In New Jersey, Nurse Practitioners (NPs) are crucial in creating and signing advanced directives (ADs). According to New Jersey law, NPs are fully authorized to independently complete AD documents without requiring a physician to sign or cosign the documents. This law is based on the New Jersey Advance Directive for Health Care Act, which allows NPs to act as primary providers and make critical health care decisions.

Reflecting on my practice, there was one client, a 78-year-old male with advanced-stage lung cancer, who could have greatly benefited from a referral to hospice or palliative care. His quality of life was significantly affected by his symptoms, and he had expressed his wish to avoid aggressive treatments. As an NP, I would approach this conversation by expressing empathy, explaining the benefits of hospice and palliative care, and reassuring him that the goal would be to enhance his comfort and quality of life rather than to hasten death.

I recommend a few strategies to improve palliative and hospice care access to vulnerable and underserved populations in our community. There is often a lack of understanding about the benefits of palliative and hospice care among underserved populations (Lafci et al., 2021) by educating these communities about the potential benefits, we can help overcome access barriers. This could be achieved through community outreach programs, patient education materials in various languages, and culturally sensitive communication.

Collaborating with community organizations, faith-based groups, and local leaders can help reach vulnerable populations (Lafci et al., 2021) these partnerships can facilitate trust and understanding and provide a platform for education and support. There is often a lack of understanding about the benefits of palliative and hospice care among underserved populations. Educating these communities about the potential benefits can help overcome access barriers (Lafci et al., 202). This could be achieved through community outreach programs, patient