The Effectiveness of Multi-Media Experiential Training Programme on Advance Care Planning in Enhancing Acute Care Nurses' Knowledge and Confidence in Advance Care Planning Discussion: An Interim Report

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Abstract : Introduction: In Hong Kong, a significant number of deaths occur in acute care wards, which requires nurses in these settings to provide end-of-life care and lead ACP implementation. However, nurses in these settings, in fact, have very low-level involvement in ACP discussions because of limited training in ACP conversations. Objective: This study aims to assess the impact of a multi-media experiential ACP (MEACP) training program, which is guided by the experiential learning model and theory of planned behaviour, on nurses' knowledge and confidence in assisting patients with ACP. Methodology: The study utilizes a cluster randomized controlled trial with a 12-week follow-up. Eligible nurses working in acute care hospital wards are randomly assigned at the ward level, in a 1:1 ratio, to either the control group (no ACP education) or the intervention group (4-week MEACP training program). The training programme includes training through a webpage and mobile application, as well as a face-to-face training workshop with enhanced lectures and role play, which is based on the Theory of Planned Behavior and Kolb's Experiential Learning Model. Questionnaires were distributed to assess nurses' knowledge (a 10-item true/false questionnaire) and level of confidence (five-point Likert scale) in ACP at baseline (T0), four weeks after the baseline assessment (T1), and 12 weeks after T1 (T2). In this interim report, data analysis was mainly descriptive in nature. Result: The interim report focuses on the preliminary results of 165 nurses at T0 (Control: 74, Intervention: 91) over a 5-month period, 69 nurses from the control group who completed the 4-week follow-up and 65 nurses from the intervention group who completed the 4-week MEACP training program at T1. The preliminary attrition rate is 6.8% and 28.6% for the control and intervention groups, respectively, as some nurses did not complete the whole set of online modules. At baseline, the two groups were generally homogeneous in terms of their years of nursing practice, weekly working hours, working title, and level of education, as well as ACP knowledge and confidence levels. The proportion of nurses who answered all ten knowledge questions correctly increased from 13.8% (T0) to 66.2% (T1) for the intervention group and from 13% (T0) to 20.3% (T1) for the control group. The nurses in the intervention group answered an average of 7.57 and 9.43 questions correctly at T0 and T1, respectively. They showed a greater improvement in the knowledge assessment at T1 with respect to T0 when compared with their counterparts in the control group (mean difference of change score, $\Delta=1.22$). They also exhibited a greater gain in level of confidence at T1 compared to their colleagues in the control group ($\Delta=0.91$). T2 data is yet available. Conclusion: The prevalence of nurses engaging in ACP and their level of knowledge about ACP in Hong Kong is low. The MEACP training program can enrich nurses by providing them with more knowledge about ACP and increasing their confidence in conducting ACP.

Keywords : advance directive, advance care planning, confidence, knowledge, multi-media experiential, randomised control trial

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