

Reflective Case Study Gerontology Assignment:

ATI: Nurse's Touch 2.0: The Communicator 2.0 Video Interaction: Client Comfort and End of Life Care

Makynzie Wagner

Lakeview College of Nursing

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## Reflective Case Study Gerontology Assignment:

### ATI: Nurse's Touch 2.0: The Communicator 2.0 Video Interaction: Client Comfort and End-of-Life Care

#### **What was learned from this scenario?**

The end-of-life stage for a patient can be difficult to understand and cope with for anyone involved, including the patient, family members, and caregivers. It is important to be able to communicate effectively while also educating during a stressful situation. It is also important to be an active listener and know how to utilize available resources to ensure the patient receives the care that is best for them.

#### **Identify the biggest takeaways.**

Everyone reacts differently to emotional situations, such as the end-of-life process. Being a nurse that is taking care of a patient during this stage of life can be challenging. The nurse is not only responsible for the physical and medical aspects of caring for the patient but also the emotional care of both the patient and the family members. Family members rely heavily on the nursing staff for comfort during a difficult time such as this. While the nurse should be open to conversation, respectful, patient, and unbiased while supporting the family, it is also imperative to remain an advocate for the patient.

#### **a) Explain the factors that influenced this decision.**

- a. This decision was influenced by the video case study, previous professional experiences, and personal family experiences. Each family and situation is different. There might be similar aspects, but not one is the same. Being personable with the patient and the family will make or break the outcome of the experience. The family should never leave feeling as if they weren't heard or their family member wasn't cared for properly. This has been felt in a past personal

experience and will forever be a reminder to always show empathy with each and every situation.

**What are some of the main problems or key issues expressed in the scenario?**

Throughout the case study, the two daughters can never agree on the best decisions that should be made regarding their mother's care. They both have different thoughts and feelings about how their mother should proceed with her care. One daughter feels that the mother isn't doing enough for her care, while the other daughter is willing to let the mother make her own decisions and do what she feels is best. The mother eventually gets frustrated and does not want to continue the conversation.

**What were some of the challenging decisions the nurse needed to make?**

No matter the situation, the nurse's main priority is the patient and their overall well-being. In this case study, the nurse was prioritizing the patient's pain and comfort. In order for the patient to manage her pain and remain comfortable, she needed to receive adequate amounts of rest throughout the day. Unfortunately, the nurse was spending more time having to settle disagreements with the daughters to keep the patient comfortable rather than spend her time focusing on the patient. When the grandchildren showed up, they began arguing about items in the room. This ultimately caused an unnecessary commotion in the room, which also took away from the patient resting. The nurse had to get involved multiple times, which was very difficult, but necessary to prioritize the patient and her health.

**a) Describe the rationale behind these decisions.**

- i.** Each intervention by the nurse was important due to the toll it began to take on the patient. The louder the environment began between the daughters arguing and the grandchildren arguing, the more agitated and

uncomfortable the patient began. She could no longer focus on herself, which led to further suffering.

**What factors influenced the nursing decisions and responses during the scenario?**

**a) Explain the response.**

- i. The nurse was a mediator for the family throughout the entire case study. She remained in tune with the environment, which is crucial in any situation as a nurse. She was able to communicate effectively and therapeutically with the daughters during times of disagreement, ultimately making the daughters more aware of each other's viewpoints. However, she was an advocate for the patient the entire time which is of key importance.

**b) How will a nurse respond if this scenario presents again in the future?**

- i. A nurse can respond to these situations truthfully and honestly. It is also important to remember not to use medical terminology with family to avoid any confusion regarding the care being given. As always, therapeutic communication is a universal technique that can be used no matter the situation.

**Have similar situations been experienced in current clinical rotations?**

I have not experienced a situation with end-of-life care during clinical, but I have experienced it multiple times when previously working in a skilled nursing facility.

**a) How did nursing or others respond to the situation? Please explain.**

- i. With each experience I have faced both professionally and personally, it has taught me the "do's and don'ts" for handling stressful end-of-life situations. Having a support team of co-workers and management plays

more of a role than some might think. Being able to lean on others during such a tough time is important for the nurse and their personal well-being. No matter how many times a nurse handles a dying patient, it will never get easier.

**b) Describe successful communication strategies used or experienced in the clinical setting.**

- i. There are many ways that successful communication has a positive impact on an end-of-life situation with a family. Being able to acknowledge the situation with both the patient and family is crucial. Active listening and therapeutic communication techniques help the family cope with the sadness. The first death I experienced, I vividly remember everyone in the room being silent, yet you could feel so much. The family leaned on the staff, the staff leaned on each other, and it was such an overwhelming experience. When everyone felt ready to talk about death, we listened to one another and reflected empathetically.

**Discuss the advantages and disadvantages of having families discuss treatment options, including end-of-life decisions before a loved one becomes ill or early in a terminal illness.**

Some advantages of having family members involved with treatment options are advanced care planning, ensuring the legal medication decisions are made, and having goal-centered treatment decisions made in the event that the patient can not make them themselves. This is also reassuring to the patient that they have family involvement in their care planning, making the process of long-term care easier for them.

A major disadvantage of having family involvement with treatment options is denial. It is not uncommon for family members to be in denial that they are losing a family member. This can ultimately hinder the patient from receiving the best care. When speaking to family

members about the end-of-life process, it can be difficult if there is a lack of knowledge, the abundance of questions one might have in regard to their care, and the overall uncertainty of the end-of-life process and “what happens next.”