

Lien Foundation Survey on Death Attitudes Doctors & Nurses Survey

Blackbox Research



About the Study

Blackbox Research was commissioned by Lien Foundation to conduct a survey examining death attitudes and preferences in Singapore as well as current perceptions of hospice palliative care (referred to as palliative care henceforth).

The first stage of the study surveyed a cross section of the general public on end-of-life issues. The second stage of the survey sought the views of **medical professionals, doctors and nurses**, from February to April 2014. Lien Foundation sent out invitations to the survey through the Singapore Medical Association and Singapore Nurses Association as well as its networks within public healthcare institutions.

This stage of the study specifically sought to understand:

- **Current familiarity and attitudes towards palliative care** – perceived importance of palliative care, whether medical professionals have discussed this topic with patients, evaluation of palliative care, etc.
- **Understand attitudes towards death and dying** – comfort level discussing this topic, fears about death, preferences at end of life

Profile of Medical Professionals

Survey Methodology



Doctors (n=207)

- Online Survey: n=207 online interviews
- Data collection period was from February to April 2014.
- Lien Foundation sent out invitations to the survey through the Singapore Medical Association and Singapore Nurses Association as well as its networks within the public healthcare institutions



Nurses (n=425)

- Online surveys (n=362) and self-administered questionnaires (n= 63)

Profile

Nationality	Doctors	Nurses	Place of Work	Doctors	Nurses
Singaporeans	85%	78%	Palliative care setting ¹	3%	8%
Foreigners	15%	22%	Public hospital	58%	71%
			Polyclinic	3%	14%
			Private clinics/hospitals	32%	2%
			Others	4%	5%
Years of Experience	Doctors	Nurses			
<1 year to 10 years	33%	46%			
>10 years to 20 years	29%	20%			
>20 years	38%	34%			

In this study, 'palliative care setting' comprises community hospitals, nursing homes, home medical / nursing services, day care and hospices.

10 Key Questions

On Palliative Care

- 1 How familiar are medical professionals with palliative care?
- 2 Are current educational programmes adequately preparing medical professionals for supporting patients with life-threatening illnesses?
- 3 Do medical professionals recognise the importance of palliative care?
- 4 Do medical professionals discuss palliative care with their patients?
- 5 How do medical professionals rate palliative care and what are their personal attitudes towards it?

On Death and Dying

- 6 How comfortable are medical professionals with talking about death and dying?
- 7 What do medical professionals fear about death?
- 8 Where and how do they want to die?
- 9 Are medical professionals adequately preparing for end of life?
- 10 What are medical professionals professional and personal views towards life-prolonging treatments?

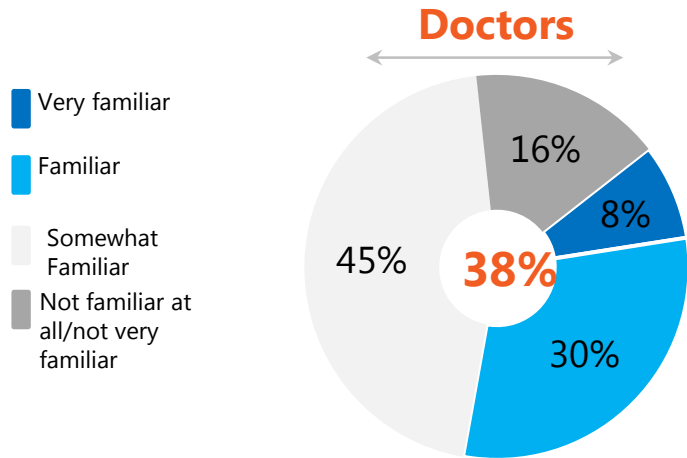
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**How familiar are
medical
professionals
with palliative
care?**

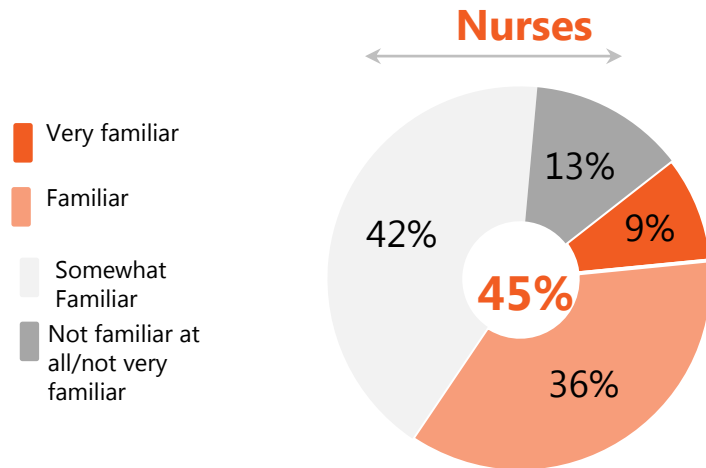
- Medical professionals have limited familiarity with palliative care – 38% of doctors and 45% of nurses said they were very familiar or familiar with it
- Even amongst those medical professionals with frequent contact with life-threatening illnesses, familiarity is still quite low

Familiarity with Palliative Care

38% of doctors and 45% of nurses consider themselves to be very familiar or familiar with palliative care.



Base: All doctors (n = 207)



Base: All nurses (n = 425)

% Very Familiar/Familiar

Frequency of Encountering Terminally-III Patients (Doctors)		
Very frequent/frequent	Occasionally	Rarely
44%	35%	24%

n = 101

n = 77

n = 29

Years of Experience (Doctors)		
<1 year to 10 years	>10 years to 20 years	>20 years
28%	44%	41%

n = 67

n = 61

n = 79

Frequency of Encountering Terminally-III Patients (Nurses)		
Very frequent/frequent	Occasionally	Rarely
59%	39%	26%

n = 189

n = 143

n = 93

Years of Experience (Nurses)		
<1 year to 10 years	>10 years to 20 years	>20 years
41%	41%	53%

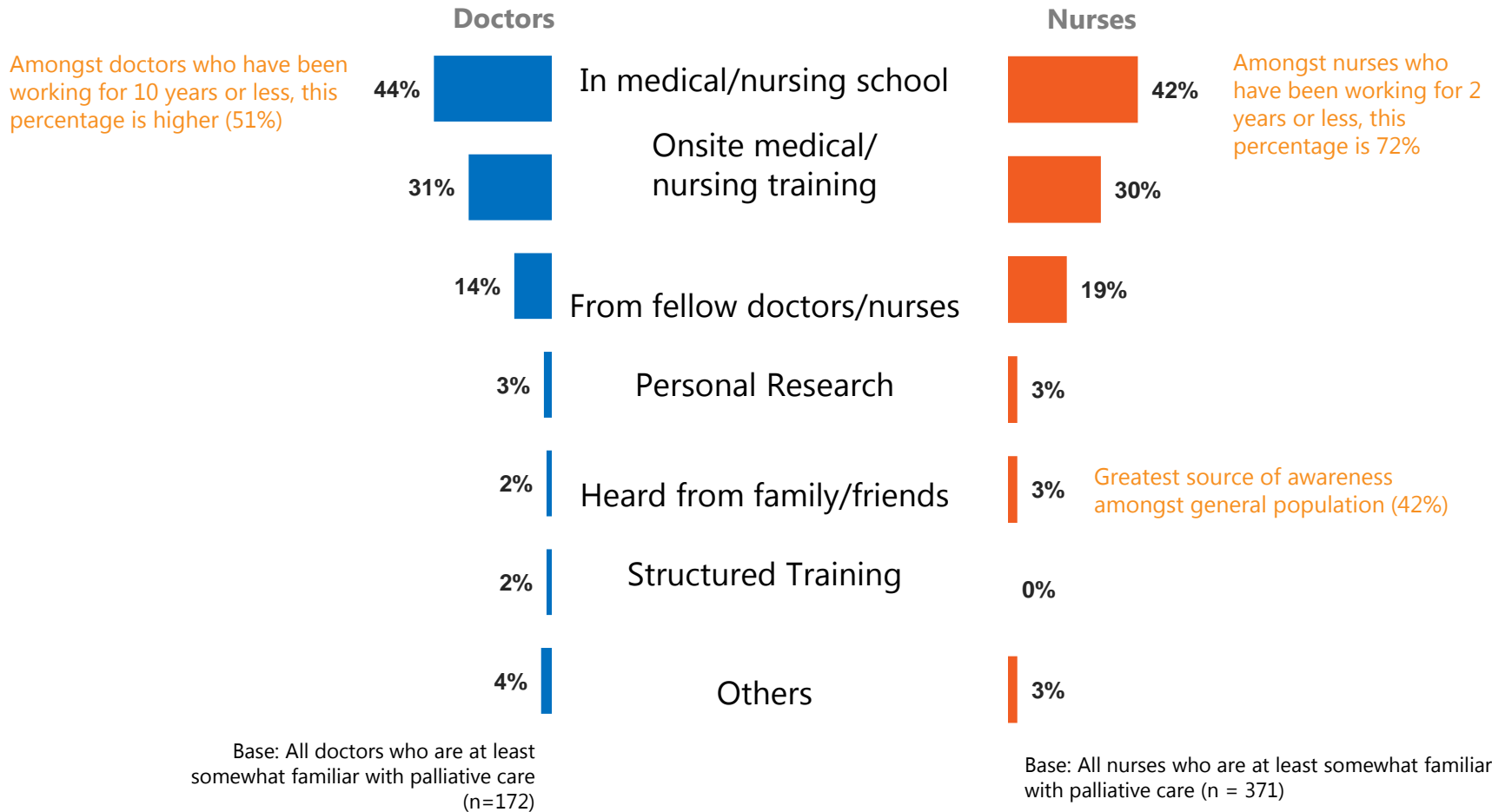
n = 195

n = 87

n = 143

Source of Awareness about Palliative Care

Most medical professionals come to know about palliative care through school or training on the job. Only a small percentage (2%) mentioned receiving structured training (i.e. professional courses) on hospice palliative care.



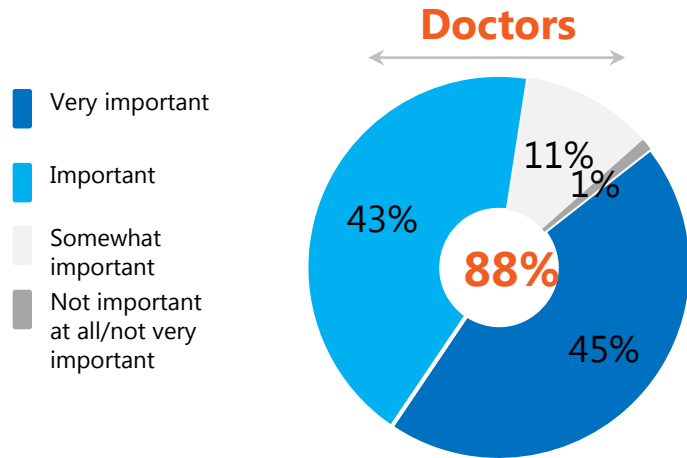
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Are current educational programmes adequately preparing medical professionals for supporting patients with life-threatening illnesses?

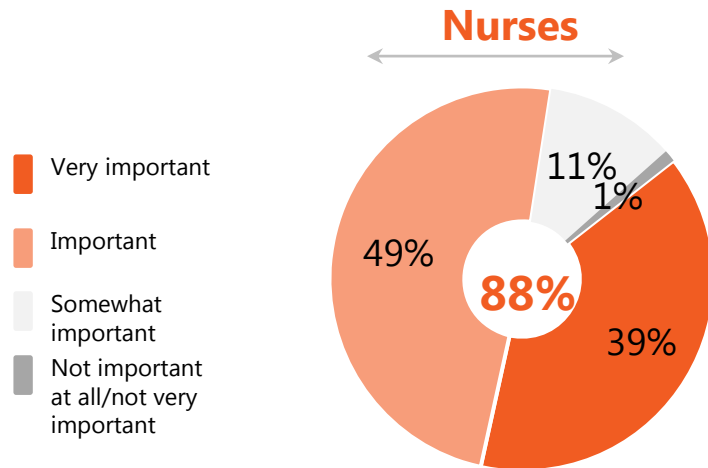
- Nearly 9 in 10 medical professionals recognise the importance of end-of-life content in basic medical education.
- Those familiar with hospice palliative care were even more likely to recognise its importance.
- Yet, very few medical professionals think that their basic medical educational programme adequately prepared them for supporting patients with life-threatening illnesses. This was particularly the case amongst doctors.

Importance of End-of Life Care Content to Medical Education

Close to 9 in 10 of all medical professionals think that end-of-life care content is important to medical education.



