

## **Sigma's 30th International Nursing Research Congress**

### **The Lived Experience of Novice Nurses Caring for Patients at the End-of-Life**

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#### **Purpose:**

Registered nurses' experiences with end-of-life care have been explored in various research studies. Specific nursing populations were teased out to understand specific perspectives of nurses including critical care, pediatrics, geriatrics and general acute care settings. The results of these studies demonstrate nurses' frustration with feeling unprepared due to a lack of education on end-of-life topics, disagreement with aggressive treatment of dying patients, and comfort measures provided at the end of life (Holms, et. al, 2014; McCourt, et. al, 2013; Suryani, et. al, 2018). There is a dearth of literature that focuses on the experiences of novice registered nurses; those nurses with 2 years or less of clinical practice. Understanding novice nurses' perceptions of end-of-life care may provide nurse educators with information in order to develop educational modules in nurse residency programs or orientation for new graduates. In addition, becoming aware of the emotional needs of novice nurses during end-of-life care can lead to interventions to support these nurses, thus preventing burnout (Zheng, Lee & Bloomer, 2016).

The purpose of this interpretive phenomenological study was to explore the lived experience of novice registered nurses caring for dying patients and their families in acute care settings.

#### **Methods:**

##### *Ethics*

Institutional Review Board (IRB) approval was obtained through the researcher's university. Prior to beginning the study, participants were provided detailed information about the study, including risks and potential benefits in the informed consent, given by the researcher. Due to the sensitive nature of the study topic, participants were told they may discontinue participation at any time.

##### *Sample*

Purposive and snowball sampling was used to recruit participants known to the researcher. These participants were registered nurses with 2 years or less clinical practice experience.

##### *Setting*

Qualitative research is carried out in a natural setting; the phenomenon of interest and the setting are not separate (Lincoln & Guba, 1985). This study explored the experiences of novice registered who have cared for dying patients and their families; however, due to the busy nature of hospital nursing units, participants were interviewed in a private location, mutually agreed upon by the researcher and participant.

##### *Procedure*

The researcher individually interviewed participants, for approximately 30-60 minutes. The interviews were recorded with a digital audio recorder and the researcher transcribed the audio data. In addition to the interview, participants completed a demographic questionnaire created by the researcher.

##### *Data Analysis & Trustworthiness*

The transcribed interview data was analyzed by the researcher, using Colaiezzi's method of thematic analysis (1978). The transcripts were read several times to gain a deeper understanding of the participants' experiences. A total of 108 significant statements were extracted from the data. These statements were clustered into three major themes with subthemes.

Maintaining an audit trail, bracketing of research assumptions and biases and an independent review of the data analysis by another nurse researcher with expertise in palliative care and hospice, preserved trustworthiness of the study.

### **Results:**

Ten novice registered nurses, representing a wide range of specialties, participated in this study. The mean age of the registered nurses was 26 years and the majority of participants (90%) were female. The range of time as a practicing registered nurse was 6 months to 2 years. Three major themes extracted from the data: *Acknowledging Comfort in Communication*, *Feeling Powerless to Provide Comfort*, and *Recognizing Experiences which Facilitated Their Own Comfort*. The concept of comfort was weaved throughout all of the themes.

### **Conclusion:**

The participants in this study vividly recalled experiences with dying patients and their families, across the lifespan; obstetrics, pediatrics, adults and older adults. Stories describing how the novice nurses navigated their own emotions, personal biases and how this translated into the care provided were rich and detailed. The common thread of providing comfort was evident; comfort was described in a holistic manner, including psychosocial, physical and spiritual elements.

The participants in this study echoed the voices of novice nurses in recent published literature, which describes their experiences and also reports the continued need for end-of-life education at the pre-licensure level (Croxon, et al., 2018; Hendricks-Ferguson, et al., 2015; Zheng, et al., 2015). It is essential that education and support begin before nursing students graduate from their programs, and continue in the first several years in the settings in which novice nurses are employed and potentially caring for patients at the end of life.

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### **Title:**

The Lived Experience of Novice Nurses Caring for Patients at the End-of-Life

### **Keywords:**

End of Life, Lived Experience and Novice Registered Nurse

### **References:**

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### **Abstract Summary:**

Novice nurses are faced with the reality of learning how to prioritize care for all patients, including those who are terminally ill. The purpose of this research study was to explore the experiences of novice registered nurses caring for dying patients and their families in acute care settings.

### **Content Outline:**

#### **I. Introduction**

A. Background: End-of-life care in the United States

B. Background: Research conducted on registered nurses caring for dying patients

#### **II. Body**

A. Methodology

1. Purpose of the study

2. Ethical approval

3. Recruitment of participants, sample and setting

4. Procedure for data collection and analysis

B. Discussion of Findings

1. *Major Theme 1: Acknowledging Comfort in Communication*
  - a. Subtheme 1: Being Conscious of Communication Pitfalls
  - b. Subtheme 2: Normalizing Death and Dying
  - c. Subtheme 3: Creating a Comfort Zone
  - d. Subtheme 4: Supporting Families with Education
2. *Major Theme 2: Feeling Powerless to Provide Comfort*
3. *Major Theme 3: Recognizing Experiences Which Facilitated Their Own Comfort*
  - a. Subtheme 1: Reflecting on Intimate Experiences
  - b. Subtheme 2: Learning in the Moment

### **III. Discussion and Conclusion**

1. Discussion of relevant current research
2. Implications for nursing research
  - a. Current research study examining education on communication at end of life.
3. Implications for nursing education
  - a. Continue to advocate for mandatory end-of-life education in pre-licensure programs.
4. Implications for nursing practice
  - a. Discuss interventions to support novice nurses during care of the dying patient.

First Primary Presenting Author

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**Author Summary:** Dr. Jeffers is an associate professor of nursing at Widener University in Chester, Pennsylvania. She participated as a scholar in Sigma Theta Tau's Nurse Faculty Leadership Academy, 2016 cohort. The focus of her research is end-of-life nursing education, specifically focusing on pre-licensure students. Dr. Jeffers has presented on this topic at the international and national levels as well as published her research on end-of-life undergraduate education.

