

Reflective Case Study Gerontology Assignment:

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

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What was learned from this scenario?

The student learned from this scenario to be attentive to our patients and beware of any distractions outside family members may bring with them when visiting. The students also knew they must listen to the family members and involve the patient. Finally, the student learned that they must ensure that their patient receives good care even when the family is visiting; this includes providing the patient is comfortable and getting rest when needed.

Identify the biggest takeaways.

The most significant takeaways from this scenario are to be mindful and listen to the families but respect the patient's wishes. Ultimately though, if the patient is alert and oriented or has the proper paperwork for their end-of-life wishes, then the nurse needs to respect those wishes and stress the importance of the need to respect these wishes to the family.

a) Explain the factors that influenced this decision.

Even if the families are having difficulties understanding why their loved ones are receiving the care and treatment, due to the patient's wishes, nurses can always go up to their higher and ask them for assistance clarifying the treatment plan. Nurses need to make sure they are listening to both family members and patients to ensure they are gaining their trust. Also, the nurses must ensure that family members know they respect their patients' wishes and decisions.

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

A couple of critical issues stood out to the student in this case. One of the issues was that when the patient's family was visiting, one of the daughters had brought her children, and they were making noise; this made it difficult for the patient to rest and feel comfortable while visiting with her family. Another issue was when the patient was in much pain. One of the daughters was demanding pain medication, while the other daughter was talking about how their mom did not want pain medicine.

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

a) Describe the rationale behind these decisions.

The rationale behind these decisions is that the nurse is trying to ensure that the patient receives the best care at the end of the patient's life, while still respecting their wishes. In addition, the family put the nurse in a challenging situation, such as when the daughters were visiting their mom; one daughter had brought her children, who continued to play loudly in the room, making it difficult for the patient to get any rest. The patient's family bringing in an excessive number of people makes it difficult for the nurse to be in this type of situation. The nurse knows the importance of family being around and potentially saying their goodbyes to a patient/family member, but they also want their patients to feel comfortable and get rest in a more private and quiet setting while trying to manage their pain.

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

Factors that influenced the nursing decision were family members, specifically the daughters, who disagreed about their mother's plan of care, and whether their mother should receive more pain medicine or not. Also, the nurse's decisions and responses were influenced by one of the daughters visiting and bringing their kids with them, who tended to be loud and fighting the whole time, interfering with the patient's care.

a) Explain the response.

The nurse could make a difficult decision with a patient whose family visited while the patient was awake. For example, one of the daughters brought her children into the room while the patient was in much pain and very uncomfortable. The nurse checked in on the patient, noticed the noise, realized how uncomfortable the patient was, and told the family how the patient needed rest breaks.

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

If these scenarios are presented in the future, the nurse will continue to listen to the family members' concerns, but ultimately the nurse will ask the patient what they want to do. For example, in this scenario, the nurse would ask the patient how bad their pain is and if they would like pain medicine to manage it. In addition, the nurse will educate the family on the importance of the patient resting and may ask that the children be loud, go outside, move to an area where they can communicate and not worry about noise, or ask a case manager to assist with watching the children, while the family is with their loved one.

Have similar situations been experienced in current clinical rotations?

In clinical, there has been a similar situation when the family members are being pushy and asking the nurse to do more or why aren't they doing enough for the patient. There have also been cases when family members are trying to make all the decisions, not listening to what the patient wants, and demanding that the nurse listens to them, not the patient.

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

The medical team, including the nurse, used therapeutic communication with the families and good listening skills to hear the family members' concerns about their loved ones' decisions. They allow the family members to verbalize and express their concerns. They will enable the

nurse to re-educate and explain to the families why their loved ones are receiving the treatment they are receiving. If the patients are alert and able to make decisions, the nurse will always ask what the patient wants instead of just going by what the family members say.

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

Successful strategies used by nurses observed in the clinical setting include nurses using attentive listening to the family members; this action can comfort the family members as they can see the nurses are listening and taking into account their concerns. As a result, the nurse could reinstate and assure the family members that they are listening to their problems but that ultimately, they must listen to their patients and what they want or do not want regarding treatment. The nurse used effective therapeutic communication with the family members, which allowed the families could better understand why their loved ones decided to either have treatment or decline treatment options.

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.

It is appropriate for families to be involved in end-of-life care, but too many interests and suggestions might become a problem – especially with a plan of care and supervision of end-of-life. Some advantage of having families involved with treatment options is many of the time they know the family's medical history and the patient has potentially talked to them about what they want for end-of-life treatment options. In addition, patients can feel more safe, secure, and loved knowing their loved ones are helping with care treatments. The disadvantage of having family members discuss treatment options is that they may not always want to adhere to their wishes at the end of life, due to the potential of wanting to have the family member around longer, or not wanting to have to deal with a sick and dying family member. Another disadvantage to having

family members discuss treatment options is that they may not advise on what is best for their family members.