Base: All doctors (n = 207)



Base: All nurses (n = 425)

% Very Important/Important

More familiar with HPC= more likely to recognise importance

Familiarity with HPC (Doctors)		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
96%	82%	86%
n = 78	n = 94	n = 35

More encounters with terminally-ill = More likely to recognise importance

Frequency of Encountering Terminally Ill Patients		
Very Frequent/Frequently	Occasionally	Rarely
93%	84%	79%
n = 101	n = 77	n = 29

More familiar with HPC= more likely to recognise importance

Familiarity with HPC (Nurses)		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
95%	86%	74%
n = 191	n = 180	n = 54

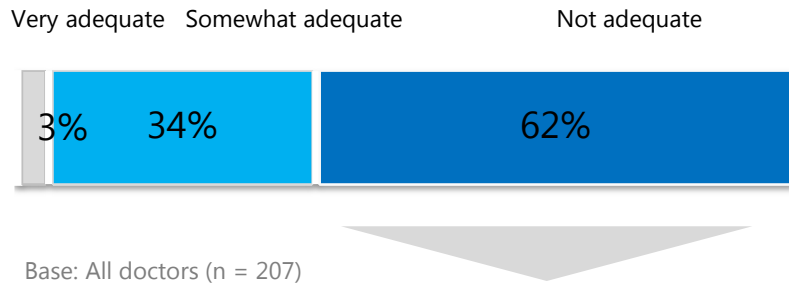
More years of experience = more likely to recognise importance

Years of Experience (Nurses)		
<1 year to 10 years	>10 years to 20 years	>20 years
86%	86%	93%
n = 195	n = 87	n = 143

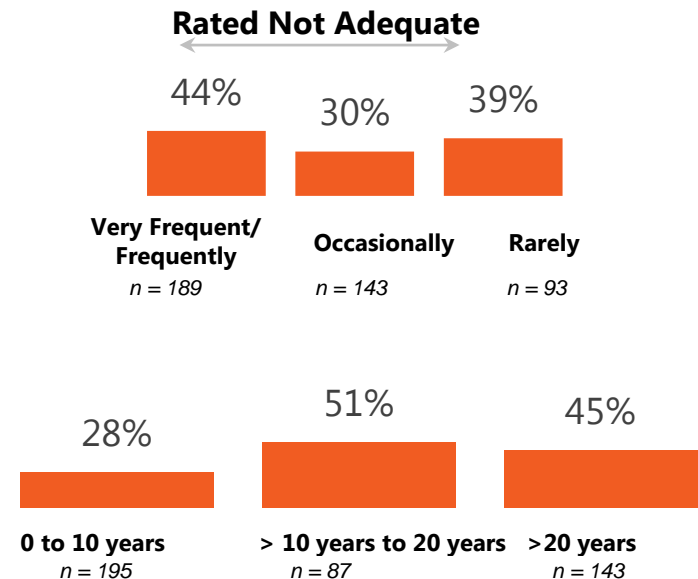
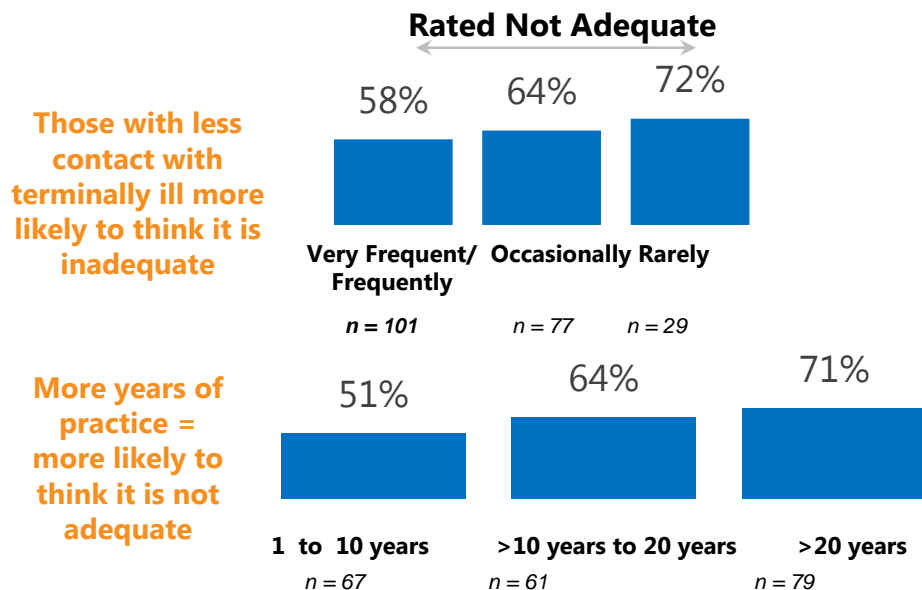
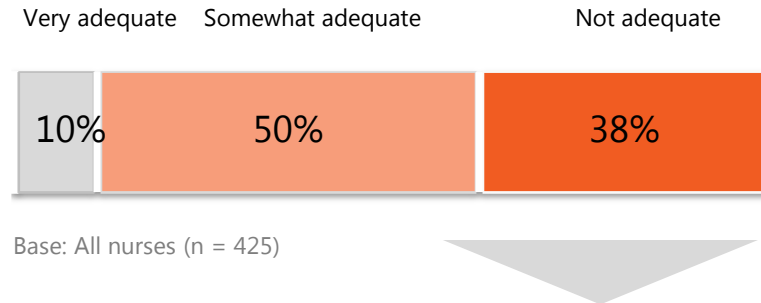
Adequacy of Basic Medical Education Programme

62% of doctors thought that their basic medical education programme was not very adequate in preparing them for supporting patients with life-threatening illnesses. This percentage was lower amongst the nurses (38%).

Doctors



Nurses



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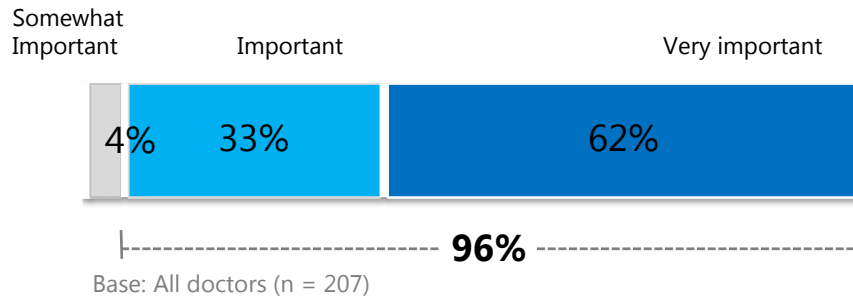
Do medical professionals recognise the importance of hospice palliative care?

- Nearly all medical professionals recognise the importance of hospice and palliative care
- Those who were more familiar with it were more likely to think it is very important

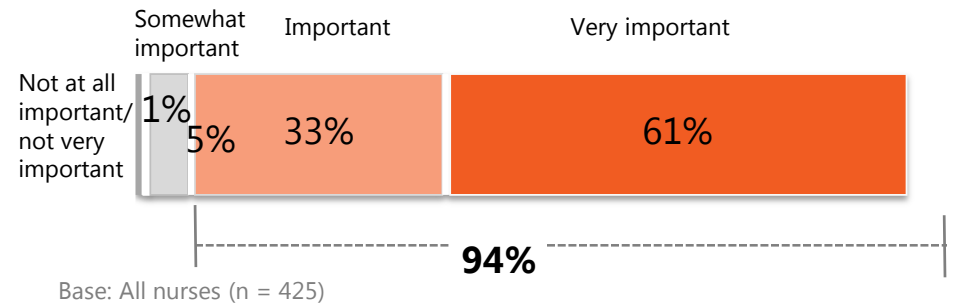
Importance of Palliative Care

95% of all doctors and 94% of nurses think that palliative care is important for patients with life-threatening illnesses.

Doctors

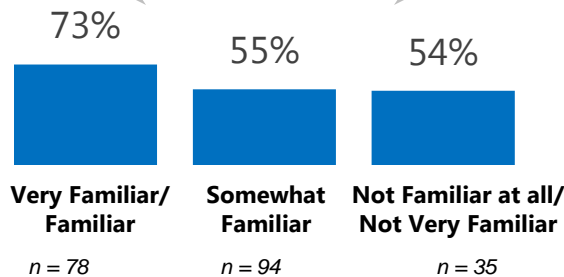


Nurses



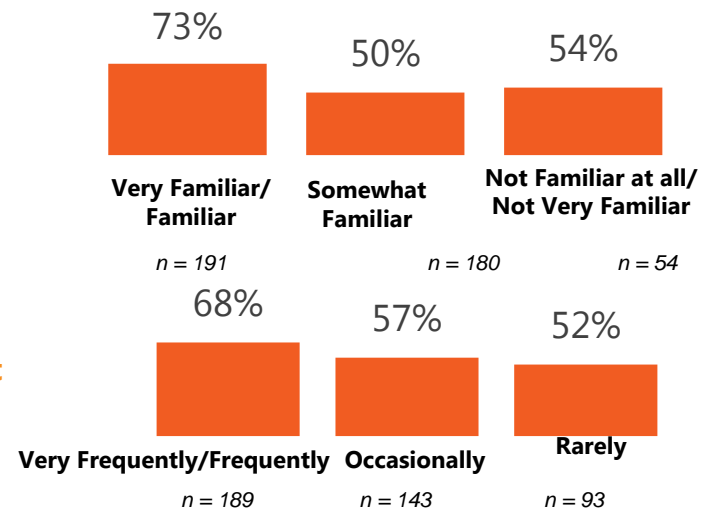
Rated Very Important

More familiar with palliative care = more likely to think it is very important



Rated Very Important

More frequent contact with terminally ill = more likely to think it is important



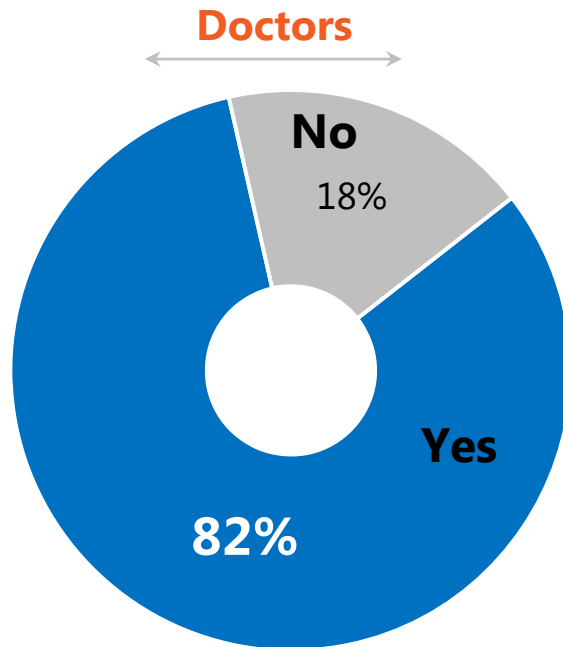
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Do medical professionals discuss hospice palliative care with their patients?

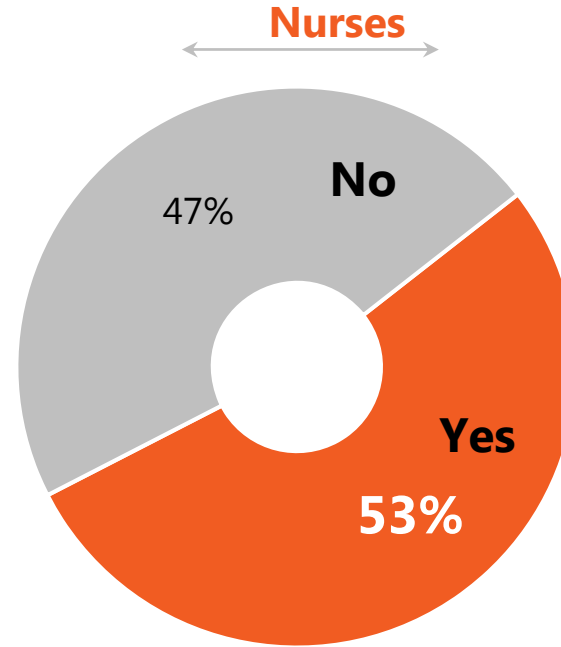
- Doctors (82%) were more likely than nurses to have discussed palliative care (53%) with their patients.
- Medical professionals in palliative care settings and public hospitals were most likely to have discussed the topic. Those with greater familiarity with the topic were also more likely to have discussed it.
- The top two reasons for not discussing palliative care was because patients did not require it and because medical professionals do not know enough about it to recommend it

Discussing Palliative Care

82% of all doctors have discussed palliative care with their patients before. Nurses were less likely to have discussed palliative care (53%).



Base: All doctors (n = 207)



Base: All nurses (n = 425)

Reasons for not Discussing Palliative care

The most common reasons were patients did not require palliative care and they did not know enough about palliative care to recommend it

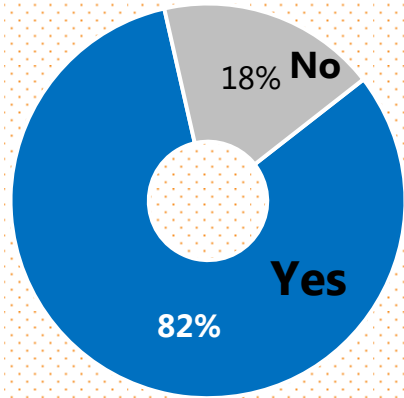
	Doctors	Nurses
Patients did not require hospice and palliative care (no serious illness)	65%	38%
I do not know enough about hospice and palliative care to recommend it	27%	37%
I think this is a personal decision the patient needs to make and not for me to decide	5%	22%
I do not think my patient is ready to accept hospice and palliative care (he/she may reject it)	5%	13%
Shortage of available hospice and palliative services (e.g. hospices)	5%	2%
I do not want to risk losing a patient by transferring him/her to another doctor/hospice and palliative care facility	-	2%
I do not think hospice and palliative care will help my patient	-	1%

Base: Doctors who had not talked about palliative care (n = 37)

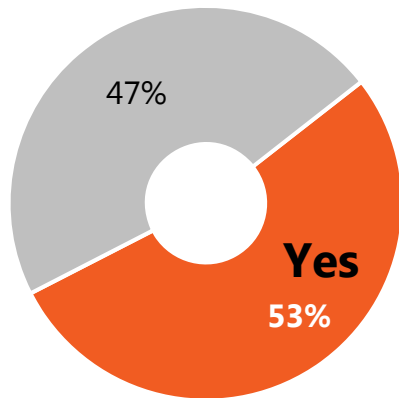
Base: Nurses who had not talked about palliative care (n = 201)

Discussing Palliative Care

Medical professionals in palliative care settings and public hospitals as well as those who were more familiar with palliative care were more likely to have discussed this topic.



