with serious or life-limiting illness in diverse health settings, across the lifespan. Palliative nursing is an evidence-based nursing practice that includes "the assessment, diagnosis, and treatment of human responses to actual or potential life-limiting illnesses within the context of a dynamic caring relationship with the patient and family, in order to reduce or relieve suffering and optimize health."²⁰

Registered nurse (RN): An individual registered or licensed by a state, commonwealth, territory, government, or other regulatory body to practice as a registered nurse.⁸

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