A Measure of Nephrology Nurse Perceptions toward Advance Care Planning

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Introduction

- Patients with chronic kidney disease (CKD) die at an increased rate compared to the general population (USRDS, 2012).
- Nephrology nurses care for patients in all stages of CKD and are poised to participate in and facilitate advance care planning (ACP) discussions, yet nurse participation rates are low (Perry, Swartz, Smith-Wheelock, Westbrook, & Buck, 1996; Yee et al., 2011).
- Factors impacting ACP discussions include unclear role expectations, lack of knowledge about advance directives, lack of skills or confidence to carry out the process, lack of administrative support, inadequate staffing, and fear of upsetting the patient (Ceccarelli, Castner, & Haras, 2008; Yee et al., 2011).

Research Question

- What are the perceptions of nephrology nurses toward ACP for patients with CKD?

Specific Aims

1. To develop and validate items on the NephRN ACP Perceptions Scale, an instrument designed to measure perceptions of ACP from the perspective of nephrology nurses.
2. To pilot test and refine the newly developed instrument.
3. To test and determine the psychometric properties of the instrument in a larger sample.

Methods

DESIGN: 3-phase exploratory study

Phase 1: To develop and validate instrument items to measure perceptions of ACP from the perspective of nephrology nurses.
- SAMPLE: Five subject matter experts
- DATA COLLECTION: Instrument items evaluated for clarity and relevance to ACP by experts
- DATA ANALYSIS: Item and instrument CVI calculated

Phase 2: To pilot test the newly developed instrument.
- SAMPLE: Convenience sample of 50 nurses with at least 2 years of nephrology and ACP experience
- DATA COLLECTION: E-mail request to complete an on-line survey
- DATA ANALYSIS: Descriptive statistics and exploratory factor analysis

Phase 3: To test and determine the psychometric properties of the instrument in a larger sample.
- SAMPLE: Recruit 800 nurses from a sample of 6,000 nephrology nurses who are members of their professional organization
- DATA COLLECTION: Postcard request to complete on-line survey
- DATA ANALYSIS: Descriptive statistics, convergent and divergent validity, and confirmatory factor analysis

Measures

NephRN ACP Perceptions Scale
- Researcher-developed scale, measures perceptions of nephrology nurses toward ACP
- Contains 53 items
- Based on Donabedian’s (1980) revised structure-process-outcome framework
- Assesses four dimensions of comfort, attitudes, knowledge, and support for ACP

Concerns about Dying instrument
- Measures healthcare provider comfort in caring for dying individuals, spirituality, and patient-related general concerns about death (Mazor, Schwartz, & Rogers, 2004)
- Contains 10 items
- Overall scale Cronbach’s alpha of .83
- Will establish convergent validity of the NephRN ACP Perceptions Scale

Attitude toward Patient Advocacy Scale
- Measures components of patient advocacy among oncology nurses (Bu & Wu, 2008)
- Contains 64 items
- Based on Bu and Jezewski’s (2007) theory of patient advocacy
- Overall scale Cronbach’s alpha =.96
- Subscale alphas of .92 and .95 respectively for Attitude toward Microsocial Advocacy and the Attitude toward Macrosocial Advocacy
- Will establish convergent and divergent validity of the NephRN ACP Perceptions Scale

Results

Phase 1:
- Interrater agreement = .77 (.70-.80 acceptable, Grant,1997)
- Individual item CVI (I-CVI) = .75-1.0
- Scale CVI (S-CVI/AVE) = .952 (≥.90 recommended, Polit & Beck, 2006)
- Redundant items eliminated, items with low I-CVI rewritten for clarity
- Revised instrument contains 48 items

Phase 2:
- Data collection in progress

Phase 3:
- Will begin after data analysis from Phase 2

Conclusion

- To date, no instrument has been found that measures nephrology nurse perceptions towards ACP.
- Addressing barriers to participation in ACP discussions necessitates understanding these perceptions and attitudes, and requires a reliable and valid instrument.

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