Nurses



Base: All nurses (n = 425)

More likely to have talked about palliative care

- Those with more frequent contact with terminally ill
- Those more familiar with palliative care

% said Yes

Frequency of Encountering Terminally Ill		
Very Frequent/Frequently	Occasionally	Rarely
96%	77%	48%
<i>n = 101</i>	<i>n = 77</i>	<i>n = 29</i>

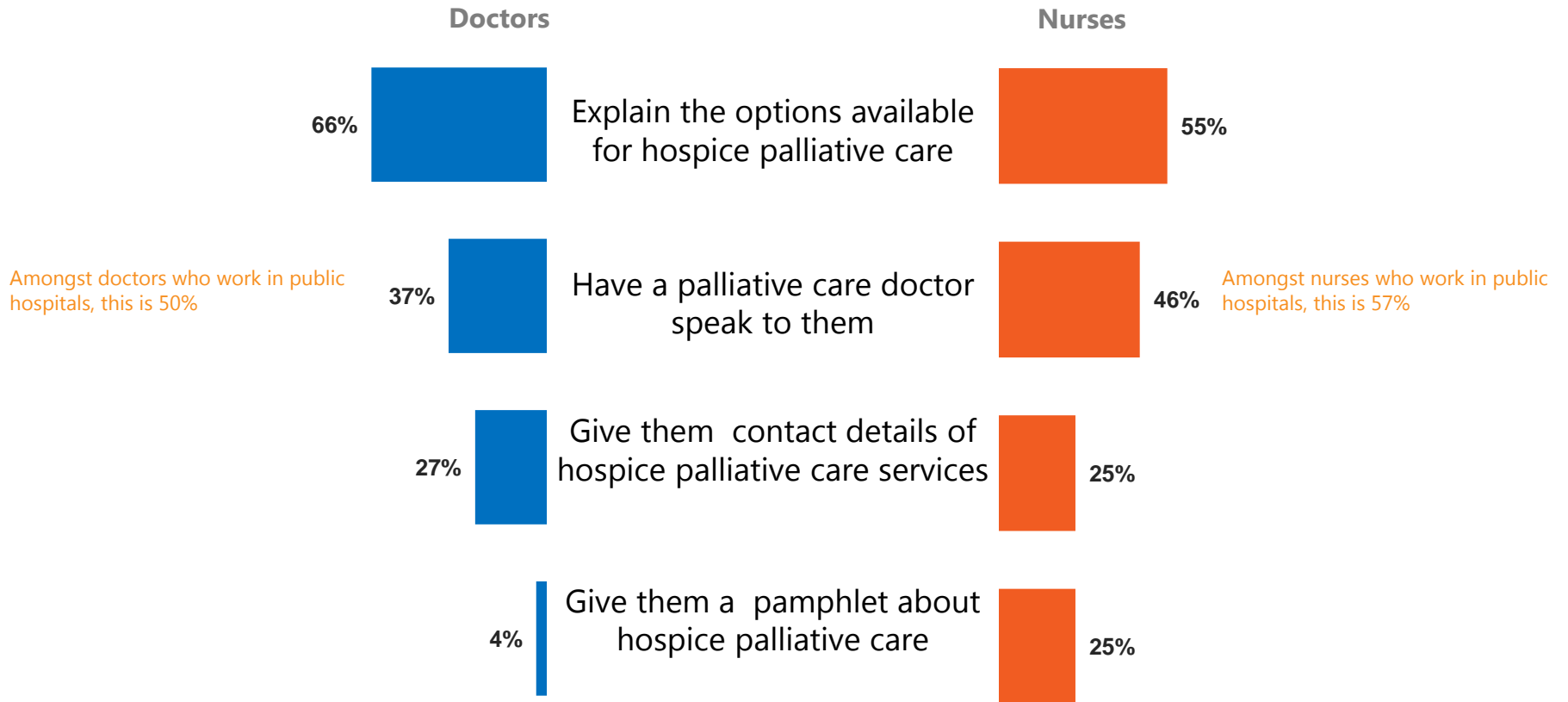
Familiarity with HPC		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
96%	83%	49%
<i>n = 78</i>	<i>n = 94</i>	<i>n = 35</i>

Frequency of Encountering Terminally Ill		
Very Frequent/Frequently	Occasionally	Rarely
70%	48%	24%
<i>n = 189</i>	<i>n = 143</i>	<i>n = 93</i>

Familiarity with HPC		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
68%	49%	13%
<i>n = 191</i>	<i>n = 180</i>	<i>n = 54</i>

Approach To Talking about Hospice Palliative Care

The most common approach is to share with the patients the options available for hospice palliative care. Referring patients to a palliative care doctor is also a fairly common approach amongst medical professionals in public hospitals.

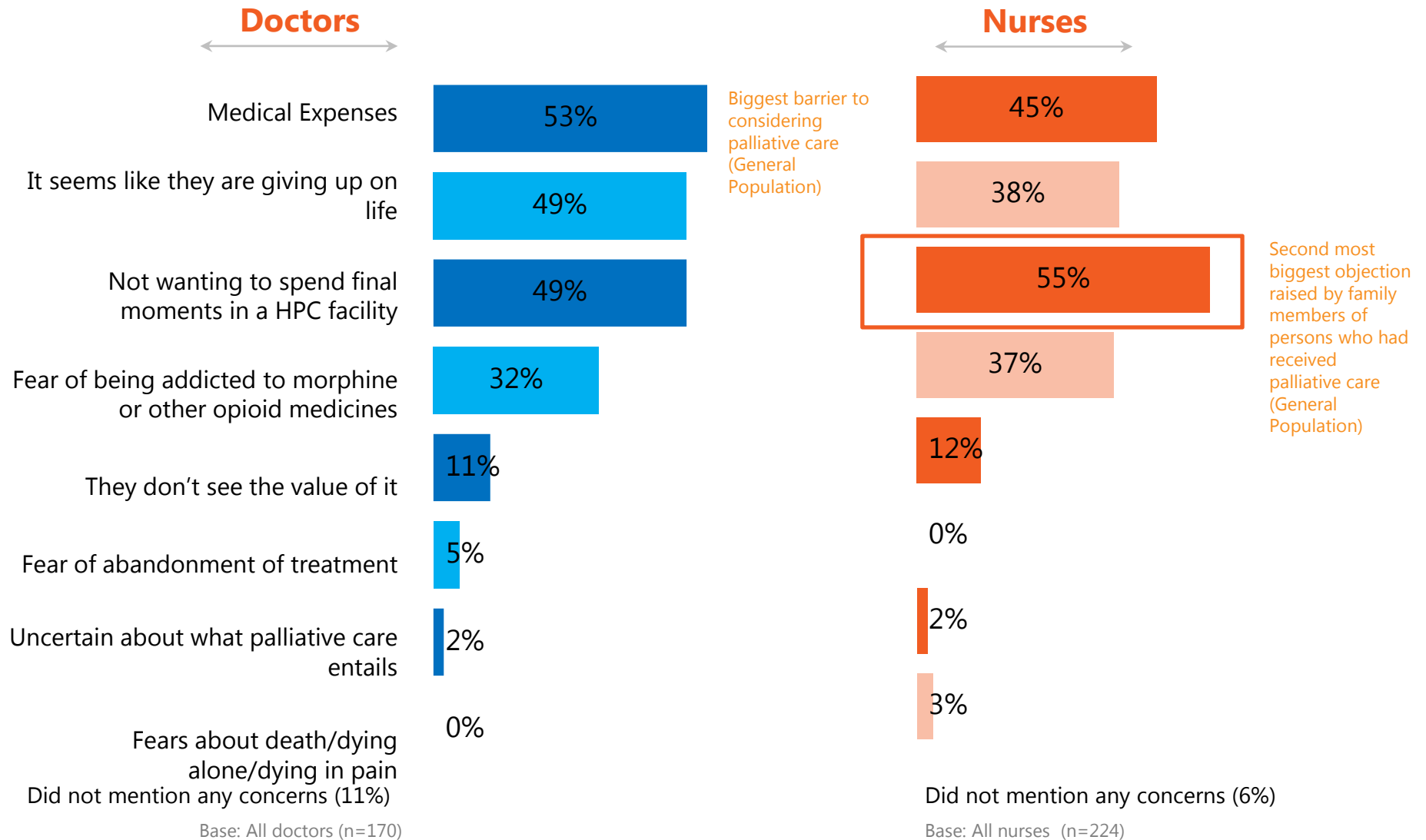


Base: All doctors who have discussed palliative care (n=170)

Base: All nurses who have discussed palliative care (n=224)

Concerns Raised about Hospice Palliative Care by Patients

According to doctors, patients' biggest concern was medical expenses (53%). In contrast, 55% of nurses had heard concerns raised by patients about spending their final moments in a palliative care facility.



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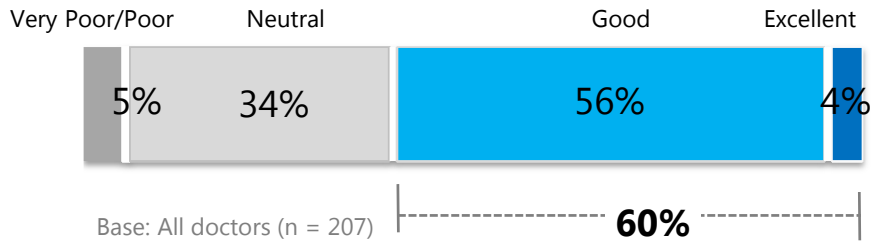
How do medical professionals rate hospice palliative care and what are their personal attitudes towards it?

- Generally consistent with the general public's evaluation of hospice and palliative care, about 6 in 10 medical professionals rated hospice palliative care in Singapore as excellent/good.
- More than 9 in 10 medical professionals strongly supported greater public education and awareness. They also recognised their need to be comfortable talking about hospice palliative care.
- 84% of doctors are highly likely/somewhat likely to consider palliative care for themselves. But this percentage is only 64% for nurses.

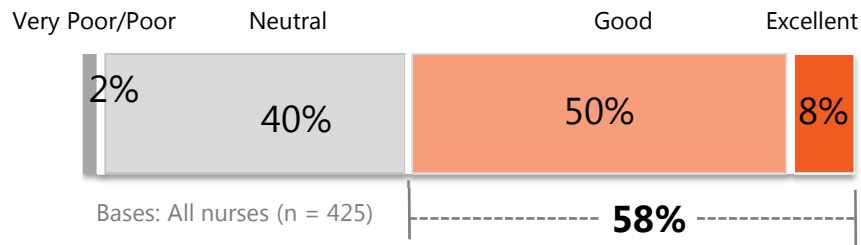
Evaluation of Palliative Care

60% of all doctors and 58% of nurses think that hospice and palliative care is excellent/good. This is fairly consistent with the general public's evaluation of hospice palliative care (63%).

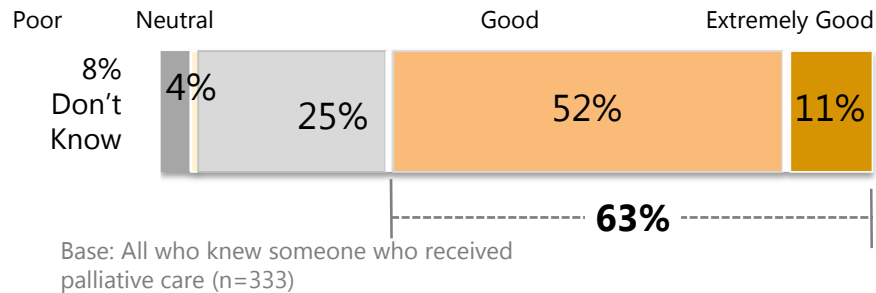
Doctors



Nurses



General Public



% who said Excellent/Good

More familiar with HPC/Less experience = More likely to rate it highly

Familiarity with HPC (Doctors)		
Very Familiar/Familiar 73%	Somewhat Familiar 51%	Not Familiar/Not Very Familiar 57%
n = 78	n = 94	n = 35

Years of Experience (Doctors)		
<1 year to 10 years 63%	>10 years to 20 years 62%	>20 years 57%
n = 67	n = 61	n = 79

More familiar with HPC/More experience/ Frequent contact with terminally-ill = More likely to rate it highly

Familiarity with Palliative Care (Nurses)		
Very Familiar/Familiar 73%	Somewhat Familiar 49%	Not Familiar/Not Very Familiar 30%
n = 191	n = 180	n = 54

Years of Experience (Nurses)		
<1 year to 10 years 46%	>10 years to 20 years 54%	>20 years 76%
n = 195	n = 87	n = 143

Frequency of Encountering Terminally Ill (Nurses)		
Very Frequent/Frequently 62%	Occasionally 58%	Rarely 47%
n = 189	n = 143	n = 93

Weaknesses of Healthcare System in Supporting the Dying

The three most common weaknesses shared were: insufficient training/shortage of trained palliative care staff, lack of information on palliative care and shortage of hospice facilities.

