

An analysis of clinic nurses' knowledge, attitudes and experience with advance directives (ADs) and end of life (EOL) planning.

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End of life planning

Currently

- ◆ 75% of adults spend end of life in hospital
- ◆ 50% of those are in ICU prior to death
- ◆ 75% have unmet pain and other symptom control

Beliefs

- ◆ Patients values should drive care
- ◆ Increased knowledge for patients
 - Of Advance Directives
 - Of risks, benefits and burdens of care
 - Of their rights to specify care
- ◆ Timing of conversations
- ◆ Clinic nurses could facilitate this planning

Purpose of study:

To describe clinic nurses knowledge, attitudes, confidence and experience with ADs and EOL planning

AIMS are to describe:

- ◆ Level of knowledge regarding ADs, PSDA, and Washington laws
- ◆ Attitudes regarding completion of AD with level of confidence regarding advocacy related to EOL planning
- ◆ Professional Experience with AD and EOL planning
- ◆ Relationship between (1) demographics and (2) knowledge, attitude, confidence and experience with AD and EOL planning

Descriptive Correlational Study

- ◆ All Group Health Primary and Specialty Clinic nurses in King County
- ◆ Online survey
- ◆ KAESAD Instrument: Knowledge, Attitudinal and Experience Survey of Advance Directives (Jezewski)

Results

- ◆ Nurses had need for knowledge regarding ADs, PSDA, WA law
- ◆ Nurses believed in patient autonomy and nursing advocacy
- ◆ Nursing confidence reflected lack of knowledge
- ◆ Nurses felt time spent with patients was inadequate and that patients lacked the information they needed to make good decisions

Results

- ◆ Positive relationship between experience, knowledge, confidence
- ◆ If family member had an AD all of scores were higher
- ◆ Nursing education made a difference

Implications for Nursing

- ◆ Education for nurses
 - Include knowledge of ADs, PSDA, pertinent laws
 - Incorporate into nursing education
 - Provide targeted and ongoing education for practicing nurses
- ◆ Time allowed with patients and their families prior to hospitalization to discuss EOL planning including ADs


Further Study

- ◆ Educational programs for nurses
 - What facts/content are most helpful
 - What type of learning experiences are most helpful
- ◆ Educational programs for patients and their families
 - What do they need to help them with the process

Insights

- ◆ Reinforced my belief in need for strong nursing advocacy role for aging population
- ◆ Learned that quantitative research requires following the steps and that I can do it.
- ◆ Reinforced my belief in end of life planning
- ◆ Broadened my understanding of research and how it contributes to improving our health care system

Thank You

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