Breaking Bad News - Nurse Specialists Perspectives

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Background
Communicating bad news is complex and requires dedicated training and skills. In light of advanced nursing practice, and the growing challenges associated with chronic disease management, involvement in breaking bad news is likely to increase. Currently, there is a lack of supporting research in relation to the role of the clinical nurse specialist in breaking bad news.

Aims and Objectives
The aim of this study was to examine the experiences and perspectives of all nurse specialists from both the acute and chronic care divisions about their role in communicating bad news. This research seeks to address the following questions:

- What are the experiences and perspectives of nurse specialists’ in communicating bad news?
- How are they supported in carrying out this role?

Methods
A prospective observational cross-sectional study design was used. The study consisted of three phases:

(i) an initial questionnaire to measure breaking bad news competency.

(ii) a workshop and training programme in breaking bad news.

(iii) an evaluation of the workshop and training programme to capture the skills and techniques for breaking bad news that the participants would integrate into their practice.

Results
25 nurse specialists completed the breaking bad news questionnaire (83% response rate). The respondents included clinical nurse specialists (75%), clinical nurse managers (14%), and advanced nurse practitioners (11%) respectively. The majority of nurses were between 20-29 years post qualification (ranging from 10 to 30 years plus).

Examples of a difficult experience of breaking bad news
- “Lack of time and privacy”
- “Family bickering during the discussion”
- “Consultant not wanting to involve nursing staff”

- 60% of nurses had not received any formal education/training in breaking bad news prior to this study.
- The majority of nurses are often involved in various aspects of the breaking bad news process and considered it rewarding (96%) in helping the patient/relative prepare for the future, and a positive influence on their own life priorities (80%).
- Lack of privacy is identified as a negative factor in the breaking bad news process.

Conclusion
As a result of this study, over 50% of the nurse specialists have attended training including those who attended prior to this study. In the context of chronic disease management facilitators from specialities other than palliative care are vital to highlight the relevance of breaking bad news in patients with long term conditions.

References
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