



Poster # 21

Title of poster: Advance care planning for mechanical ventilation: health care providers' perspectives on cross-cultural care

Abstract

Background: Advances in medical technologies are allowing patients with complex and terminal diseases to live longer, but this does not necessarily mean that treatment will restore health or improve quality of life. Advance care planning (ACP) is a method used for patients to express in advance their preferences, beliefs and values for life-sustaining treatments at the end-of-life. With growing ethnocultural diversity in Canada, health care providers are managing an increasing number of diverse beliefs/values that have significant impacts on the patient and family's reaction to the dying process and the medical decisions they make. Medical decisions that are informed by cultural or religious beliefs are commonly associated with preferences for aggressive treatments, such as mechanical ventilation (MV) and hospitalization, at the end-of-life. How we manage ethnocultural beliefs/values in ACP is a significant indicator for the quality of care and quality of death that patients and families experience.

Methods: The objectives for this study are: 1) understand methods used in ACP to manage ethnocultural beliefs/values for MV, 2) highlight challenges in ACP (organizational, material, systematic) that may hinder physicians' or nurses' ability to provide cross-cultural care, and 3) explore methods used to overcome perceived challenges. This qualitative study uses a semi-structured interview to explore methods used by physicians and nurses to set care plans for MV with patients and families from different ethnocultural backgrounds. Eight (8) participants (four physicians and four nurses) who engage in ACP were recruited from the following acute-care hospitals within the Ottawa region: l'Hôpital Montfort, Ottawa General Hospital, Saint-Vincent's Hospital, Civic Hospital, Riverside Hospital. Interviews were audio-recorded and transcribed for content data analysis.

Results: Three major themes emerged from the coded dataset of transcribed interviews: 1) Goals of care across illness trajectories, 2) Respecting beliefs, values, and wishes for care, and 3) Cross-cultural support in ACP. Using a value-based approach in ACP is seen as an effective method for managing and interpreting diverse beliefs/values that impact decisions for MV. Physicians and nurses should be supported with more cross-cultural education and culturally-competent skills for communicating and adjusting to different ethnocultural contexts. Knowledge from this study can be translated into evidence-based practice guidelines that facilitate meaningful ACP discussions, regardless of race or ethnicity. An ACP framework that is effective across cultures may have positive social, economic, and ethical implications that may serve as a promising tool for reducing burden at the end-of-life.

