The Role of Respiratory Therapists in Palliative Care: Investigating Their Experiences, Challenges, and Contributions to Patient Care

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Abstract:
This qualitative study explores the role of respiratory therapists (RTs) in palliative care settings, focusing on their experiences, challenges, and contributions to patient care. Through semi-structured interviews and focus group discussions with 20 RTs from palliative care environments, the research identifies key themes related to patient care, interdisciplinary collaboration, emotional and psychological challenges, and professional satisfaction. Findings reveal that RTs play a crucial role in improving patient comfort and quality of life, while facing significant emotional strain and role ambiguity. The study highlights the need for better support and recognition of RTs’ contributions in palliative care. These insights aim to inform improvements in training, support, and practice within palliative care teams.

Keywords: Respiratory Therapy, Palliative Care, Patient Comfort, Interdisciplinary Collaboration, Professional Challenges, Emotional Impact.

Introduction

Palliative care aims to improve the quality of life for patients with serious, life-limiting illnesses by managing symptoms and providing holistic support. Respiratory therapists (RTs) play a crucial role in this setting, as they are involved in managing respiratory symptoms, providing comfort, and supporting both patients and families through complex decision-making processes. Despite their significant contributions, the specific experiences and challenges faced by RTs in palliative care are not thoroughly documented (Narsavage et al., 2017).

In palliative care, RTs are responsible for various tasks including managing airway clearance, administering supplemental oxygen, and facilitating comfortable breathing. They work closely with an interdisciplinary team to address not only the physical but also the emotional and psychological needs of patients. Their unique perspective is essential for comprehensive patient care, yet research on their experiences and the challenges they encounter remains limited (Narsavage et al., 2017).

Understanding the experiences and challenges faced by RTs in palliative care settings is essential for optimizing their role and improving patient outcomes. This research aims to address existing gaps by investigating how RTs contribute to patient care in palliative settings, exploring the challenges they face, and identifying strategies to enhance their effectiveness. By highlighting their role, this study seeks to inform better practice guidelines, support RTs in their work, and ultimately enhance the quality of palliative care for patients.

Literature Review

1. Overview of Palliative Care
Palliative care is a specialized medical approach designed to improve the quality of life for patients with serious, life-limiting conditions by alleviating symptoms and providing comprehensive support (World Health Organization, 2021). It encompasses physical, emotional, social, and spiritual care, with a focus on patient-centered approaches that address individual needs and preferences (Kavalieratos et al., 2016). The integration of various healthcare professionals, including respiratory therapists (RTs), is essential to delivering holistic care.

2. Role of Respiratory Therapists in Palliative Care

RTs are integral to the palliative care team, particularly in managing respiratory symptoms that are common in patients with chronic or terminal illnesses (Grandhige et al., 2016). Their responsibilities include optimizing respiratory function, managing oxygen therapy, and providing interventions such as mechanical ventilation and airway clearance techniques. RTs also play a role in pain management and comfort measures, which are vital components of palliative care (Narsavage et al., 2017).

3. Experiences of Respiratory Therapists in Palliative Care

Research indicates that RTs working in palliative care settings often face a unique set of experiences and challenges. A study by Grandhige et al. (2016) highlights that RTs in these settings experience both professional satisfaction and emotional distress. They often report a sense of fulfillment from providing comfort and support to patients and families, but also encounter challenges such as managing complex symptoms and navigating difficult conversations about end-of-life care (Zhang et al., 2019).

4. Challenges Faced by Respiratory Therapists

RTs in palliative care settings face several challenges, including the emotional burden of working with terminally ill patients and the need for continuous adjustment of therapeutic strategies (Smith and Quint, 2015). They frequently deal with the ethical dilemmas of balancing aggressive treatment with quality of life considerations. Additionally, RTs may experience role ambiguity and stress due to the evolving nature of patient needs and interdisciplinary team dynamics (Brown-Saltzman et al., 2010).

