

# A Randomized Control Trial Feasibility Study of a Serious Illness Communication Workshop for Nurses in Critical Care: Interim Findings

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## Background

Effective serious illness communication helps to:

- avoid unwanted treatments
- increase satisfaction with care
- ensure that patients receive the care that they want

Critical care registered nurses are key in these conversations and:

- may be unsure of their role
- may feel unprepared to navigate these difficult discussions

The *Serious Illness Conversation Guide* (SICG) was designed to help health care professionals have more, earlier, and better quality serious illness conversations.

Although health care professionals in a variety of settings are being trained to use the SICG in British Columbia, it has not been developed for nursing practice or evaluated in the critical care context.

*"It can be difficult to predict what will happen with your illness. I hope that you will continue to live well for a long time but I'm worried that you could get sick quickly, and I think it is important to prepare for that possibility."*

Excerpt from the SICG (Ariadne Labs, 2015)

## Research Questions

1. What is the *acceptability* of the Serious Illness Conversation Guide communication training workshop for intensive care unit nurses?
2. What is the *feasibility* of a randomized control trial study of the Serious Illness Conversation Guide communication training workshop for intensive care unit nurses?

Primary indicators for feasibility are:

- number of SICG workshops held,
- of recruited participants in relation to number of eligible participants,
- participation in evaluation measures, and
- identification of factors that influence the successful implementation of the research study.

3. What is the *impact* of a Serious Illness Conversation Guide communication training workshop for intensive care unit nurses on their confidence, attitudes, and engagement in serious illness conversations with patients, their family members, or their substitute decision maker?

**75%** of participants currently discuss illness understanding, patient values, or preferences for care

## Baseline Data & Participant Demographics

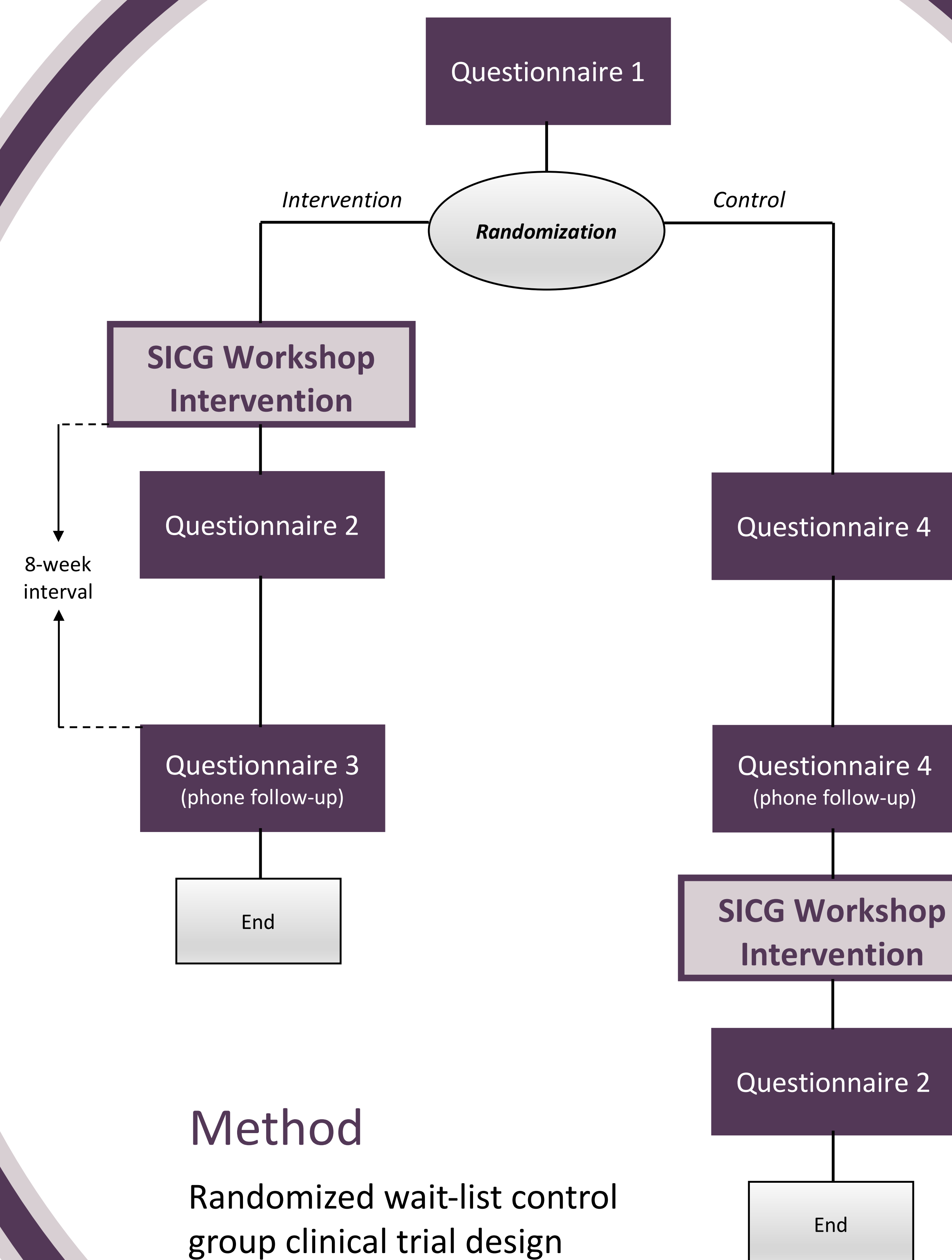
**100%** mostly or fully agree that serious illness conversations can be conducted by registered nurses

