

# The Impact of Advance Directives on Patient Care Staff

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### **PICOT Question**

In patient care staff caring for hospitalized patients at the end of life (P), how does the presence of advance directives (I) compared to not having advance directives (C) influence the emotional responses of patient care staff (O) at time of death (T)?

## **Review of the Literature**

Historical Literature Review: 12 articles selected



- Search words-advance directives, moral distress, & end of life care
- 102 articles



- Search words- advance directives
   & end of life care
- & end of life ca8 articles

Current Literature Review: 23 articles selected



- Search words-advance directives, moral distress, & end of life care
- 503 articles

CINHAL

- Search words- advance directives & end of life care
- 54 articles

#### Methods

- WIRB submission and 01/25/2019 Expedited Review/Waiver of HIPAA Authorization obtained
- VOICE Congress submission, review, and endorsement on 03/13/2019
- Inclusion criteria:
  - Nurses, respiratory therapists, patient care technicians, advanced practice nurses, chaplains, physicians, and rehabilitation professionals
  - Participant provided care in the last 24 hours prior to death for one of the 40 identified deceased patients
- Exclusion criteria:
  - Deceased patients that were less than eighteen years of age
  - Deceased patients receiving hospice care
  - Patient deaths in the operating room, patients undergoing organ procurement
- Sample size goal of 100 participants
- Interview questions to illicit participant clinical experiences, feelings, emotions, and opinions during semi-structured interviews:
  - "How do you believe that the death of your patient affected you as a patient care provider?"
  - "Can you describe any medical or social issues that influenced or impacted the patient's death either positively or negatively?"
  - "Do you know if your patient had an advance directive?"
- Data collection tool development
- NVivo qualitative analysis of participant responses

#### **Study Endpoints**

Primary Endpoint
Impact of advance directives on patient care staff

Secondary Endpoint
Concordance of care with advance directives

## **Data Collection for Primary Endpoint**

- 100 patient care staff members identified through the review of 40 medical records of deceased patients, 20 with advance care plans and 20 without advance care plans from all NGMC hospital campuses
- Consent obtained from participant and semi-structured interviews of identified patient care staff members that included observations and notes on naturally occurring interactions and conversations
- Interviews recorded in writing and on audio recording for analysis

## **Data Collection for Secondary Endpoint**

- Mortality list and medical record review to identify hospitalized patients with and without advance directives recorded in the medical record from October 2018 to January 2019
- Medical record review of the medical and nursing care of 20 deceased patients in the 24 hours prior to the time of death with advance directives.
- Medical record review the medical and nursing care of 20 deceased patients in the 24 hours prior to the time of death without advance directives.

## **Study Findings and Outcomes**

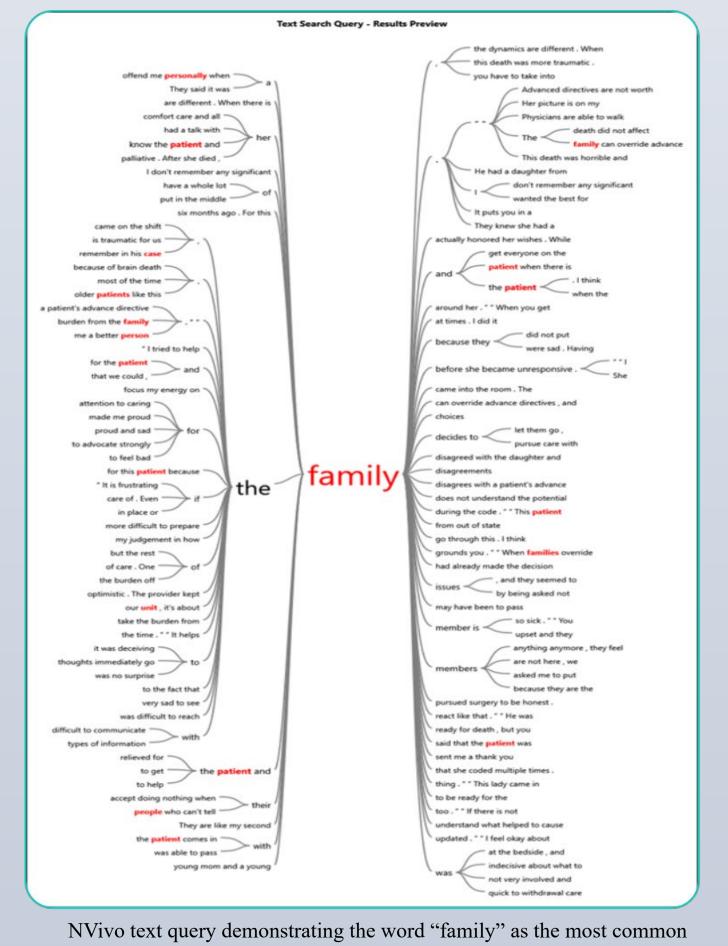
- Number of patient care providers identified as potential participants 206
  - Number of patient care interviews performed 80
  - Number of interviews in patient care settings

