

Links between Moral Distress of Registered Nurses and Factors Related to Patient Care at the End of Their Life: A Cross Sectional Survey

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Abstract : Introduction: Nursing as a profession is grounded in moral obligation. Nursing practice is grounded in ethical standards: to not harm, to promote justice, to be accountable, and to provide safe and competent care. The nature of the nurse-patient therapeutic relationship requires acting on the patient's behalf. Moral distress consists of negative stress symptoms that occur in situations that involve ethical situations that the nurse perceives as discordant with their professional values. Aim of the Study: The purpose of this study was to assess links between moral distress of registered nurses and factors related to patient care at the end of their life. Methods and Sample: A descriptive, cross-sectional, correlational design was applied in this study. Registered nurses were recruited from seven municipal multi-profile hospitals providing both general and specialized healthcare services in Lithuania (N=1055). Research instruments included two questionnaires: Obstacles and Facilitating at the End of Life Care and Moral Distress Scale (revised). Results: Spearman's correlation analysis was performed to assess the relationship between nurses' attitudes towards patient care at the end of life and the experienced moral distress. A statistically significant correlation between moral distress and the following factors related to patient end-of-life care has been identified: conversations with physicians on patient end-of-life problems have a positive impact on job satisfaction; some patients may be excluded from decisions about their treatment and nursing because they are questioned about their ability to assess the situation. These situations increased moral distress. Patient consciousness should not be permanently suppressed by calming medications, and the patient should be provided with all nursing care services and moral distress. Conclusions: The moral distress of nurses is significantly related to the end-of-life care of patients and their determinants: moral distress increased due to lack of discussion with doctors about problem-solving and exclusion of patients from decision-making. And it diminished by refusing calming medications to permanently suppress a patient's consciousness and providing good care for patients.

Keywords : moral distress, registered nurses, end of life, care

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