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 make her client more comfortable by using nonpharmacological interventions. Repositioning clients can be extremely helpful in giving clients more comfort. Nurses can use soft massage to relax the client. The use of guided imagery has been shown to be helpful in pain relief. A study was done on 400,000 clients with Multiple Sclerosis and other progressive neurological diseases (Case et al., 2018). It was found in this study that 57% practice complementary therapies to aid in their day-to-day treatment (Case et al., 2018). This study has reported that guided imagery has helped improve the quality of life and mood functioning in these clients (Case et al., 2018).

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

The nurse is responsible for creating a supportive space for the client as well as the family. The goal of palliative care is to give a positive dying experience. This should be possible for the client as well as the family. When a family is dealing with end-of-life care for one of their loved ones, it can be extremely difficult. Nurses should be sure to communicate with the client and the family about all aspects of care. Open lines of communication between caregivers and client/family create a positive rapport and will foster a trusting relationship. It is also helpful to give the family space to grieve. When a family loses a loved one, grief can hit each family member in different ways. Nurses who can recognize times to speak and time to be quiet can give relief to families in their loss.

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

Client's who are in the last stages of their lives can go through a plethora of feelings. Some may feel saddened, anxious, or afraid. Palliative care is set up to make a client feel comfortable and in as little pain as possible. Care is no longer based on a cure. One could be the positive light at the end of a client's life. It is a prideful feeling knowing one could make a difference in a client's life by helping them get to their final destination in their death. It could also be very saddening. Caregivers, such as nurses, develop a close bond with their clients, and losing one can hurt. It is though, very important to remember why palliative and hospice care are so important. Nurses in this specialty are the chosen few who can give respect, ease, and comfort to those who are dying.

Were the feelings or emotions adequately handled?

The nurse adequately handled the feelings and emotions. One could feel some peace in the care that is given to clients in hospice or palliative care. When a nurse can relieve or ease pain, the ultimate mission is accomplished. Giving someone a dignified death should give the caregiver pride and possibly ease the feelings of sadness. One should remind themselves of this fact each time anxiety or sorrow is felt.

Was there adequate communication with the ill person?

Communication between the nurse and client was somewhat effective. The nurse addressed the questions and concerns of the client. The nurse, unfortunately, did not attend to the emotional needs of the client. Care should include the whole person, mind, body, and spirit. Using a holistic approach to nursing care will give the client an optimal experience.

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

The client felt disappointed and dissatisfied with the care provided. Emotionally, this client was not cared for. The nurse did not stop the medical care to attend to the client

underneath the diagnosis. When all needs are not met, the goal of palliative care is not accomplished. The nurse's job is to care for the patient as a whole, and this client was left feeling emotionally neglected. There was a lack of trust and rapport from client to nurse because of this deficit in care.

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

The interactions absolutely could have been improved. The nurse should have taken the time to look at the client more holistically. The client would have benefitted from a more communicative nurse, a nurse who was willing to slow down, and really see the person being in their care. A nurse should always look for ways to improve their skills and make the clients experience more enjoyable.