Medical-Surgical	11
Critical Care	69

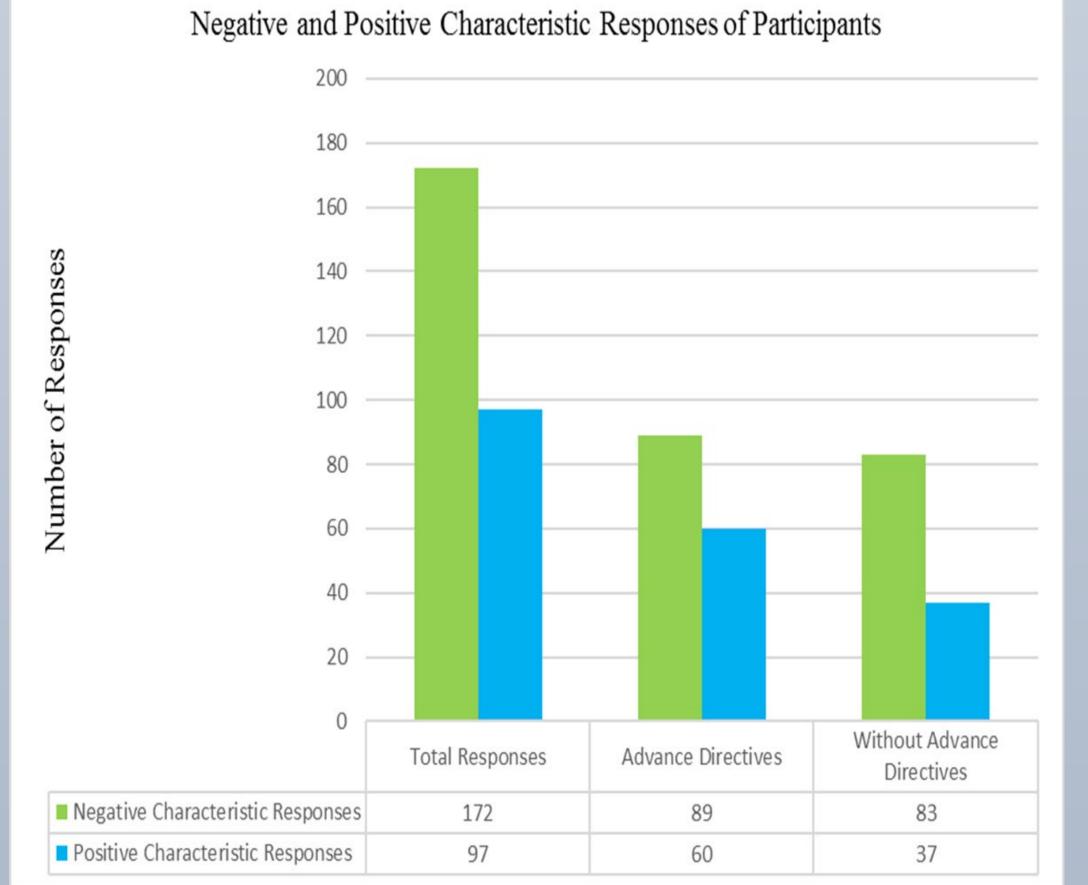
Number and roles of patient care staff participating in interviews

