

ATI: Video Case Study Palliative and Hospice Care

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How can the nurse ensure that a client receiving palliative/hospice care is kept comfortable? What are some ways that the nurse could provide for the psychosocial and spiritual comfort of the client?

A nurse can ensure the client receives adequate palliative/hospice care by first evaluating their own biases around death. The nurse can then assess the client's comfort level and needs based on the clients' desires and wishes. A client who can verbally express their pain level should also describe characteristics. The nurse should then look for nonverbal expressions of pain, such as grimacing, refusing adequate nutrition intake, and signs of guarding.

The nurse should have an open conversation about psychosocial and spiritual needs with the client. The nurse can ask questions about what gives the client's life meaning, what spiritual practices are essential to the client, and what fears the client has about their care during the dying process. During each visit, the nurse should assess the client's current stage in the grieving process. Determining this will help the nurse decide what psychosocial and spiritual care to provide during that visit.

How can the nurse provide support for the family/loved ones of the dying client?

Providing psychosocial and spiritual comfort care to a palliative/hospice client should include care for the client and their family. A nurse can ensure the client receives the best care at home to help the family/caregivers identify their own needs. Often palliative/hospice care is provided by close family members who may forget about their own needs while consumed with caring for their loved ones. Inform the family of resources such as respite care and encourage the

caregiver to utilize it regularly to take a break. The nurse should also provide information about community support groups and social work contacts for individual therapies.

The nurse should evaluate the caregiver's stage of grief at each visit to better plan the support the family will need during that visit. Support for that visit could include education on the client's current stage of the dying process and what to expect next. The nurse can also offer comfort support like praying or arranging support for a local church.

What feelings occurred when interacting with a person with a life-limiting illness?

The student recently had feelings of empathy and admiration while interacting with a patient diagnosed with pancreatic cancer. During a clinical rotation, the student's assigned patient had undergone many diagnostic tests and was waiting on the staging of the pancreatic tumor found. The student and the client had a long conversation about the client's feelings around her current health status during the student's interview and assessment. The client is a 86 year old widow and expressed acceptance of her diagnosis even though the client was not yet sure of the prognosis. The client's calmness and joy expressed while talking about her past and current life filled the student with admiration for the client. The student felt empathy thinking about how it must feel for the client to miss a spouse now and fear missing her children and grandchildren after death.

Were the feelings or emotions adequately handled?

The student adequately handled emotions during the above interaction. The student was able to control feelings and emotions but still exhibit genuine empathy during the conversation.

Was there adequate communication with the ill person?

The student used adequate communication with the client and felt that the conversation was successful. The student started by pulling a chair close to the hospital bed and sitting at the

client's level. The student portrayed openness with body language, active listening, and therapeutic communication techniques. The student made sure to clarify and validate the client's feelings throughout the conversation.

How did the person with the life-limiting illness feel during their interactions?

The client felt optimistic and expressed genuine excitement to share her story with the student. The client expressed being thankful for the life and health she had experienced thus far.

Could the interactions have been improved in any way? How?

The interaction could have improved by the student being prepared to share resource information with the client. The client had excellent family support, but the student could have provided social work and group therapy contact information for her area.