

Questionnaire Version 7.0, Version Date 31/08/2019

Topic: Attitude of emergency doctors in providing palliative and end-of-life (EOL) care in Hong Kong and education needs: a self-reported questionnaire survey

Part A: About you

Q1,3-9: Please indicate your answers by ticking the relevant box below.

1. Your gender

Male	
Female	

2. Your years of Accident and Emergency (A&E) experience (please put a tick in the correct box):

0-5 years		10-15 years		More than 20 years	
5-10 years		15-20 years			

3. Your A&E training status (please put a tick in the correct box)

Service doctor	
Basic trainee	
Higher trainee	
Specialist	

4. Your palliative care/ EOL care training (please put a tick in the correct box)

Specialist training	
Short courses or other formal training not leading to a specialist qualification e.g. Postgraduate Diploma in End-of-Life Care, The Chinese University of Hong Kong (PgD EOLC (CUHK))	
On job training only	
No training	

5. Did your emergency department currently provide palliative and EOL care service? (Please put a tick in the correct box)

Yes	
No	

6. How would you rate your knowledge of palliative and EOL care?

No knowledge	
General knowledge only	
Professional / extensive knowledge	

7. Have you ever looked after someone who was dying?

Yes	
No	

8. If you answered "yes" for question 7, how confident would you feel when looking after the person who was dying?

Confident all of the time	
Confident most of the time	
Undecided	
Somewhat confident	
Not at all confident	

9. Did you feel that you had enough support to undertake this role?

Yes	
No	
Don't know	

Part B: Attitude in providing EOL care

Please indicate how much you agree or disagree with each of the following statements, by ticking the box that best describes how you feel.

1 = strongly disagree, 2 = disagree, 3 = unsure/mixed, 4 = agree, 5 = strongly agree

No	Statements	1	2	3	4	5
1	Palliative and EOL care is an important competence for an emergency medicine physician.					
2	I have a clear idea of the role of palliative and EOL care in the emergency department.					
3	Emergency medicine physicians are trained to save lives and not to manage death.					
4	My workplace has protocols or services addressing palliative and EOL issues.					
5	I feel comfortable providing palliative and EOL care in the emergency department.					
6	Palliative and EOL care should not be the responsibility of the emergency physician.					
7	Palliative and EOL care should have a lower priority in the busy emergency department.					
8	There is lack of access to palliative and EOL care specialists/ teams in the emergency department.					
9	Having no access to communication with palliative care physician affects my ability to provide EOL care in the emergency department.					
10	I have difficulty discussing palliative and EOL issues with patients and/or their families.					
11	I cannot identify patients who may need palliative and EOL care in the emergency					

	department.					
12	My lack of training in palliative and EOL care affects my ability to provide this service.					
13	Fear of lawsuits leads me away from offering palliative and EOL care to potential candidate.					
14	I have sufficient time during my shift to provide palliative and EOL care in the emergency department.					
15	The emergency department is not the best place for EOL discussions					

Part C: Further Education Needs

Please tick the boxes to indicate whether you would like future education on any of the following topics:

Pain assessment and management	
Management of terminal delirium	
Management of terminal dyspnea	
Management of death rattle	
Management of feeding in EOL care	
Management of psycho-social aspect of EOL	
Management of spirituality and cultural aspects in EOL	
Bereavement management	
Last office and ritual arrangement	
Communication skills – breaking bad news, and discussion on prognosis and initiation of EOL care	
EOL care ethics: Limitation of life-support therapy, DNACPR decision, advance directives and share-decision making	

This is the end of the survey. Thank you for your time.

Other comments:
