

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?

There are various ways a nurse can support a client to be more comfortable while receiving palliative/hospice care. The nurse will play roles such as coordinator, advocate, and educator. If ordered from the provider, the nurse can administer pain medications like morphine to help relax the patient. The nurse can also provide oxygen therapy which relieves dyspnea. As far as non-pharmacological methods, the nurse can provide music therapy to promote relaxation. These methods can overall help the client feel respected and valued.

The nurse can identify the client's spiritual needs and preferences regarding psychosocial and spiritual comfort. The nurse can allow privacy, arrange for religious leaders to visit, and respect all religious items. The nurse should provide comfort and care to the client and relieve any symptoms that accompany the client through hospice. Regardless of the nurse's role in the client's care, it is essential to keep the client comfortable, maintain dignity, and feel recognized.

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

The nurse can support the family and loved ones of a dying client by advocating for the client's end-of-life wishes, educating the family on the process, and answering any questions they may have. For example, the nurse will need to educate both the client and their family and do this by informing them of the client's status and clearing up any confusion they may have. If a family member is confused about why the client is not alert and oriented to time or place, the nurse can explain that confusion can occur during the end of life. Tending to the family and their needs can help the patient, and the family feel more at ease and reduce anxiety. When the nurse

focuses on meeting the family's needs, this will strengthen the overall relationship between the nurse and the client's family.

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

Many feelings and emotions will emerge when interacting with a person with a life-limiting illness. The student took care of a hospice client while working as a nursing assistant. The student struggled with sadness and frustration as she felt like there was nothing she could do to help the patient truly. The patient was upset because she could not get comfortable in her bed. The student tried repositioning the patient, providing more pillows, and raising the head of the bed, but none of those options thoroughly helped the patient get comfortable. The student tried many options to bring the patient comfort. However, it was easy to feel defeated when they did not provide much comfort to the patient. Many options not changing the client's illness or situation left the student feeling many emotions like defeatedness, frustration, and sadness throughout interacting with the patient with a life-limiting illness.

Were the feelings or emotions adequately handled?

The feelings and emotions were able to be handled adequately. The student relied heavily on her coworkers to help her get through this challenging time. The student did her best to communicate therapeutically with the patient. The student did her best to remain neutral and supportive without projecting her emotions onto her patient or the family. When the student felt herself getting emotional while caring for the patient, she took a quick break in the lounge to gather her thoughts and feelings. The student expressed her emotions and feelings after work to her coworkers—the after-work conversation allowed for the student to discuss her feelings at a more appropriate time. Overall, the student handled the feelings and emotions as adequately as possible.

Was there adequate communication with the ill person?

Communication with an ill person can directly impact the end-of-life journey. The overall communication with the ill person was adequate and therapeutic. The student made sure to remain patient, calm, and caring when speaking to the patient. The student encouraged the patient to express her feelings or concerns with the student as needed. The student explained that she was there to help with anything the patient could need and told the patient to ride her call bell as many times as needed. The patient requested water often throughout the night, and the student was able to tend to the patient as needed. The student appreciated that the patient communicated adequately with her by telling the student what she needed. The communication for both the student and the patient was straightforward and adequate.

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

The person with the life-limiting illness felt many different emotions throughout the interaction. The primary emotion the patient expressed was fear. The patient was confused and asked the student many times where her family was and when to return home. The patient was not happy to be in hospice care and felt scared. The patient also exhibited signs that she was sad and discouraged. The student did her best to make the patient feel comfortable and at peace in response to this. The student understood that the end-of-life process could involve a rollercoaster of emotions. As the patient exhibited many emotions, the student did her best to listen and support the patient actively.

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

Overall, the interactions could have improved slightly. The student could have done better about slowing down and sitting with the patient. The student could have used the technique of offering herself more time. Spending more time together would have helped the

student and the patient develop a more personal relationship. The student's presence could have provided the fearful patient with more support and comfort whenever her family was absent.

More time together would have improved the interaction overall.