	Doctors	Nurses
Insufficient training/shortage of trained palliative care staff	24%	20%
Lack of public information on palliative care (what it entails, how to obtain it, where to obtain it, etc.)	21%	22%
Not enough hospice facilities/shortage of beds	17%	11%
Affordability (lack of schemes that can be used to finance palliative care)	16%	5%
Discomfort talking about palliative care	14%	18%
Lack of government funding/support	8%	4%
Perception that palliative care is giving up on fighting the illness	5%	2%
Late referral of palliative care	5%	2%
Lack of spiritual/psychological support	2%	5%
No comments	4%	14%

Base: All nurses (n=425)

Base: All doctors (n=207)

Weaknesses of Healthcare System in Supporting the Dying

In general, those with frequent contact with the terminally-ill were more likely to have mentioned the top two weaknesses

Shortage of trained palliative care staff/insufficient training

Lack of information on palliative care



Doctors

Very Frequently/ Frequently	Occasionally	Rarely
30%	19%	14%
24%	18%	17%



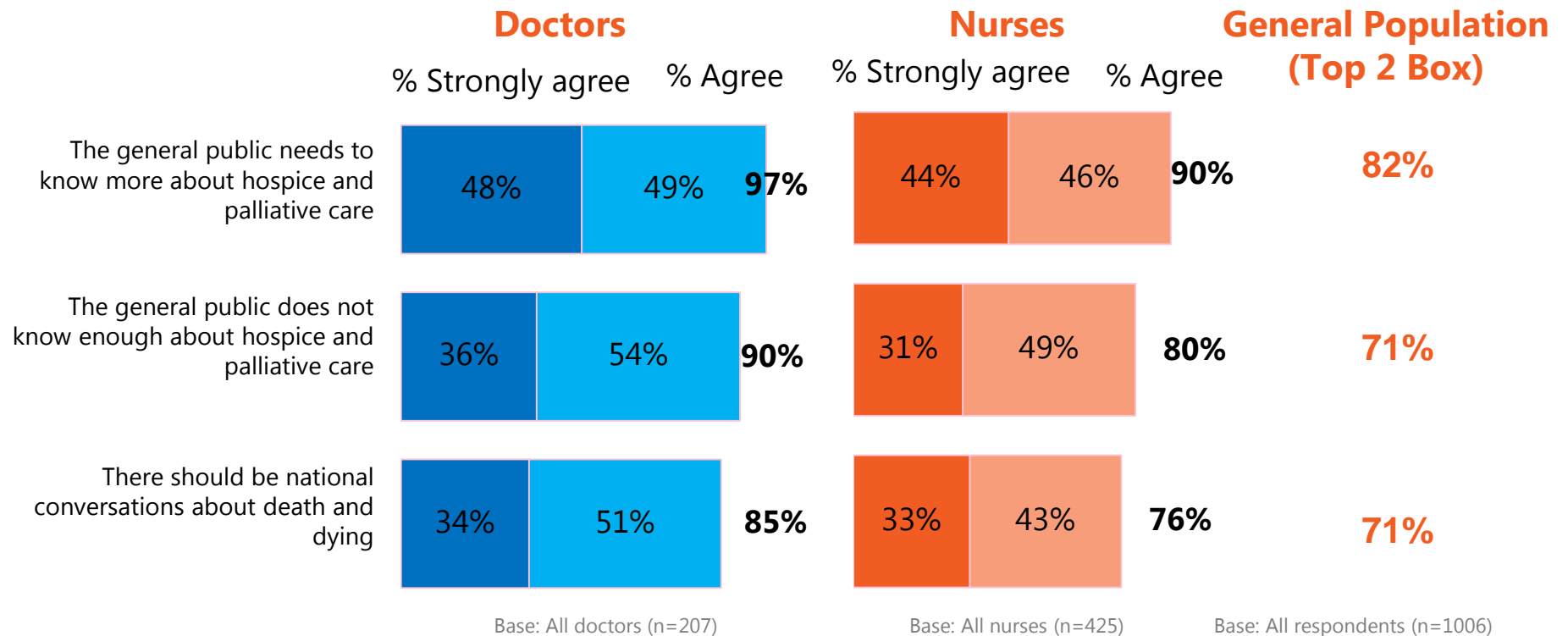
Nurses

Very Frequently/ Frequently	Occasionally	Rarely
28%	16%	13%

Shortage of trained palliative care staff/insufficient training

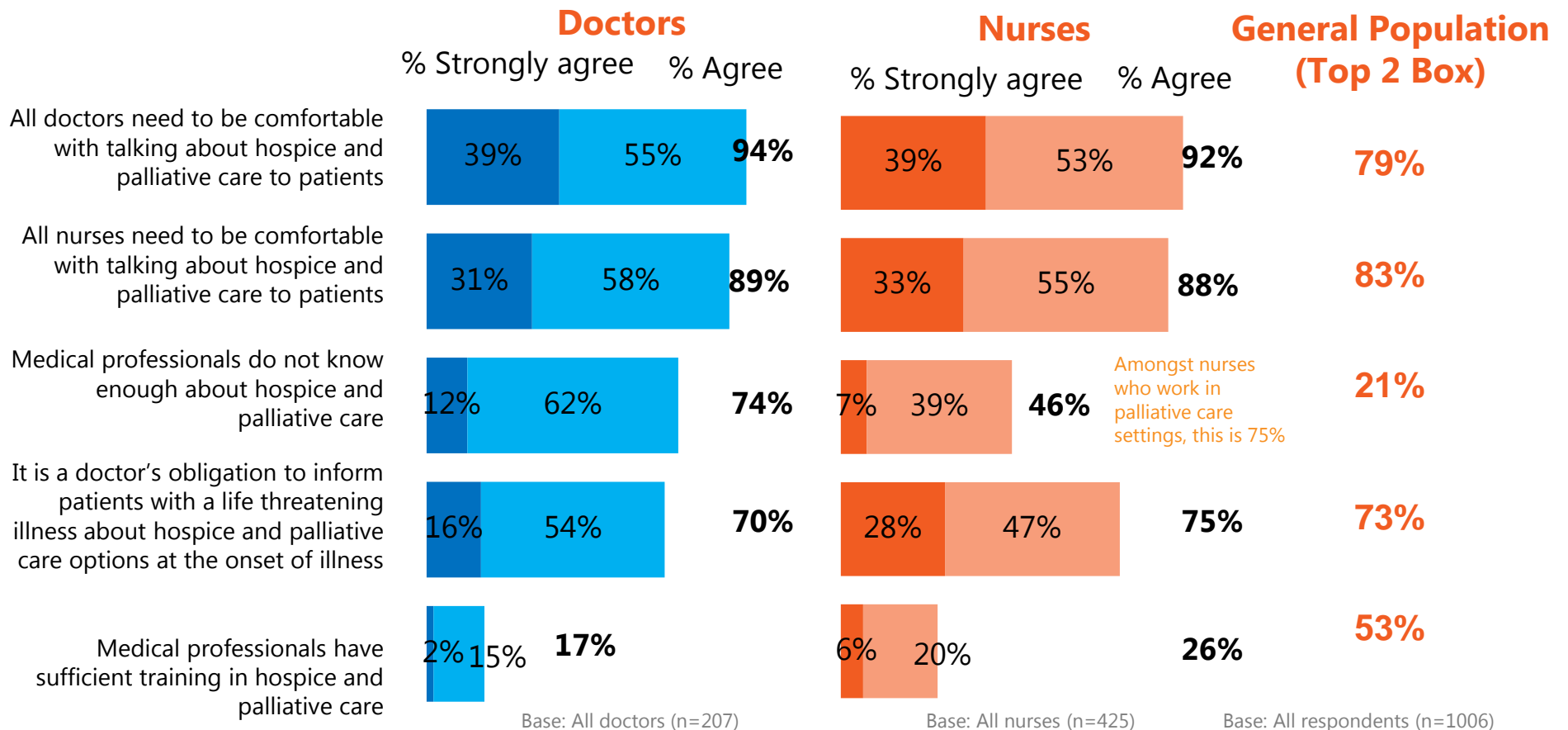
Support for Greater Public Education and Awareness

- Even more than the general public, there was strong support amongst medical professionals for greater public education and awareness on palliative care.
- In particular, 97% of doctors and 90% of nurses indicated that the general public needs to know more about hospice and palliative care.



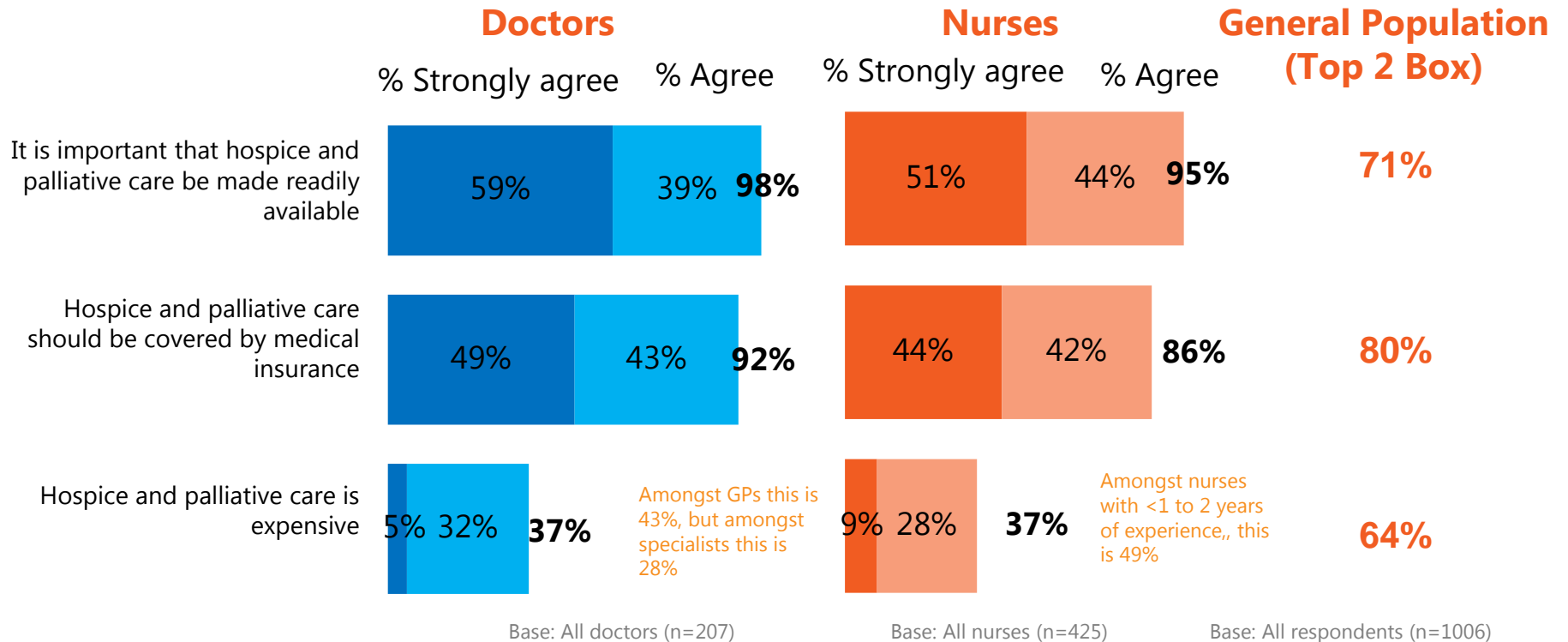
Role of Medical Professionals in Hospice Palliative Care

- Even more so than the general public, both doctors and nurses recognise the need to be comfortable talking about hospice palliative care.
- 74% of doctors think that medical professionals do not know enough about palliative care, but only 45% of nurses thought this way. Both doctors and nurses do not think that medical professionals have sufficient training in palliative care.



Availability and Cost of Palliative Care

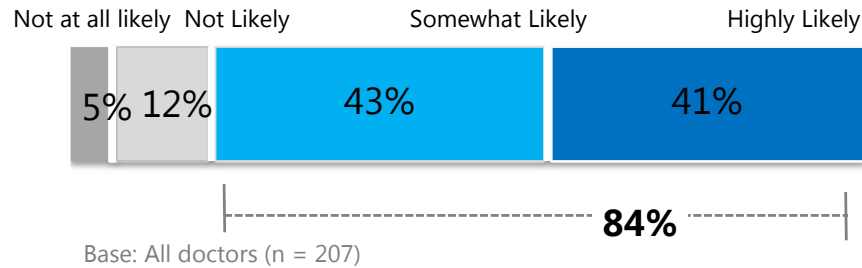
- 96% of all doctors and 95% of nurses agreed that it is important that hospice and palliative care be made readily available. About 9 in 10 medical professionals also supported the coverage of palliative care under medical insurance.
- In contrast to the general public, only 37% of medical professionals think that palliative care is expensive.



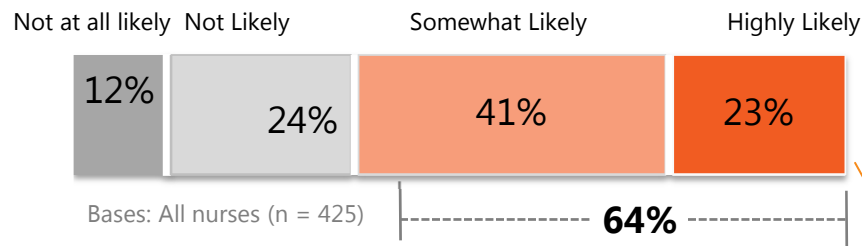
Likelihood to Consider Hospice Palliative Care

84% of all doctors are highly likely/somewhat likely to consider palliative care. This percentage is much lower for the nurses (64%).

Doctors



Nurses



Why not likely to choose palliative care?