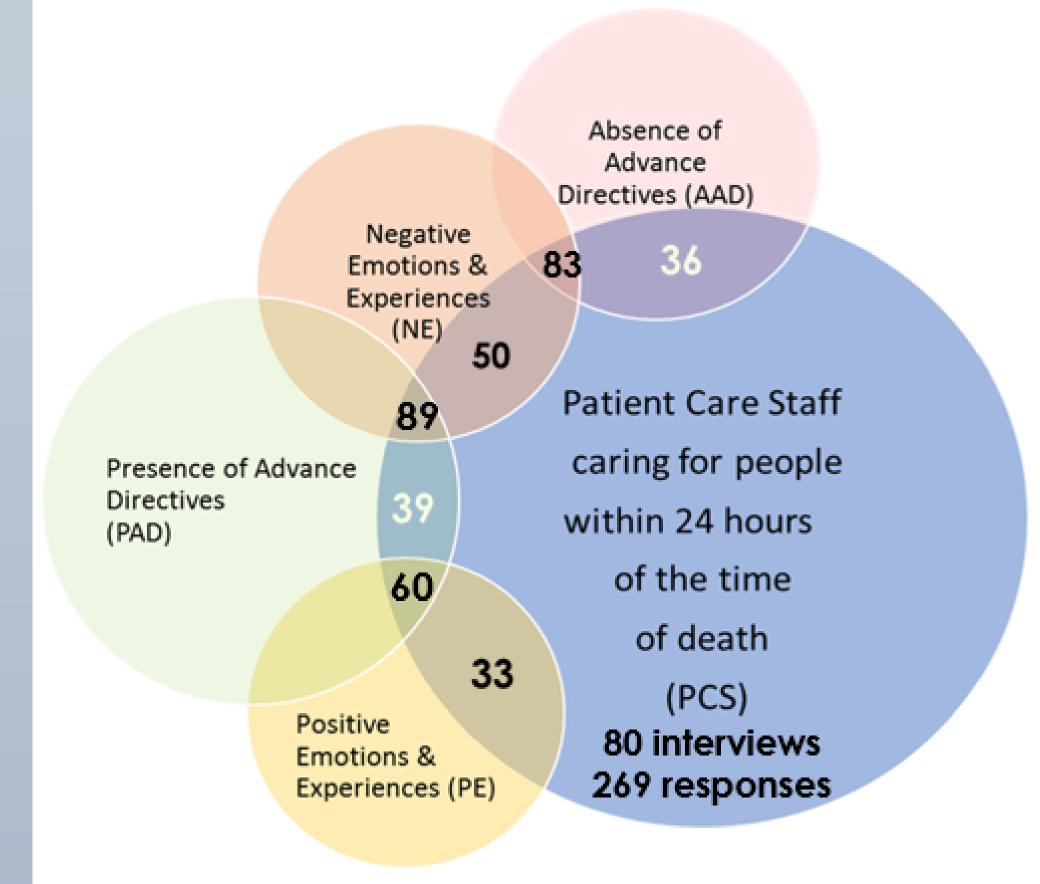
Registered Nurses	51
Advance Practice Nurses	2
Respiratory Therapists	8
Chanlains	1

- Number of interviews for deceased patients with advance directives 39
- Number of interviews for deceased patients without advance directives 36



word used by participants during semi-structured interviews





### **Study Conclusions – Primary Endpoint**

The presence of advance directives that were not observed caused patient care staff to witness patient suffering and provide unwanted care.

The presence of advance directives promoted overall feelings of acceptance for death and pride in the end of life care that patient care staff provide to patients and families.

In the absence of an advance directive, the patient care staff felt very strongly about honoring verbal or expressed wishes of the patient.

The absence of advance directives promoted feelings of frustration with families and providers for patient care staff.

Overall themes identified in participant responses:

- Importance of patient advocacy
- The role of team dynamics
- Family involvement and support



450 most common words in participant interviews created through the NVivo

## Study Conclusions – Secondary Endpoint

Concordance of care was observed in 80% of medical records reviewed.

#### **Study Barriers**

Length of time to interview participants

Shift work and changing work schedules of participants

Time between caring for the patient and the interviews:

• Most participants could not remember the presence of an advance directive.

- 15% of the participants correctly recalled the presence of the advance directives.
- For future research, a shorter interval between interview and death may improve the awareness of advance directives.

Methods of determining concordance of care

Study participants: Nurses, Respiratory Therapists, and Chaplains of Northeast Georgia Medical Center

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