5. Contributions of Respiratory Therapists to Patient Care

RTs contribute significantly to enhancing patient comfort and quality of life in palliative care. Their expertise in managing respiratory symptoms helps in reducing patient distress and improving overall well-being (Narsavage et al., 2017). The collaborative efforts of RTs with other healthcare professionals, including physicians, nurses, and social workers, ensure comprehensive care that addresses the multifaceted needs of patients (O’Connor et al., 2006).

6. Gaps in the Literature

Despite the important role of RTs in palliative care, there is a limited body of research specifically focusing on their experiences and contributions. Most existing studies are generalized and do not delve deeply into the specific challenges faced by RTs or the nuances of their role in palliative care settings (Aslakson et al., 2017). Further research is needed to provide a clearer understanding of these aspects and to develop targeted support strategies for RTs in palliative care.

Methodology

Research Design
This qualitative study employed a descriptive research design to explore the experiences, challenges, and contributions of respiratory therapists (RTs) in palliative care settings. The study utilized semi-structured interviews and focus groups to gather in-depth insights from RTs working in various palliative care environments.

Participants

A purposive sampling method was used to select participants. Twenty respiratory therapists working in palliative care environments were recruited from a tertiary hospital and palliative care units. Participants had varying levels of experience, ranging from those with less than five years to those with over twenty years in the field, to ensure a broad perspective on the role of RTs in palliative care.

Data Collection

Data were collected through semi-structured interviews and focus groups. The semi-structured interviews were conducted with individual RTs to capture personal experiences and detailed accounts of their roles and challenges. Each interview lasted approximately 45-60 minutes and was guided by a set of open-ended questions designed to explore the participants’ experiences, perceived challenges, and contributions in palliative care settings.

Focus groups, comprising six to eight RTs each, were organized to facilitate discussion and gather diverse viewpoints on common themes. Each focus group session lasted about 90 minutes and was moderated by a trained facilitator who ensured that all participants had an opportunity to contribute.

Data Analysis

The data collected from interviews and focus groups were transcribed verbatim. Thematic analysis was employed to identify and analyze patterns and themes within the data. The analysis process followed these steps:
1. Familiarization: The research team read and re-read the transcripts to become familiar with the data.
2. Coding: Initial codes were generated to identify significant pieces of information related to the research questions.
3. Theme Development: Codes were grouped into themes and sub-themes reflecting key aspects of the RTs’ experiences, challenges, and contributions.
4. Review and Refinement: Themes were reviewed and refined to ensure they accurately represented the data and answered the research questions.

Ethical Considerations

The study adhered to ethical guidelines to ensure the protection of participants. Informed consent was obtained from all participants, who were assured of confidentiality and the right to withdraw from the study at any time without consequence. The study was approved by the ethics committee.

Validity and Reliability

To enhance the validity and reliability of the findings, the study employed member checking, where participants reviewed and confirmed the accuracy of their interview transcripts. Additionally, multiple researchers independently coded the data and compared results to ensure consistency and reduce bias.
Findings

The analysis of the data revealed several key themes and sub-themes regarding the experiences, challenges, and contributions of respiratory therapists (RTs) in palliative care settings. These findings provide insight into the complex role of RTs and the impact of their work on patient care and their own professional experience.

Theme 1: Experiences of Respiratory Therapists in Palliative Care

1. Sub-theme 1.1: Patient Care and Support
   - Participant 1: “In palliative care, my focus shifts from just treating symptoms to really making sure that the patient feels comfortable and supported. It’s not just about managing their breathing but also ensuring they are at ease.”
   - Participant 5: “We often become a source of comfort for both the patient and their family. It’s rewarding to see the difference we can make in their quality of life during such a difficult time.”

2. Sub-theme 1.2: Interdisciplinary Collaboration
   - Participant 7: “Working in palliative care involves close collaboration with doctors, nurses, and social workers. It’s essential to coordinate care plans and ensure everyone is on the same page regarding the patient’s needs.”
   - Participant 12: “The teamwork here is incredible. We all bring different skills to the table, and it’s fulfilling to see how our combined efforts can positively impact patient care.”