I want to die at home near my loved ones (57%)

Financial costs (8%)

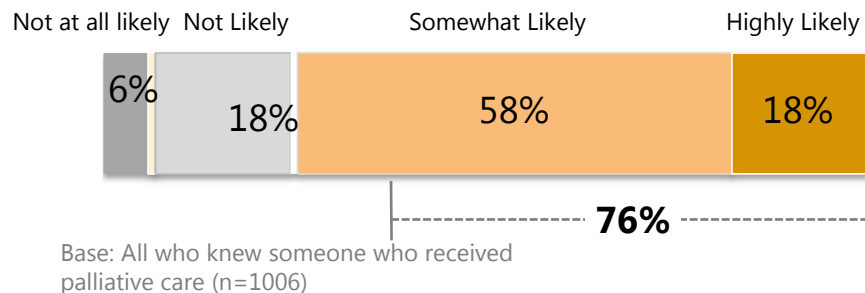
I don't think it is useful (8%)

I would rather focus on curing the illness (2%)

No comments (6%)

Others (16%)

General Public

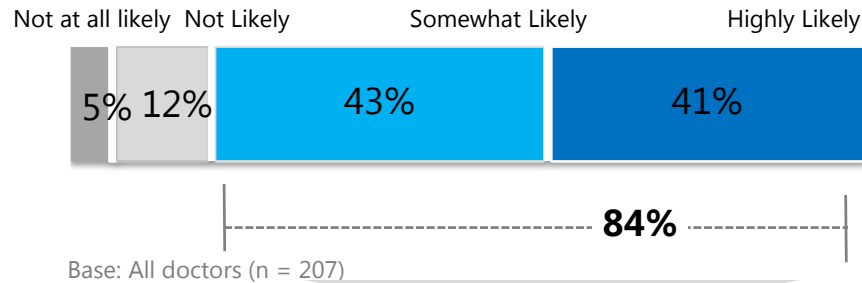


Base: All nurses who are unlikely to choose/would not choose at all (n=51)

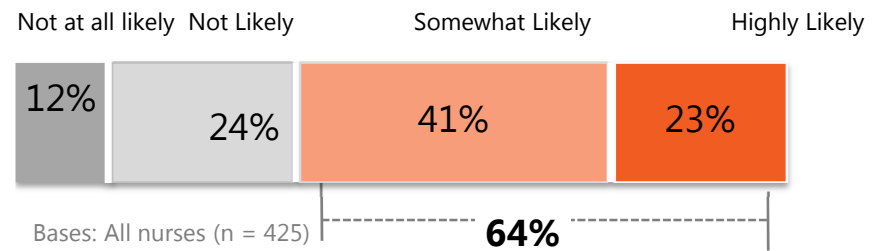
Likelihood to Consider Hospice Palliative Care

84% of all doctors are highly likely/somewhat likely to consider palliative care. This percentage is much lower for the nurses (64%).

Doctors

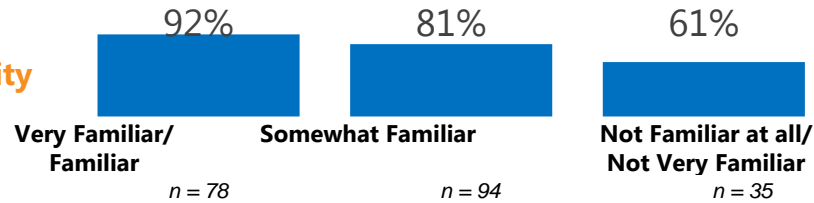


Nurses

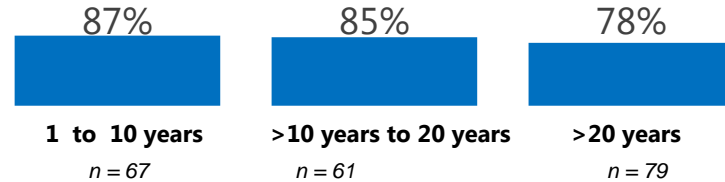


Rated Highly Likely/Somewhat Likely

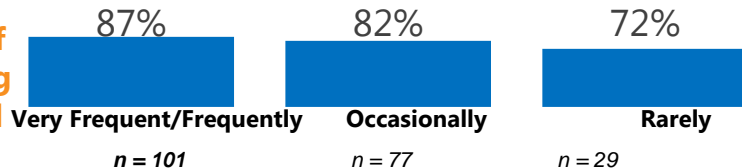
Familiarity



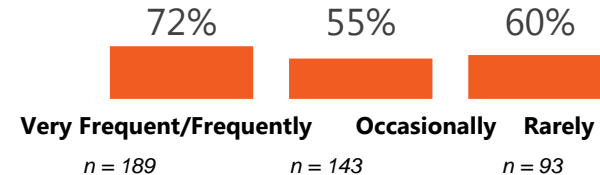
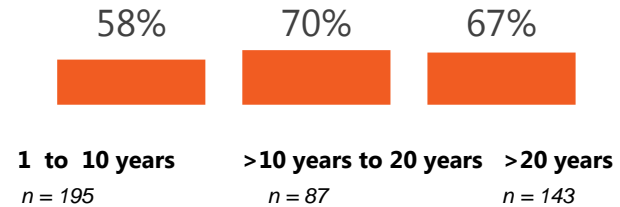
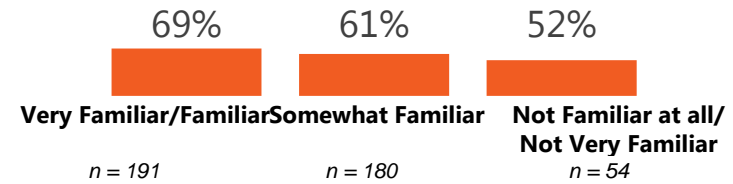
Years of Experience



Frequency of encountering terminally-ill



Rated Highly Likely/Somewhat Likely



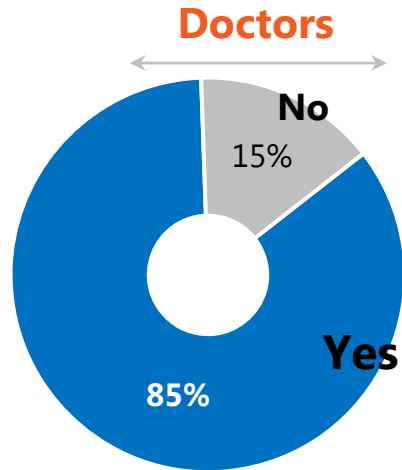
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How comfortable
are medical
professionals with
talking about
death and dying?

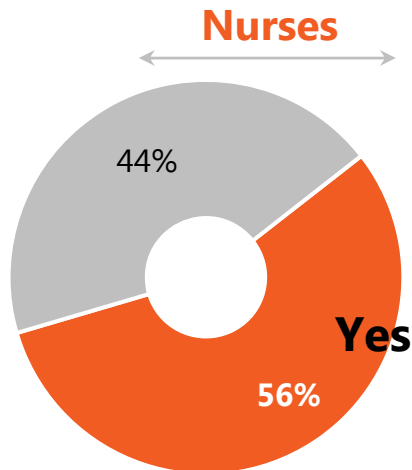
- The findings show that 85% of doctors have talked about death whereas only 56% of nurses had talked about death and dying.
- Medical professionals are more comfortable speaking about death and dying in a personal rather than professional capacity.
- Doctors are more comfortable speaking about death compared to nurses – whether this is on a personal or professional capacity.
- Doctors are also more likely to disclose if they or their loved ones had a life threatening illness

Discussing Death and Dying

85% of doctors had talked about death and dying with their patients. In comparison, only 56% of nurses had talked about death and dying.



Base: All doctors (n = 207)



Base: All nurses (n = 425)

More likely to have talked about palliative care

- Those with more frequent contact with terminally ill
- Those more familiar with palliative care

% answered Yes

Frequency of coming across terminally-ill patients		
Very Frequent/Frequently	Occasionally	Rarely/Never
97%	78%	59%
<i>n = 101</i>	<i>n = 77</i>	<i>n = 29</i>

Familiarity with HPC		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
95%	89%	49%
<i>n = 78</i>	<i>n = 94</i>	<i>n = 35</i>

Frequency of coming across terminally-ill patients		
Very Frequent/Frequently	Occasionally	Rarely/Never
74%	46%	34%
<i>n = 189</i>	<i>n = 143</i>	<i>n = 93</i>

Familiarity with HPC		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
73%	48%	22%
<i>n = 191</i>	<i>n = 180</i>	<i>n = 54</i>

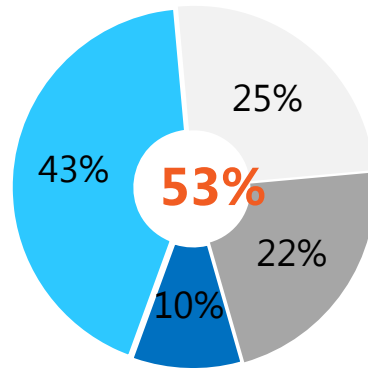
Comfort Level Discussing Death & Dying (Professional Capacity)

53% of all doctors are comfortable discussing death and dying with their patients. However, only 31% of nurses are comfortable discussing death.

Doctors

- Very Comfortable
- Comfortable
- I have no strong feelings either way
- Very uncomfortable/uncomfortable

Professional Capacity



Base: All doctors (n = 207))

% Very Comfortable/Comfortable

Frequency of coming across terminally-ill patients		
Very Frequent/Frequently	Occasionally	Rarely/Never
56%	52%	45%
n = 101	n = 77	n = 29

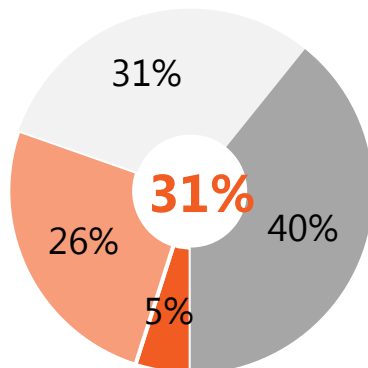
Familiarity with HPC		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
74%	47%	23%
n = 78	n = 94	n = 35

Years of Experience		
<1 year to 10 years	>10 years to 20 years	>20 years
37%	57%	63%

Nurses

- Very Comfortable
- Comfortable
- I have no strong feelings either way
- Very uncomfortable/uncomfortable

Professional Capacity



Base: All nurses (n = 425)

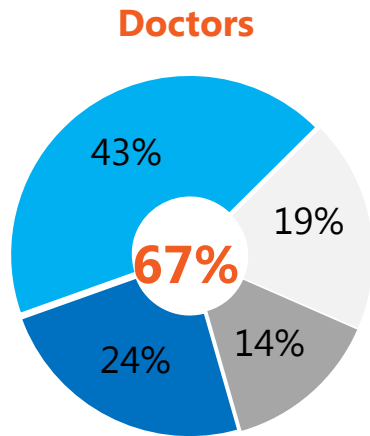
Frequency of coming across terminally-ill patients		
Very Frequent/Frequently	Occasionally	Rarely/Never
65%	54%	55%
n = 189	n = 143	n = 93

Familiarity with HPC		
Very Familiar/Familiar	Somewhat Familiar	Not Familiar at All/Not Very Familiar
43%	23%	9%
n = 191	n = 180	n = 54

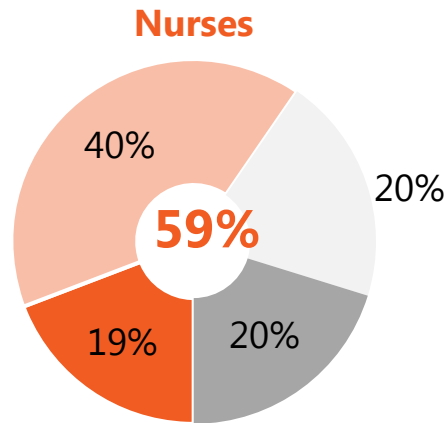
Years of Experience (Nurses)		
<1 year to 10 years	>10 years to 20 years	>20 years
49%	60%	71%
n = 195	n = 87	n = 143

Comfort Level Discussing Death & Dying (Personal Capacity)

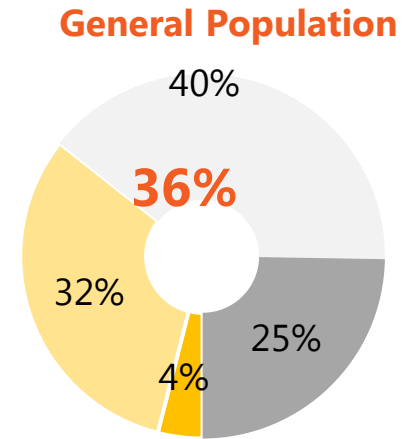
Doctors and nurses are more comfortable discussing death and dying on a personal capacity compared to a professional capacity. They are also much more comfortable with the topic than the general population.



Base: All doctors (n = 207)



Base: All nurses (n = 425)



Base: All respondents (n = 1006)

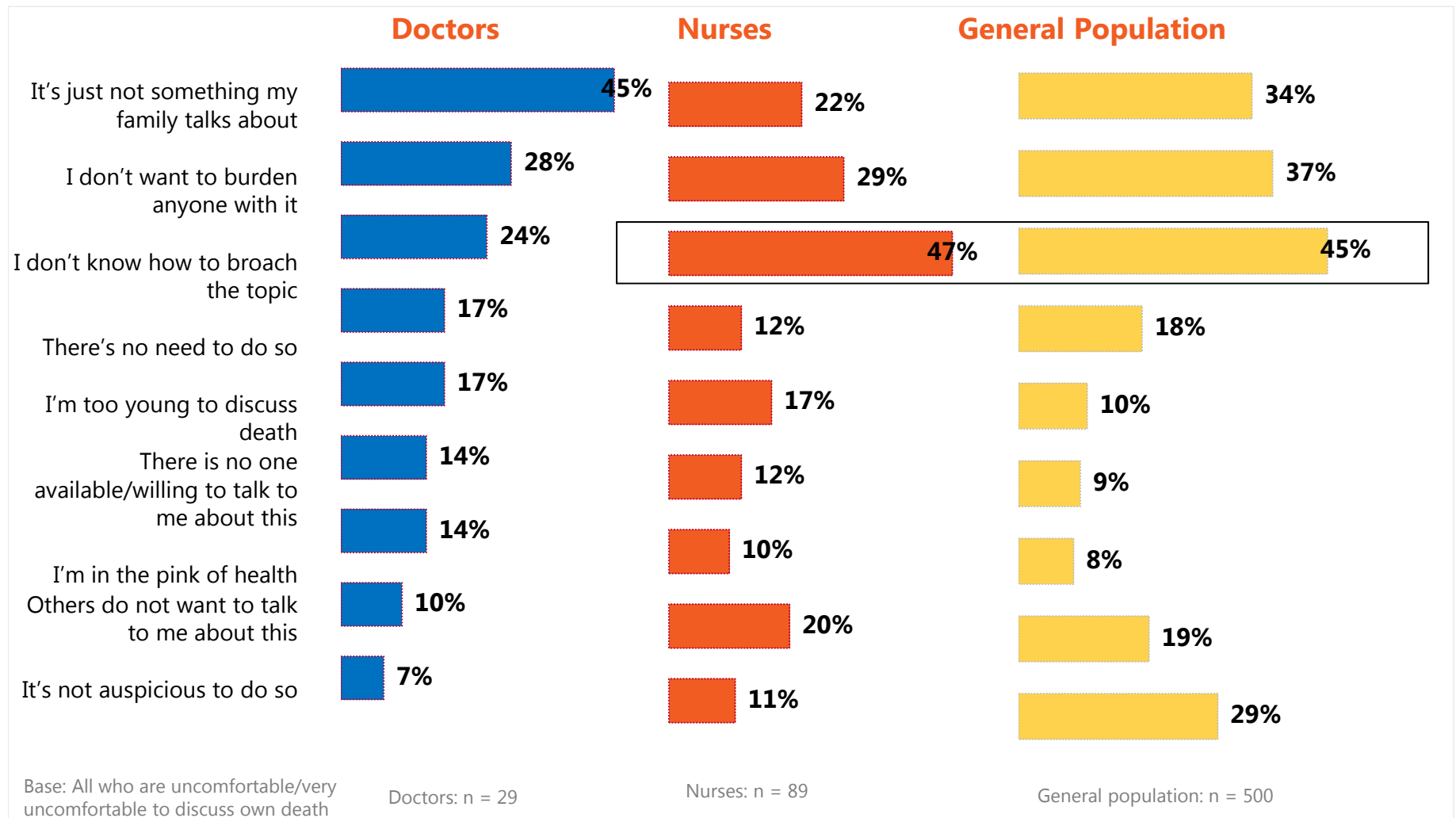
- Very Comfortable
- Comfortable
- I have no strong feelings either way
- Very uncomfortable/uncomfortable

