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Comparison of Ethical Issues Experienced during Palliative Care Provision in Nursing Homes in the UK and Canada: Findings from a Cross-sectional Survey

Muldrew, D. H. L.¹, Kaasalainen, S.², McLaughlin, D.³, & Brazil, K.³

¹Ulster University, UK. ²McMaster University, Canada. ³Queen's University Belfast, UK.

Methods

Cross-sectional survey

Sample

123
NURSES

Setting: 21 Nursing Homes

Recruitment: Two days for site visits were agreed by the nursing home managers. All nurses working that day received the “Ethical issues in Palliative Care for Nursing Homes” survey instrument.

The Instrument: The EPiCNH consists of 26 items, scored on two subscales; Frequency and Distress (Likert type scale 0 – 4).

Analysis: Descriptive & inferential statistics.

Approval from QUB Nursing & Midwifery’s Research Ethics Committee and the Hamilton Integrated Research Ethics Board.

Definitions

“An ethical issue occurs where there is doubt, uncertainty or disagreement about what is morally good or right”(1)

Palliative care refers to “the active holistic care of patients with advanced progressive illness”(2)

Introduction

Increased dependency on nursing homes to provide palliative care to an ageing population with complex care needs may lead to an increase in ethical issues, which may in turn lead to burnout and moral distress for staff.

Aim: To identify the type of ethical issues and level of associated distress experienced by nurses providing palliative care in nursing homes in the UK and Canada.

Results

Top 5 most frequent ethical issues		
Item	UK	Canada
	Mean (SD)	Mean (SD)
5 I have to care for residents only accepting small amounts or refusing food and fluids near the end of life	2.74 (1.17)	2.89 (1.20)
6 I have made a decision in the resident’s best interest to prevent them coming to harm or unnecessary risk	2.72 (1.21)	2.22 (1.19)
14 I witness distress from family or care partners	2.33 (.93)	2.89 (.93)
24 I am involved in non-direct care activities which reduce time spent with the residents	2.01 (1.4)	2.21 (1.18)
7 I witness how poor staff communication results in diminished quality of care to residents	1.84 (1.13)	2.37 (1.14)

Top 5 most distressing ethical issues		
Item	UK	Canada
	Mean (SD)	Mean (SD)
7 I witness how poor staff communication results in diminished quality of care to residents	2.47 (1.30)	2.96 (.97)
8 I have observed professional incompetence due to insufficient staff training for providing nursing care	2.42 (1.37)	2.81 (1.21)
20 I don’t have enough time to provide the resident with the care she/he needs	2.25 (1.46)	2.71 (1.35)
24 I am involved in non-direct care activities which reduce time spent with the residents	2.19 (1.46)	2.16 (1.12)
15 I have to follow the family’s or care partner’s wishes for the resident’s care when I do not agree with them	2.17 (1.14)	2.43 (1.06)

Discussion

- Nursing homes should be aware of the ethical struggles faced by their staff.
- The findings encourage a greater level of discussion within nursing homes regarding the everyday ethical issues faced and offer suggestions for how to overcome them.
- Training on ethical debate has been acknowledged as a global recommendation for improving palliative care.

References

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If you would like more information, please contact Deborah Muldrew: d.Muldrew@ulster.ac.uk

Poster author will be present: Poster Presentation Set 2 on 24.05.2019

I have no potential conflict of interest to report