

Title: What prevents advance care planning in haematology?

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Background: Despite a clear emphasis in policy on the importance of advance care planning (ACP) for achieving quality end-of-life care, rates of ACP completion remain low. This is particularly apparent for patients with haematological malignancies and is associated with high rates of hospital death and patients receiving aggressive treatments at the end of life, which impacts on quality of life and family bereavement. Although patients tend to be receptive to ACP discussions they expect healthcare professionals to instigate them. Current evidence exploring barriers and facilitators to ACP from the healthcare professionals' perspective is limited.

Aim: To explore what doctors and nurses identify as the barriers and facilitators to ACP for patients with haematological malignancies.

Method: One-to-one semi-structured interviews were conducted with a purposively recruited sample of 5 doctors and 5 nurses working in a haematological malignancy setting. Thematic data analysis was conducted using a multi-perspectival Interpretative Phenomenological Analysis (IPA) approach. Demographic questionnaires were also used to capture key participant characteristics and provide a rich contextual description of participants.

Findings: Six super-ordinate themes were identified (Figure 1), each with associated subthemes.

Implications: Though general claims are cautious, the findings of the study provide indications for future research exploring this phenomenon from the patient's perspective, as well as introducing prompts to trigger early ACP discussions despite prognostic uncertainty. It also poses potential clinical implications to improve holistic patient-centred shared decision-making by: addressing the hierarchical structure of haematology; inter-professional education and ACP awareness promotion; and empowering nurses to initiate ACP.

Figure 1: Overview of themes