- Very Comfortable
- Comfortable
- I have no strong feelings either way
- Very uncomfortable/uncomfortable

- Very Comfortable
- Comfortable
- I have no strong feelings either way
- Very uncomfortable/uncomfortable

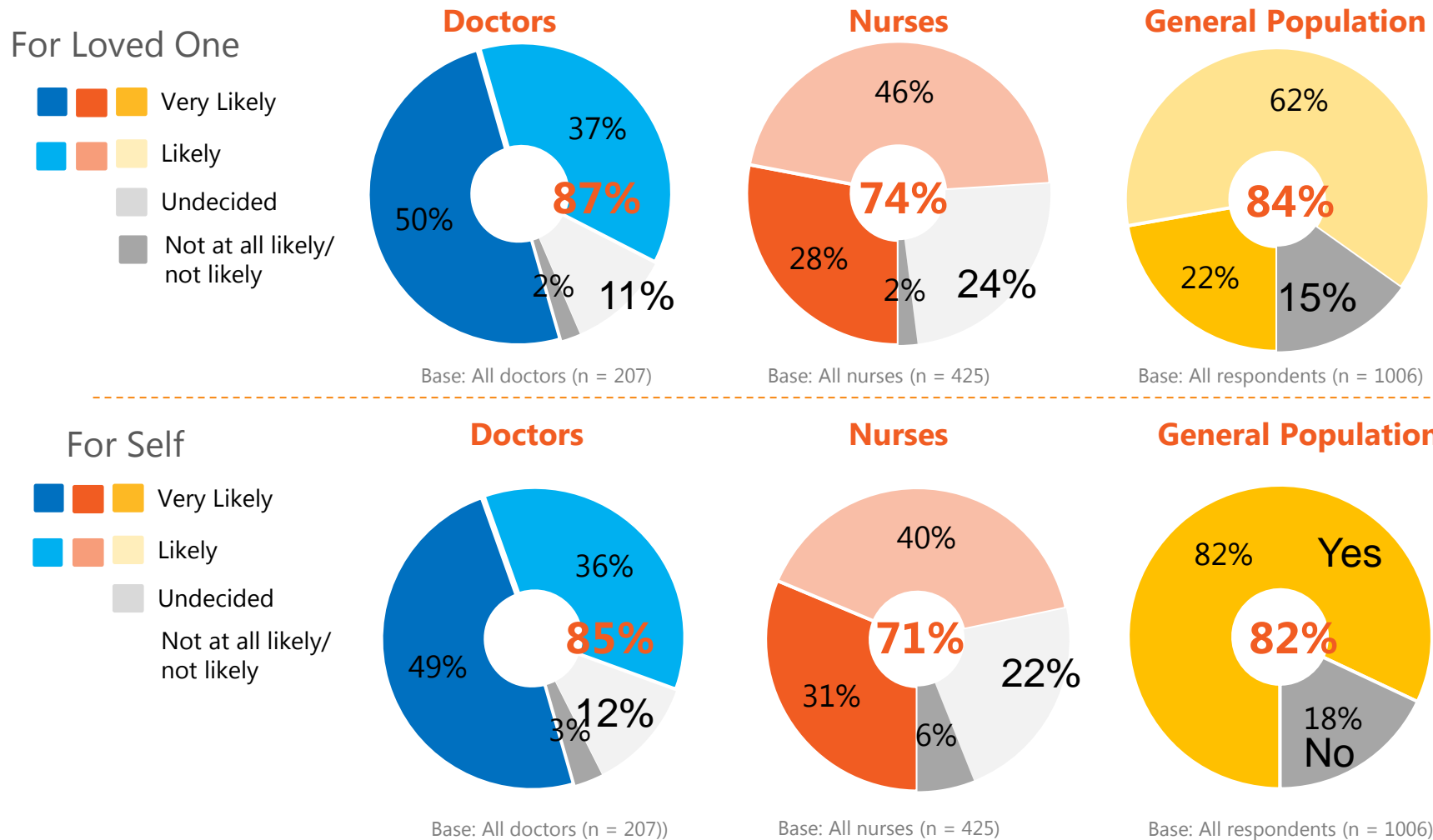
Reasons for Discomfort

Across doctors, the top reason for feeling uncomfortable talking about death was “It’s just not something my family talks about.” For both nurses and the general public it was “I just don’t know how to broach the topic.”



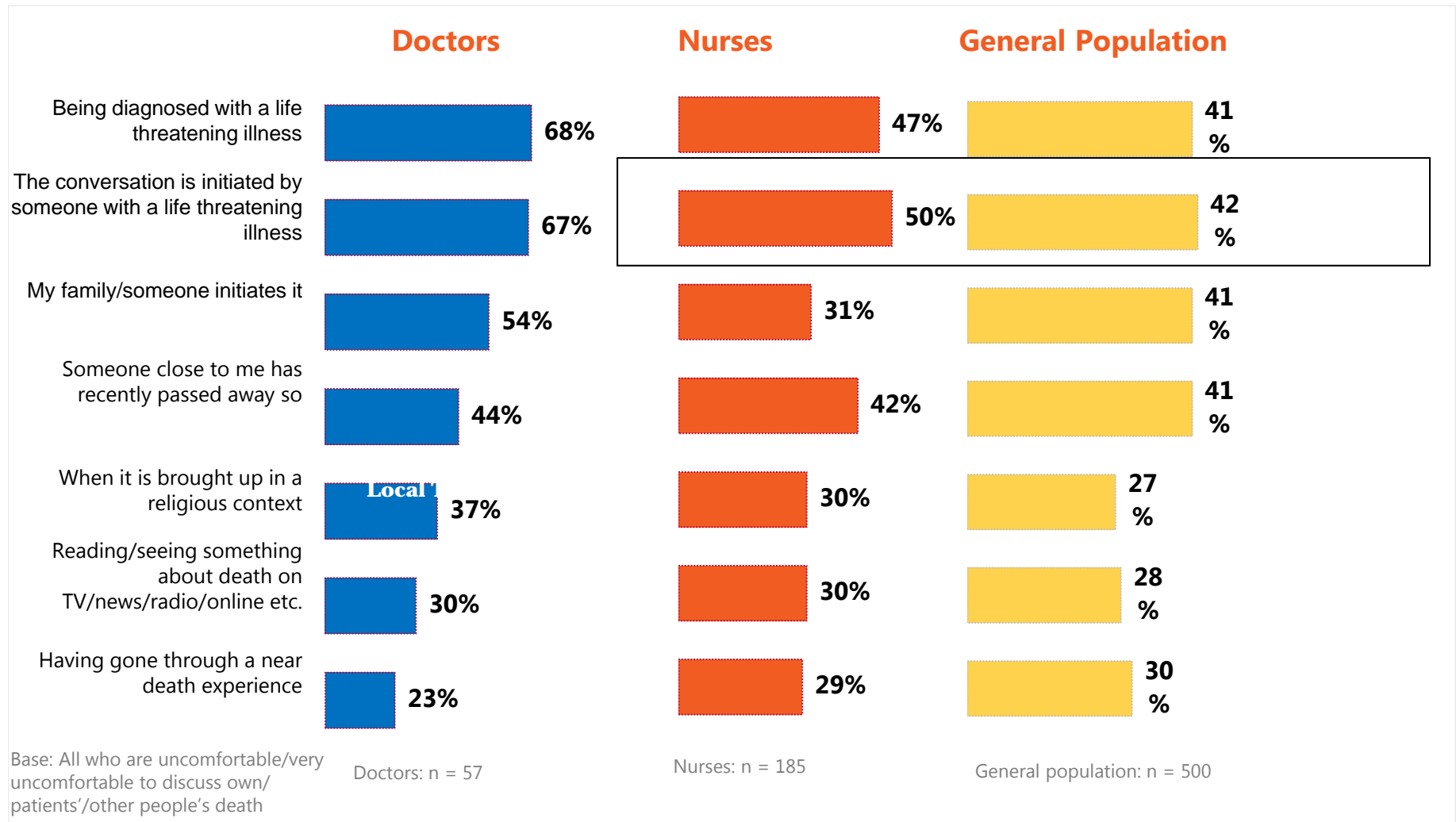
Likelihood to Disclose

87% of doctors are likely to disclose if their loved one had a life-threatening illness and 85% of doctors would disclose if they themselves had a life threatening illness. This percentage was much lower for nurses – 74% (for their loved one) and 71% (for themselves).



Triggers to Discuss Death

Amongst doctors, the biggest trigger to discuss death is being diagnosed with a life threatening illness. Amongst nurses and the general public, the biggest trigger to discuss death is when the conversation is initiated by someone with a life threatening illness.



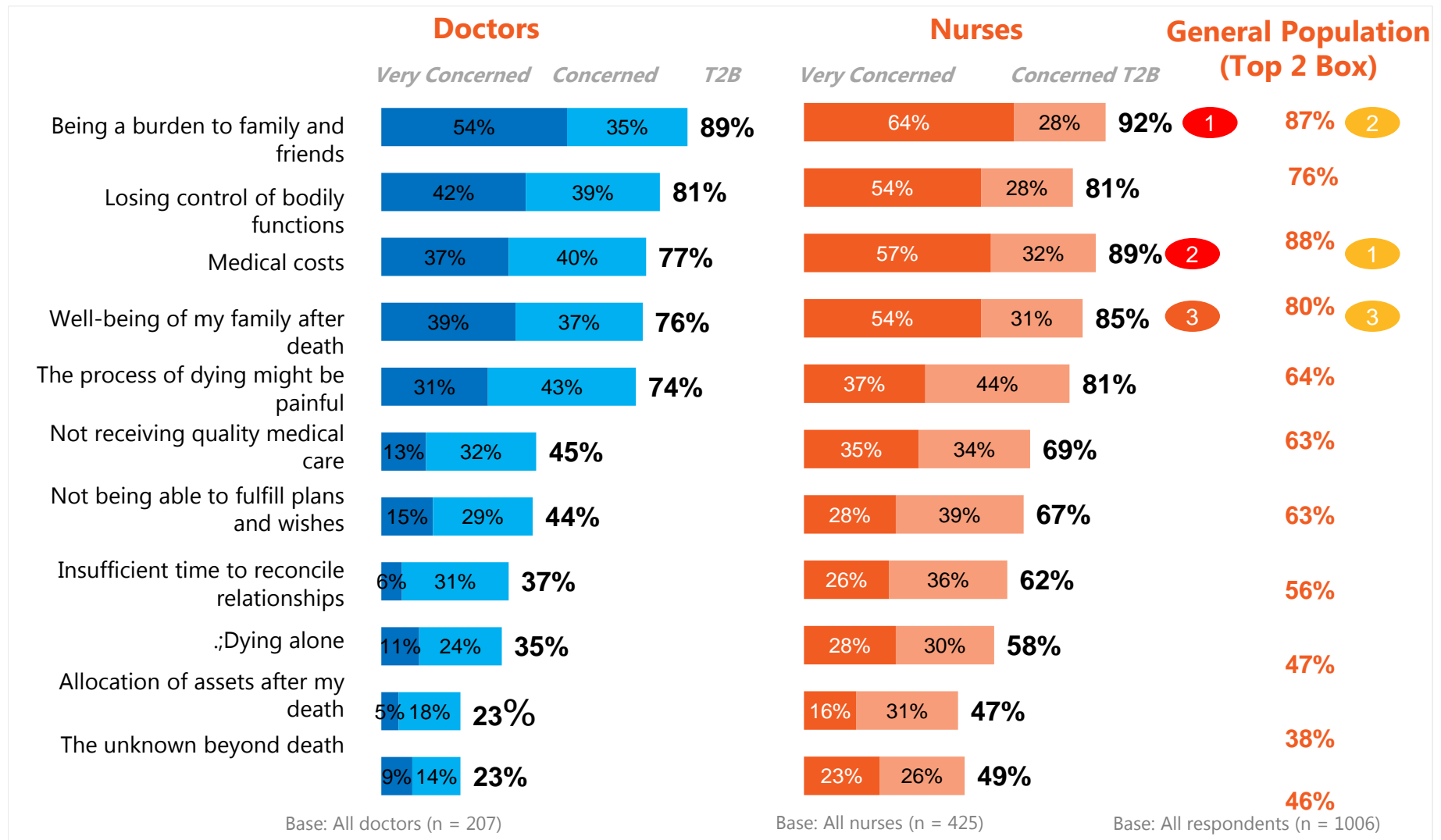
7

What do medical professionals fear about death?

