

## **Palliative and Hospice Care Reflection**

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## **Palliative and Hospice Care Reflection**

**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?**

The nurse can ensure the client is comfortable by ensuring that the client is not in pain and by preventing, assessing, and treating any physical, psychological, and spiritual needs. The nurse can also ensure that the patient's end-of-life care wishes are covered. The nurse should ensure that the client receives pharmacological and nonpharmacological comfort measures. Things like oxygen and repositioning the client help alleviate dyspnea. The nurse can provide spiritual comfort to the client by bringing in a pastor or priest if that is what the patient desires.

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

The nurse can support the family by allowing them to participate in the patient's care. In doing this, we give the family a sense of closure. The nurse could also educate the family on what to expect as the client declines and provide support as the family goes through the different stages of grief.

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

When interacting with a person with a life-limiting illness, shock, disbelief, sadness, hopelessness, and helplessness are some feelings that occur.

**Were the feelings or emotions adequately handled?**

Yes, the doctor and nurse seemed to show empathy and explained the situation to the client's family. Then they left the room so the patient and their family could spend time alone.

**Was there adequate communication with the ill person?**

In the video, there was not adequate communication with the patient. It seemed like the doctor and nurse only communicated with the patient's family. To provide adequate care, the healthcare team needs to communicate all information to the client so that they feel involved in their care, and it also helps to build the client/nurse relationship.

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

During the interaction, the doctor and nurse only communicated with the patient's family and never addressed him. This nursing student believes that the patient may have felt left out of his care plan and ignored and irritated because no one cared to talk to him about what was happening.

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

The staff could have involved the patient more in the conversation; asking them if they had any questions and explaining what was happening is essential in patient care. If healthcare members want to talk with the family, they should step outside of the room and talk instead of standing up over the patient's bed. Make sure the patient always feels safe and comfortable and involve them in their care plan.