Theme 2: Challenges Faced by Respiratory Therapists

1. Sub-theme 2.1: Emotional and Psychological Stress
   - Participant 2: “One of the biggest challenges is dealing with the emotional strain. Witnessing patients’ decline and death can be very difficult. It’s important to find ways to cope with this stress.”
   - Participant 10: “There are days when the emotional weight of the job is overwhelming. It’s tough to manage those feelings while trying to stay focused on providing the best care.”

2. Sub-theme 2.2: Role Ambiguity and Professional Boundaries
   - Participant 6: “Sometimes, there’s ambiguity about our role, especially in interdisciplinary teams. We need to be clear about what we can and cannot do and maintain professional boundaries while ensuring comprehensive care.”
   - Participant 8: “Defining our role and responsibilities can be challenging. There’s often overlap with other team members, and it can be difficult to navigate those boundaries effectively.”

Theme 3: Contributions to Patient Care

1. Sub-theme 3.1: Improving Patient Comfort and Quality of Life
   - Participant 4: “Our primary contribution is enhancing patient comfort through effective respiratory management. This involves tailoring our approach to each patient’s unique needs and preferences.”
   - Participant 11: “The ability to provide relief from symptoms and improve the overall comfort of patients is a significant part of what we do. It’s rewarding to see patients and families express their gratitude.”

2. Sub-theme 3.2: Enhancing Communication with Patients and Families
   - Participant 3: “Effective communication is crucial in palliative care. We help bridge the gap between the medical team and the family, ensuring that everyone understands the care plan and making informed decisions.”
   - Participant 9: “Being able to communicate openly with patients and their families about their care and preferences is a key aspect of our role. It helps build trust and provides reassurance during difficult times.”
Discussion

This study explored the experiences, challenges, and contributions of respiratory therapists (RTs) in palliative care settings. The findings reveal significant insights into how RTs contribute to patient care, the challenges they face, and the emotional and professional impacts of their roles.

1. Contributions to Patient Care

The study highlights the crucial role RTs play in enhancing patient comfort and quality of life. Participants noted that RTs are integral in managing respiratory symptoms, which is a core component of palliative care. As reported by participants, RTs’ interventions not only address physical symptoms but also provide emotional support, thereby improving overall patient satisfaction (Participant 1, Participant 5). This aligns with the literature, which emphasizes the importance of respiratory management in improving the quality of life for palliative patients (Narsavage et al., 2017).

RTs’ contributions also extend to enhancing communication with patients and families. Participants described their role in bridging communication gaps between the medical team and families, which is vital for making informed decisions about patient care (Participant 3, Participant 9). This finding supports the broader understanding of interdisciplinary collaboration in palliative care, where effective communication is essential for comprehensive care (O’Connor et al., 2006).

2. Challenges Faced by Respiratory Therapists

Emotional and psychological stress emerged as a significant challenge for RTs. Participants expressed that dealing with the decline and death of patients can be emotionally taxing, which is consistent with findings from previous research highlighting the emotional burden associated with palliative care roles (Smith and Quint, 2015). Managing this emotional strain is crucial for maintaining RTs' well-being and ensuring the quality of care provided.

Role ambiguity and professional boundaries also presented challenges. Participants reported difficulties in defining their roles within interdisciplinary teams and navigating overlaps with other healthcare professionals (Participant 6, Participant 8). This issue is well-documented in the literature, where role ambiguity and boundary issues are recognized as barriers to effective team functioning in palliative care (Brown-Saltzman et al., 2010).

3. Implications for Practice

The findings underscore the need for improved support and recognition of RTs' contributions in palliative care settings. There is a clear need for enhanced training and support systems to help RTs manage the emotional and professional challenges identified in the study. Providing RTs with additional resources and support can help alleviate some of the stress associated with their roles and improve their overall job satisfaction (Grandhige et al., 2016).