- The top fear about death amongst medical professionals is being a burden to family and friends (89% of doctors and 92% of nurses). This was the second biggest fear amongst the general population.
- The second biggest fear for doctors was losing control of bodily functions (81%) and the second biggest fear for nurses was medical costs (89%).
- Medical costs was less of a concern for doctors (77%).

Fears about Death/Dying

Amongst doctors and nurses, the top fears about dying was being a burden to family and friends. The second biggest fear amongst doctors was losing control of bodily functions whereas this was medical costs for nurses.



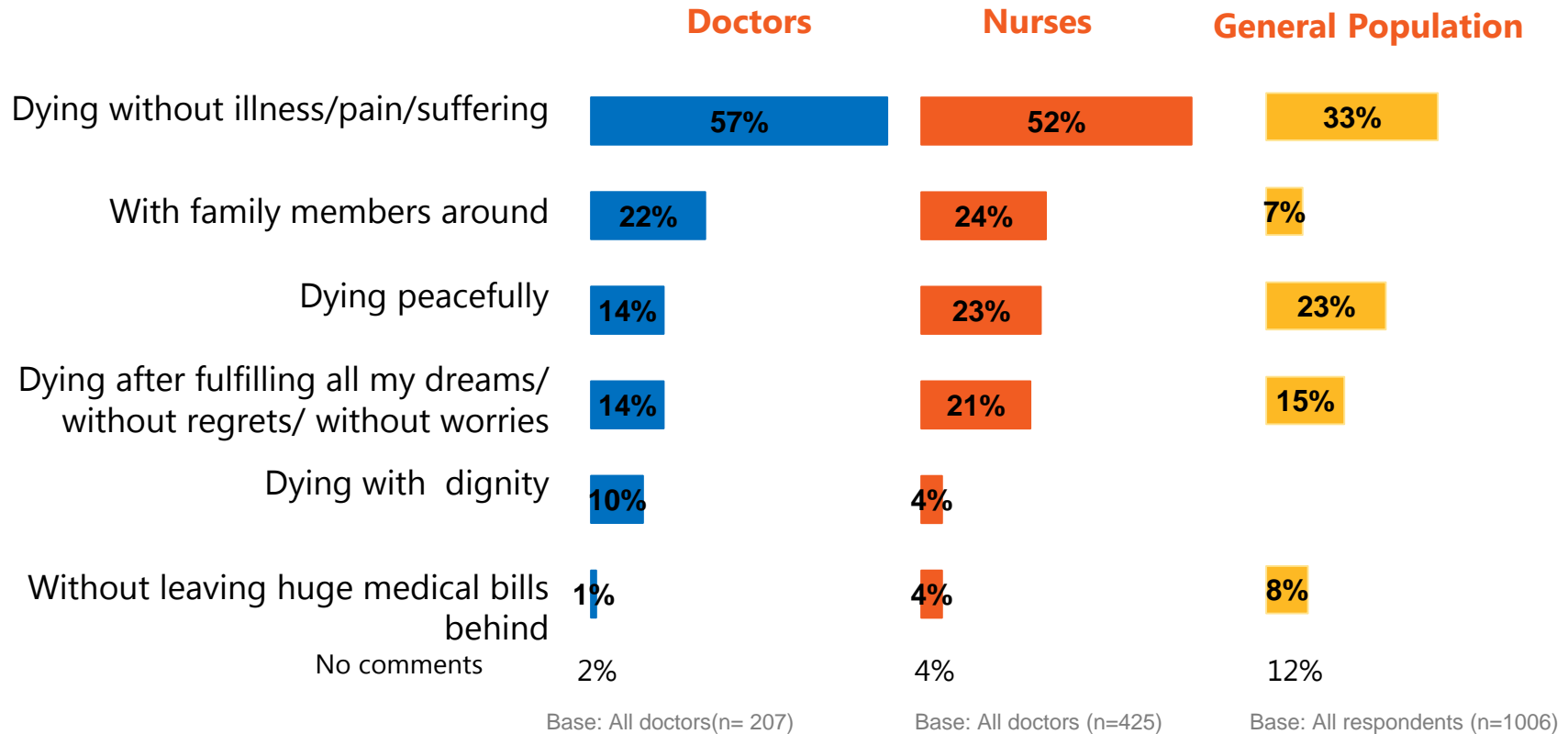
8

Where and how do they want to die?

- The preferred choices of medical professionals at end of death is quite similar to the general public.
- Most want to be cared for at home if they were dying and will choose homes as their final place of death. However, only 35% of doctors and 54% of nurses would still choose to die at home if there was insufficient support from caregivers (this was 76% amongst the general public).
- The top priorities of medical professionals at end of life is having control over pain relief and other symptom control and ensuring that one's death is not a financial burden to loved ones.

What Does Dying Well Mean to You

Consistent with the general population, most medical professionals associated dying well with dying without illness/pain/suffering.



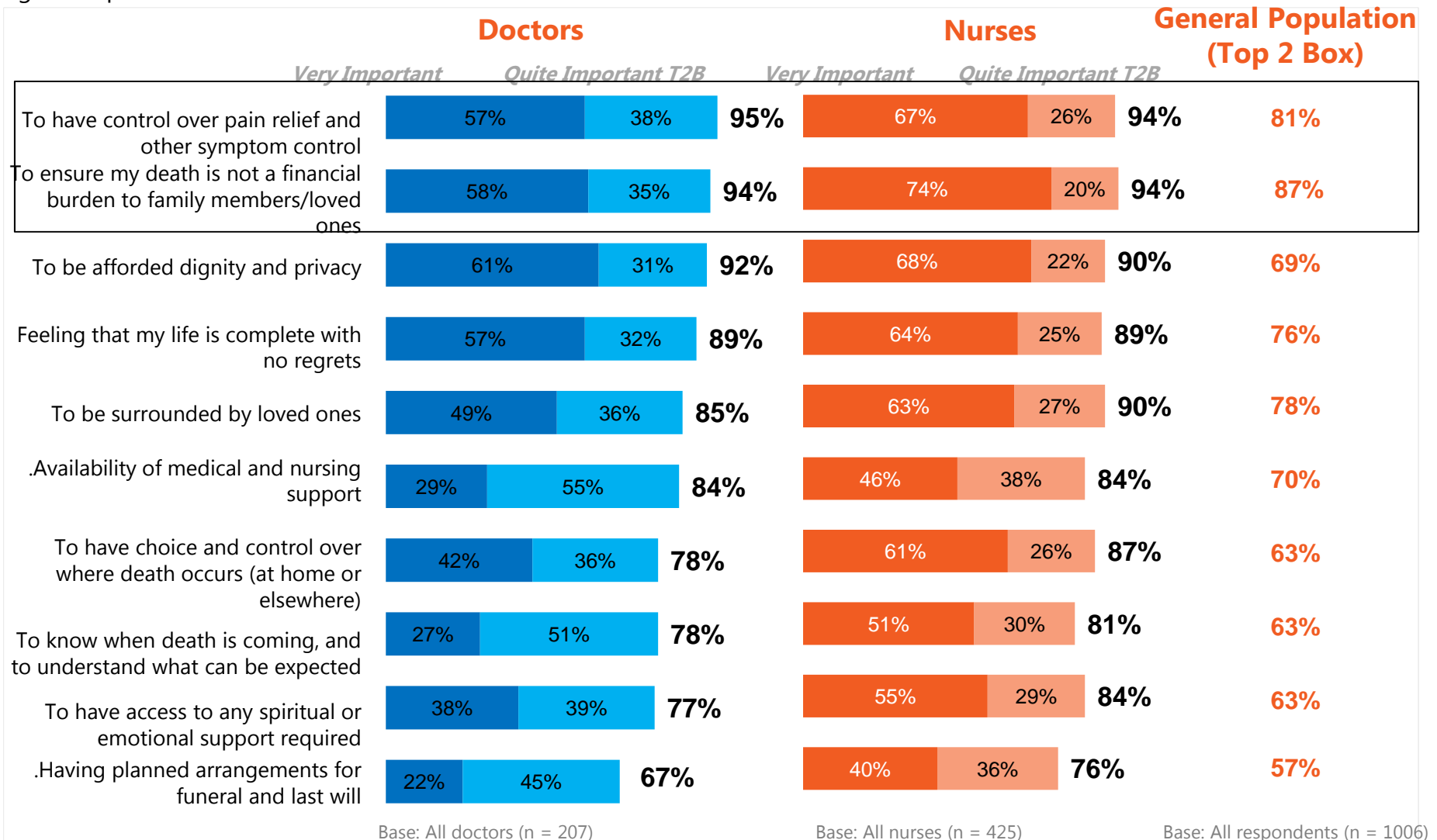
Interesting finding

Nurses with greater familiarity with palliative care are more likely to want to die without illness/pain/suffering

Very Familiar/Familiar	Somewhat Familiar	Not Familiar/Not Very Familiar
58%	48%	44%

Priorities at End of Life

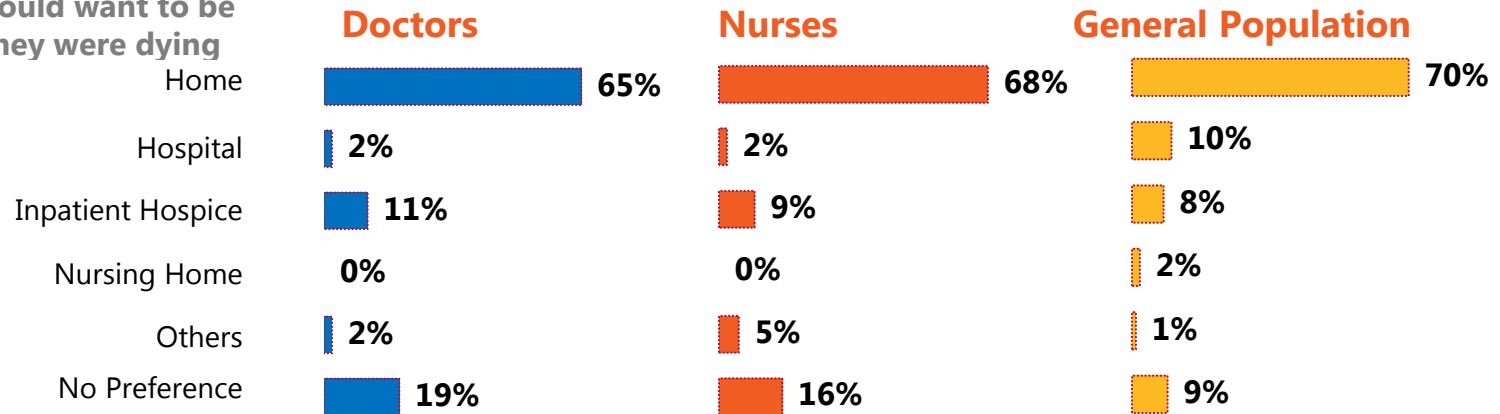
Amongst doctors and nurses, the top priorities at end of life are having control over pain relief and other symptom control as well as ensuring that one's death is not a financial burden to loved ones. This is consistent with the top priorities of the general public.



Preferred Place of Dying

About three out of four medical professionals would choose home as their final place of death. However, only 35% of doctors and 54% of nurses would choose to die at home if there was insufficient support from family, friends or medical professionals.

Where they would want to be cared for if they were dying

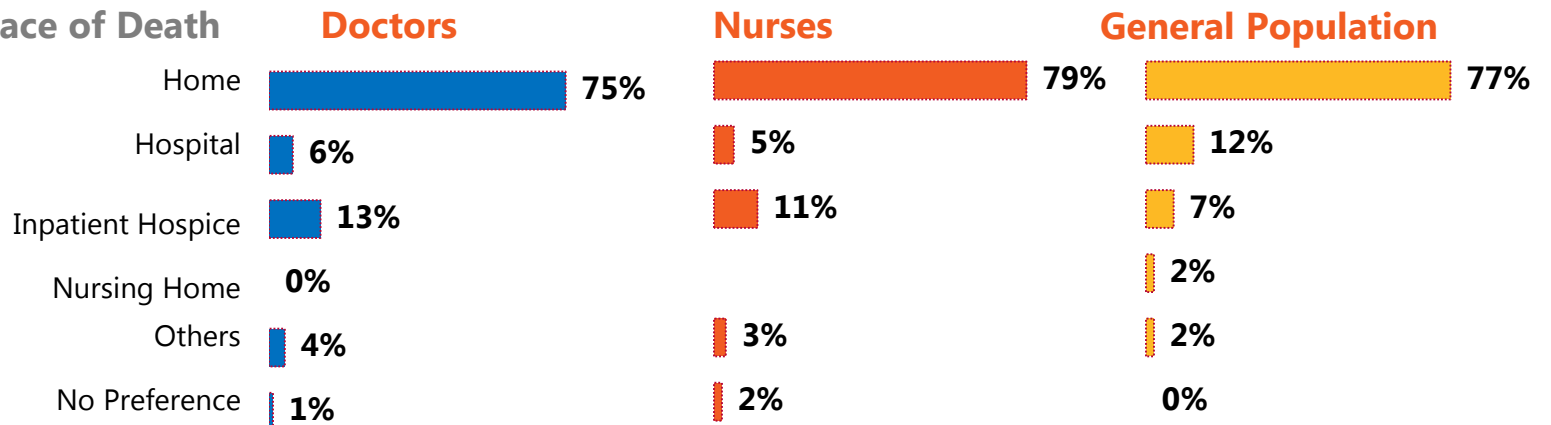


Base: All doctors (n = 207)

