

Palliative Care

Oncology nurses' confidence in provision to patients with cancer

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BACKGROUND: Oncology nurses are key providers of care to patients with cancer in all healthcare settings. However, little is known about oncology nurses' perceived confidence in providing all of the domains of palliative care.

OBJECTIVES: The objectives of this study were to examine oncology nurses' perceived confidence in providing palliative care to patients with cancer and to identify the association between nurses' demographic and professional characteristics and their perceived confidence.

METHODS: A descriptive correlational design was employed. The sample included RNs who provided care to patients with cancer and were members of the Oncology Nursing Society (ONS). Participants completed an online survey consisting of 14 demographic questions and a 50-item palliative care confidence scale.

FINDINGS: Three hundred sixty-six ONS members completed the survey. Results showed that most oncology nurses were confident to very confident in providing palliative care to patients with cancer, but they lacked confidence in providing the psychosocial, spiritual, and legal and ethical aspects of care. Years of experience as an oncology nurse and palliative care training were significantly associated with perceived confidence in providing palliative care.

KEYWORDS

nurses; palliative care; end-of-life care; cancer; confidence

DIGITAL OBJECT IDENTIFIER

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IN THE UNITED STATES, APPROXIMATELY 16.9 MILLION INDIVIDUALS with a history of cancer were alive on January 1, 2019 (American Cancer Society [ACS], 2021). In 2021, around 1.9 million new cancer cases are expected to be diagnosed (ACS, 2021). Patients diagnosed with cancer experience various physical and psychological symptoms, including pain, appetite/weight loss, fatigue, drowsiness, disturbed sleep, gastrointestinal issues, anxiety/depression, and cognitive issues (Newcomb et al., 2020; Nipp et al., 2017). In addition, they demonstrate a high level of unmet physical, psychological, spiritual, functional, informational, and economic needs (Moghaddam et al., 2016). The high symptom burden and unmet needs increase suffering and diminish quality of life for patients and their families (Taleghani et al., 2018).

Patients with cancer can benefit from palliative care, if introduced early and continued throughout the cancer trajectory. Previous studies have demonstrated that early palliative care use is associated with positive outcomes, such as reduced symptom burden and depression, better understanding of the cancer trajectory, improved communication with healthcare providers, improved quality of life and survival, improved satisfaction with care, and reduced cost of care (Bakitas et al., 2015; Rohrmoser et al., 2017; Temel et al., 2017). Although palliative care has many benefits, there are several barriers to its timely use in patients with cancer. Barriers include negative stereotypes from patients and families associating palliative care with hopelessness and death (Feld et al., 2019; Harding et al., 2019; Uribe et al., 2019) and providers' equating palliative care with hospice care and being unsure about the right timing for referral of patients to palliative care (Horlait et al., 2016; Zimmermann et al., 2016). All of these barriers contribute to palliative care referrals late in the cancer trajectory when patients have high symptom burden and are approaching the end of life (Hui et al., 2015).

Oncology nurses are consistent providers of care to patients with cancer and their families from the time of diagnosis to death and through bereavement. They provide care in various healthcare settings and have opportunities to establish unique and close relationships with patients and their families. Oncology nurses have an important role in providing the many domains of palliative care, initiating goals-of-care conversations, and helping patients explore their needs and preferences throughout the cancer trajectory. They can provide several domains of palliative care, including pain and symptom management; psychosocial, spiritual, and bereavement support; and ethical decision-making (Chow & Dahlin, 2018).

Although oncology nurses provide care in various healthcare settings and play an important role in providing palliative care, evidence suggests these nurses feel stressed when they need to assess and prioritize patients' needs