**75%** are mostly or fully willing to engage in serious illness conversations in practice

**25%** have previously heard of the SICG

**82%** feel somewhat or not at all confident exploring future patient goals

Demographic	Responses N=8
Age M (SD)	34.4 (3.3)
Primary Area of Work	ICU CICU HAU
Highest Level of Education Completed	Bachelors
Number of Years in Critical Care	< 1 year-10 years
Number of Years as a RN	6-20 years
Usual Amount Worked in Critical Care	Full-time hours (regular & infrequent overtime) Part-time hours (< 65% of full-time equivalent)
Usual proportion of days/nights worked	Equal days/nights Greater days than nights



## Method

Randomized wait-list control group clinical trial design

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## Interim Findings & Feasibility Factors

- 1<sup>st</sup> of 2 workshops successfully held; 2<sup>nd</sup> scheduled for November
- < 4% of eligible participants recruited
- 100% completion rate of Questionnaire 1
- < 1% missing data for Questionnaire 1

### Barriers

Poor recruitment rate despite:

- Rescheduling of workshops
- Extended recruitment period
- Expanded inclusion criteria to other ICUs

Work schedule conflicts or unavailability during workshop dates

Summer season timing impacting recruitment efforts and potential workshop attendance

### Facilitators

Boost in recruitment from spontaneous promotion by an enrolled participant on social media

Workshop facilitators demonstrating flexibility with rescheduling

Follow-up with potential participants who express interest

## References

- Anderson, W. G., Puntillo, K., Boyle, D., Barbour, S., Turner, K., Cimino, J., . . . Pantilat, S. (2016). ICU bedside nurses' involvement in palliative care communication: A multicenter survey. *Journal of Pain and Symptom Management*, 51(3), 589-596.e2. doi:10.1016/j.jpainsymman.2015.11.003
- Ariadne Labs. (2015). *Serious Illness Conversation Guide*. Retrieved from <https://www.ariadnelabs.org/areas-of-work/serious-illness-care/resources/#Download&S%20Tools>
- Bernacki, R. E., Block, S. D., & American College of Physicians High Value Care Task Force. (2014). Communication about serious illness care goals: A review and synthesis of best practices. *JAMA Internal Medicine*, 174(12), 1994-2003. doi:10.1001/jamainternmed.2014.5271
- Heyland, D. K., Dodek, P., Mehta, S., Cook, D., Garland, A., Stelfox, H. T., . . . Day, A.G. (2015). Admission of the very elderly to the intensive care unit: Family members' perspectives on clinical decision-making from a multicenter cohort study. *Palliative Medicine*, 29(4), 324-335. doi:10.1177/0269216314566060

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