Base: All nurses (n = 425)

Base: All respondents (n = 1006)

Final Place of Death

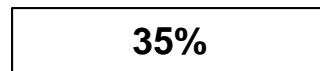


Base: All doctors (n = 207)

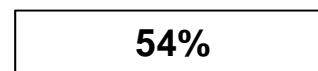
Base: All nurses (n = 425)

Base: All respondents (n = 1006)

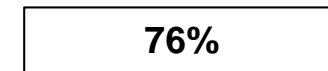
Would still want to die at home even if there was insufficient support from medical professionals



Base: Those who want to die at home (n = 154)



Base: Those who want to die at home (n = 334)



Base: Those who want to die at home (n = 775)

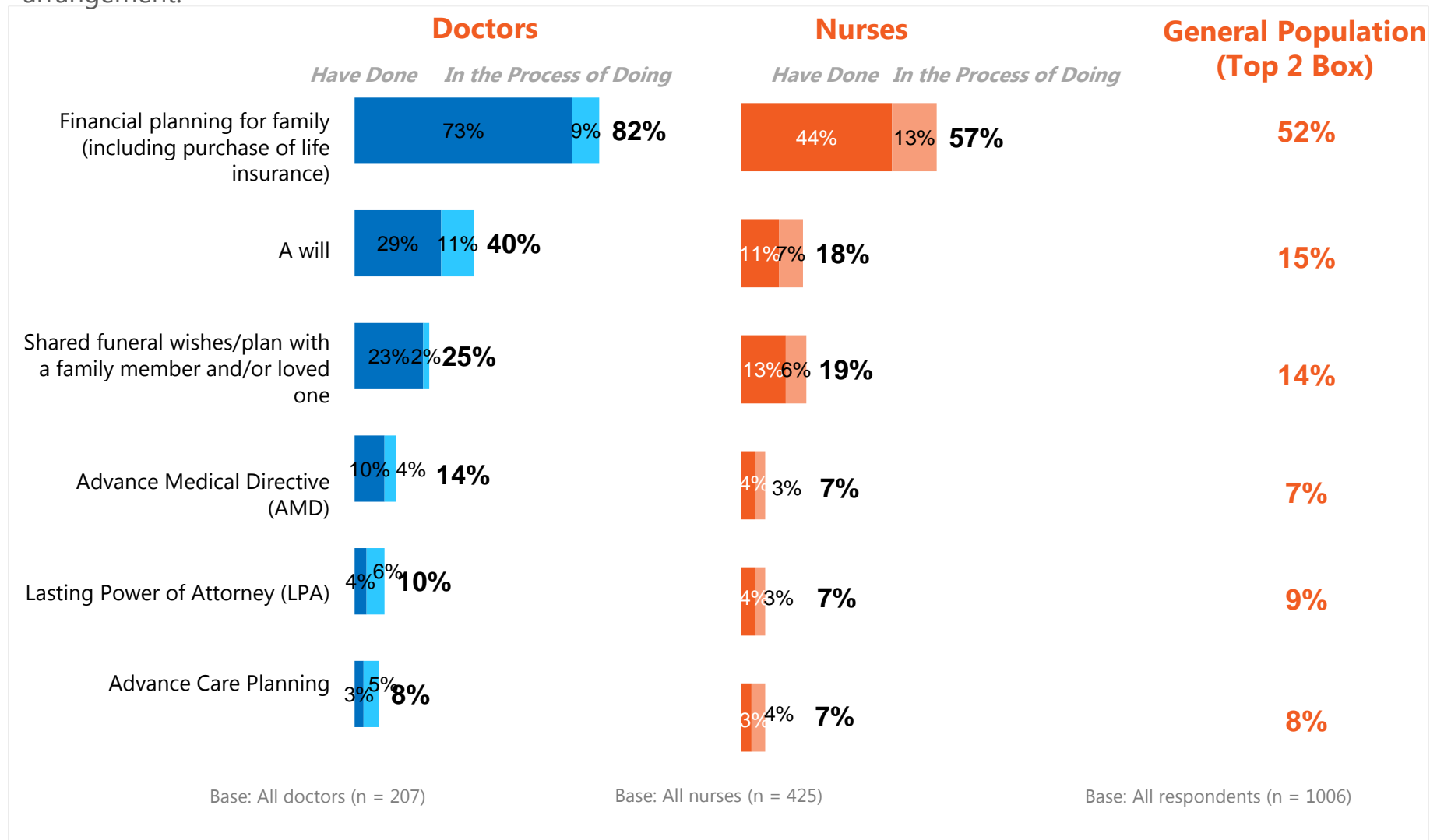
9

Are medical professionals adequately preparing for end of life?

- Consistent with the general population, the top pre-death arrangements were purchasing financial planning followed by making a will.
- Doctors in particular were most likely to have undertaken these arrangements. 82% had purchased/were in the process of purchasing financial planning and 40% had done/were doing a will.

Pre-Death Arrangements

The top pre-death arrangement amongst all groups were purchasing financial planning followed by making a will and sharing funeral wishes . Doctors in particular were more likely to have done/be doing this pre-death arrangement.



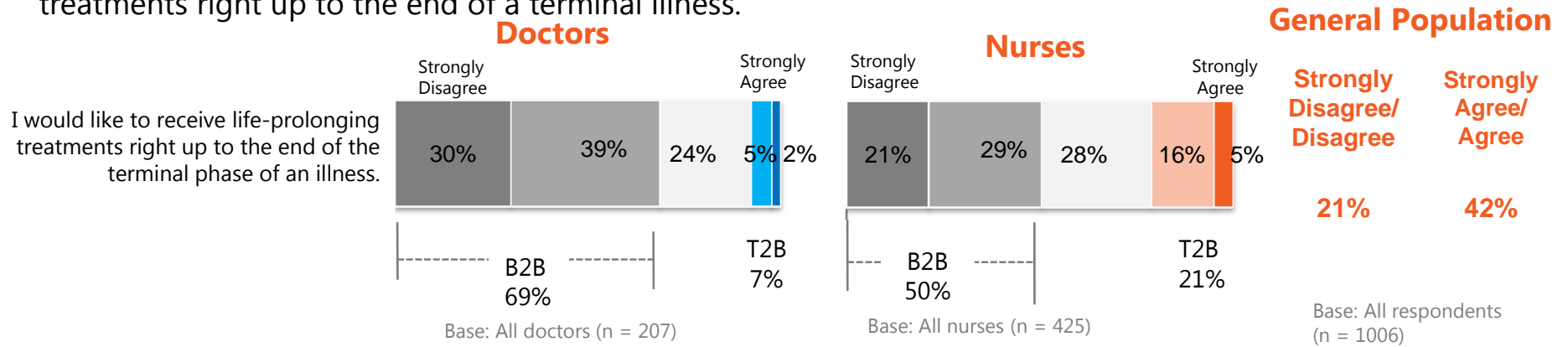
10

What are the views
of medical
professionals
towards life-
prolonging
treatments?

- Compared to the general public, medical professionals were far less likely to want to receive life-prolonging treatments right up to the end of a terminal illness.

Life-Prolonging Treatments (Personal Views)

Compared to the general public, medical professionals were far less likely to want to receive life-prolonging treatments right up to the end of a terminal illness.



Rated Strongly Agree/Agree

Frequency of encountering terminally-ill patients		
Christianity	No Religion	Others
7%	7%	11%

n = 116 n = 55 n = 36

Frequency of encountering terminally-ill patients		
Frequent	Occasionally	Rarely
6%	6%	17%

n = 101 n = 77 n = 29

No of Years of Experience		
<1 year to 10 years	10+ to 20 years	>20 years
9%	7%	8%

n = 67 n = 61 n = 79

Strongly Agree Agree Undecided Disagree Strongly Disagree

Rated Strongly Agree/Agree

Religion				
Christianity	Buddhism	Islam	No Religion	Others
17%	22%	34%	20%	17%

n = 144 n = 86 n = 65 n = 84 n = 46

Frequency of encountering terminally-ill patients		
Frequent	Occasionally	Rarely
17%	28%	18%

n = 189 n = 143 n = 93

No of Years of Experience		
<1 year to 10 years	10+ to 20 years	>20 years
29%	15%	15%

n = 195 n = 87 n = 143

Conclusions and Recommendations



Summary: Attitudes and Perceptions of Palliative Care

Familiarity with Palliative Care

Doctors

- 38% of doctors are very familiar/familiar

Nurses

- 45% of doctors are very familiar/familiar

Adequacy of Medical Education Programme

Doctors

- 62% of doctors think that medical education was inadequate in preparing them for supporting patients with life-threatening illnesses.

Nurses

- 38% of nurses think that medical education inadequate in preparing them for supporting patients with life-threatening illnesses.

Importance of Palliative Care

Doctors

- 95% of doctors think that it is important for patients with life-threatening illnesses

Nurses

- 94% of nurses think that it is important for patients with life-threatening illnesses.

Discussing Palliative Care with Patients

Doctors

- 82% of all doctors have discussed palliative care with their patients before.

Nurses

- 53% of nurses have discussed palliative care with their patients before.

Evaluation of Palliative Care

Doctors

- 60% of doctors think that palliative care is very good/excellent

Nurses

- 58% of doctors think that palliative care is very good/excellent

Summary: Attitudes Towards Death and Dying

Talking about Death & Dying

Doctors

- 53% of all doctors are comfortable discussing death and dying with their patients.

Nurses

- 31% of nurses are comfortable discussing death with their patients.

Fears about Death

Doctors

- Top Fears : Being a burden to family and friends (89%) and losing control of their bodily functions (81%)

Nurses

Top Fears: Being a burden to family and friends (92%) and medical costs (89%)

Final Place of Death

Doctors

- 75% will chose home as their final place of death

Nurses

- 75% will choose home as their final place of death

Pre-Death Arrangements

Doctors

- Top arrangements were financial planning (82%), followed by will (40%)

Nurses

- Top arrangements were financial planning (57%) followed by sharing funeral wishes with a loved ones (19%)

Attitudes towards Life Prolonging Treatments

Doctors

- 7% would want to receive life-prolonging treatments right up to the end of an illness

Nurses

- 21% would want to receive life-prolonging treatments right up to the end of an illness

Implications

Doctors & Nurses

1

Need to increase familiarity of palliative care amongst medical professionals. Less than half retain knowledge from school and only a third get onsite training

2

Need to re-look at current basic medical education programmes – 2 in 3 doctors do not feel it is adequate. Only about 1 in 5 medical professionals feel they have sufficient training in hospice and palliative care

3

Develop better understanding amongst nurses about what their role is when talking about palliative care and end of life issues

4

Need to address concerns raised about palliative care – medical costs and perception that palliative care means giving up or is limited to a hospice

5

Even amongst medical professionals, about 2 in 3 would still choose home as final place of death

Demographics

Doctors (n=207)

Gender		Area of Specialisation	
Males	59%	Anaesthesiology	5%
Females	41%	Cardiology	4%
Nationality		Dermatology	5%
Singaporean	85%	Emergency Medicine	4%
Others	15%	Endocrinology	7%
Ethnicity		Family Medicine Continuing Care	1%
Chinese	86%	General Surgery	3%
Indian	9%	Geriatric Medicine	11%
Others	5%	Haematology	3%
Gender		Infectious Diseases	1%
Religion		Internal Medicine	1%
Christianity	56%	Neonatal & Developmental Medicine	5%
Buddhism	9%	Neurology & Neurosurgery	3%
Hinduism	5%	Nuclear Medicine	<1%
Islam	1%	Pediatrics	5%
No Religion	27%	Obstetrics & Gynaecology	3%
Type of Doctor		Otolaryngology	4%
General Practise	63%	Ophthalmology	1%
Specialist	37%	Orthopaedic Surgery	8%
		Psychiatry	9%
		Radiation & Radiology	5%
		Rehabilitation Medicine	1%
		Renal Medicine	1%
		Respiratory & Critical Care Medicine	3%
		Rheumatology & Immunology	3%

Demographics

Doctors (n=207)

Place of Work

Community Hospital / Nursing Home	2%
Home Medical / Nursing Service / Day Care	1%
Hospice	0%

Polyclinic	3%
Private Clinics (General Practice / Specialist Practice)	31%
Private Hospital	1%
Public Hospital	58%
Others	4%

Years of Practise

<1 year to 2 years	8%
> 2 years to 10 years	25%
>10 years to 20 years	29%
>20 years	38%

Frequency of Encountering Patients with Life-Threatening Illnesses

Very frequently (several times a week)	23%
Frequently (at least once a month)	26%
Occasionally (a few times a year)	37%
Rarely (about once a year or less often)	13%
Never	1%

Demographics

Nurses (n=425)

Gender

Males	6%
Females	94%

Nationality

Singaporean	78%
Others	22%

Ethnicity

Chinese	71%
Malay	13%
Indian	7%
Others	9%

Religion

Christianity	34%
Buddhism	20%
Hinduism	3%
Islam	15%
Taoism	3%
Other religion	4%
No religion	20%

Place of Work

Community Hospital / Nursing Home	3%
Home Medical / Nursing Service / Day Care	1%
Hospice	3%
Polyclinic	14%
Private Clinics (General Practice / Specialist Practice)	1%
Private Hospital	1%
Public Hospital	71%
Others, please specify:	5%

Years of Practise

<1 year to 2 years	12%
> 2 years to 10 years	34%
>10 years to 20 years	20%
>20 years	34%

Frequency of Encountering Patients with Life-Threatening Illnesses

Very frequently (several times a week)	19%
Frequently (at least once a month)	26%
Occasionally (a few times a year)	34%
Rarely (about once a year or less often)	20%
Never	2%