

**Title:**

Exploring Nurses' Perceptions of Dignity During End-of-Life Care

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**Session Title:**

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**Keywords:**

dignity care, enhancing dignity and nurse perceptions

**References:**

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**Abstract Summary:**

Qualitative grounded theory study was to understand nurses' perceptions of care that supports patients' dignity during hospitalization at the end of life, and to propose a theoretical foundation consistent with these perceptions as a guide to practice.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
To improve care, and preserve the dignity of patients during end-of-life	Develop practical experiences: Increase awareness of barriers
Develop strategies for nurses to support dignity of patients	Design curricula for nursing courses
Translate the strategies into clinical practice	Develop theories and interventions that promote dignity
Develop a framework for understanding the steps required to deliver care that supports dignity	Gain an understanding of educational interventions: Serve to develop theoretical underpinnings

**Abstract Text:**

**Purpose:** The purpose of this qualitative grounded study was to understand nurses' perception of care that supports inpatients' dignity during hospitalization at the end of life, and to propose a theoretical foundation consistent with these perceptions as a guide to practice. The study took place in the northeastern United States. The sample included registered oncology nurses with one or more years of professional experience. Semistructured interviews aided in gaining insight into nurses' perceptions of dignity for patients at the end-of-life stage.

**Methods:** The research plan was to conduct a qualitative study with a design that integrated grounded theory to understand nurses' perceptions of care that supports patients' dignity during hospitalization at the end of life and to propose a theoretical foundation consistent with these perceptions as a guide to practice.

**Results:** The research involved analyzing perceptions about processes that can explain how nurses perceive care that supports patients' dignity at the end of life during hospitalization. The aim of the research in this study included a focus on the general problem that patients' dignity is not always respected by healthcare providers according to the review of the literature and the acknowledgment of the lack of theories related to nurses' perceptions of care that supports dignity during end-of-life care. A grounded theory design offered a systematic approach to developing a theoretical model from data that takes into consideration the complexities of nurses' perceptions of care that supports dignity during hospitalization at end of life. Semistructured interviews were conducted with 11 experienced registered oncology female nurses from the northeastern region of the United States. The research involved analysis of the perceptions of nurses caring for cancer patients admitted to the hospital during end of life. The development of a beginning model for dignity care stemmed from the emergence of three major categories, which were communication, support, and facilitation. The identified subcategories were education, workshops, course curriculum, in-services, being an advocate, listening, being present, physical needs, emotional support, compassion, honoring wishes, respect, and being treated as human. The emergence and development of a dignity model may offer a process that can serve as a valuable reference in providing care that supports the dignity of patients during hospitalization at end of life.

**Conclusion:** The findings of this study suggested a theory that utilizes communication, support, and facilitation in the education of nurses in end-of-life care may enhance the communication process and lead to the empowerment of support needed to deliver care that supports the dignity of patients at the end of life during hospitalization. The discoveries from this research may serve in the expansion of knowledge and further theory development in this area and offer value to nurses caring for patients with terminal illnesses other than advanced cancer.