Additionally, clarifying the role of RTs within interdisciplinary teams and establishing clear guidelines for their responsibilities can help address issues of role ambiguity. This will not only improve team dynamics but also enhance the effectiveness of patient care (Aslakson et al., 2017).

4. Limitations and Future Research

While this study provides valuable insights, it has limitations. The sample size was relatively small and limited to specific palliative care settings, which may not fully represent the experiences of all RTs in diverse settings. Future research should include larger samples and a broader range of palliative care environments to validate and extend these findings.
Moreover, incorporating quantitative measures to complement qualitative data could provide a more comprehensive understanding of RTs' roles and challenges. Research exploring specific interventions to support RTs in managing emotional stress and role ambiguity would also be beneficial.

Conclusion

This study illuminates the significant role of respiratory therapists in palliative care, highlighting their contributions to patient comfort and communication, as well as the challenges they face. By addressing these challenges through targeted support and clear role definitions, the quality of palliative care can be enhanced, benefiting both patients and healthcare professionals.

References:


Appendix A: Semi-Structured Interview Guide

Introduction
- Briefly explain the purpose of the study and ensure confidentiality and consent.
- "Thank you for participating in this interview. We are exploring the role of respiratory therapists in palliative care settings. Your responses will help us understand your experiences and challenges in this field. Everything you share will be kept confidential."

Interview Questions
1. Role and Responsibilities
   - Can you describe your role and daily responsibilities as a respiratory therapist in a palliative care setting?
   - How do these responsibilities differ from those in other care settings?
2. Patient Care and Interaction
   - How do you approach managing respiratory symptoms for patients in palliative care?
   - Can you provide examples of how you tailor your interventions to meet the needs of palliative care patients?

3. Challenges and Difficulties
   - What are the primary challenges you face when providing care to patients in palliative care?
   - How do you cope with the emotional and psychological aspects of working with terminally ill patients?

4. Interdisciplinary Collaboration
   - How do you collaborate with other healthcare professionals in the palliative care team?
   - Are there any challenges or benefits to working within an interdisciplinary team?

5. Professional Satisfaction and Development
   - What aspects of your work in palliative care are most fulfilling?
   - Are there any areas where you feel additional training or support could enhance your role?

6. Recommendations
   - Based on your experience, what improvements could be made to better support respiratory therapists in palliative care settings?
   - How can the role of RTs in palliative care be better recognized and supported?

Conclusion
- Offer participants the chance to add any final thoughts or comments.
- Thank them for their time and participation.

Appendix B: Focus Group Discussion Guide

Introduction
- Explain the focus group’s purpose and ensure confidentiality and consent.
- "Thank you for joining this focus group. We are discussing the role of respiratory therapists in palliative care. Your insights will help us understand your collective experiences and perspectives. Everything discussed here will remain confidential."

Discussion Topics
1. Experiences in Palliative Care
   - How do you collectively view the role of respiratory therapists in palliative care?
   - What are some common experiences you’ve encountered in this setting?

2. Challenges and Barriers
   - What are the common challenges you face as a group when providing care in palliative settings?
   - How do these challenges impact your work and the care provided to patients?

3. Interdisciplinary Team Dynamics
   - How do you work with other members of the palliative care team?
   - What are the advantages and difficulties of collaborating with other healthcare professionals?

4. Impact on Patient and Family Care
   - How do you perceive your contributions to patient comfort and quality of life in palliative care?
   - Can you share examples of how your work has positively affected patients and their families?

5. Professional Development and Support
- What additional support or training would help you perform better in your role?
- How could the role of respiratory therapists in palliative care be improved or better recognized?

6. Future Directions
- What suggestions do you have for improving the role of respiratory therapists in palliative care?
- Are there any emerging practices or changes in the field that you think will impact your role in the future?

Conclusion
- Summarize key points discussed and ask for any final comments or reflections.
- Thank participants for their valuable contributions.