

Client Comfort and End of Life Care Reflection

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What was learned from this scenario?

Nurses need to ask more open-ended questions to resolve disagreements better or to help with any sensitive topics the patient or family may have. Whatever the particular matter, nurses must consider the family's feelings and the patient's. However, the nurse's first concern is the patient's wants and needs because the nurse is supposed to advocate for them. As an advocate, the nurse will need to respect the patient's autonomy and hopefully will be able to help the family understand the patient's wishes if those wishes do not match theirs. Also, when children are in the room, the nurse needs to gauge whether or not the children may be preventing the patient from relaxing. Rest is essential in some of the patient's health, so nurses must be aware of factors like children hindering the patient's rest and ultimately affecting their health.

Identify the biggest takeaways.

a) Explain the factors that influenced this decision.

The biggest takeaway from this case study would be standing firm and advocating for the patient. Several families have those individuals that believe they know what is best for their mother or father; however, emotions can sometimes cloud their judgment. Nurses need to remain objective about the situation. The patient might request to stop further treatment, which is their right, and the family might disagree with it, but it is not their choice. The most significant factor from the case study that influenced this decision was when the sisters disagreed on whether their mother should receive any pain medication. The sisters spoke as if their mother was not cognizant enough to decide for herself. The patient was alert and oriented for all the other scenarios, so it is uncertain why they would not include her from the get-go on the issue. Now, if the patient was unconscious or did not have the mental capacity to make her own decisions and

one of the daughters had the power of attorney or something like that for the patient, that would be more understandable, but that was not the case.

Another takeaway is how crucial proper communication is between the nurse and the patient, and the patient's family. If the nurse's communication is inadequate, problems can arise between the nurse and the patient and the family. The first time going through the case study, I got some communication answers wrong. However, after I reviewed why they were wrong and the correct answers, I understood why it is better always to use open-ended questions and never ask a leading question.

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

The main issues in this scenario include autonomy for the patient, advocating for the patient, and communication issues. In this case study, the nurse communicated with the patient, all of the family members, and the patient's doctors. The nurse acted as a mediator to resolve the issue when the daughters and the patient's sister disagreed on religious services. That is another excellent example of advocating for the patient. In that respect, the sister and daughters could have just asked the patient if she wanted to see the Chaplain. The patient had the autonomy to make that decision herself, and the nurse could have arranged for the Chaplain to meet with her.

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

a) Describe the rationale behind these decisions.

One challenging decision was when the daughters argued about whether their mother should receive pain medication. While the nurse probably understands why one daughter would like the patient to have the medication, the nurse knows it is not the daughter's decision. The nurse needs to follow what the patient wants. The daughters understood that their mom should make that decision for herself. However, the daughter who wanted her mom to have the medication more than likely was not very happy with the nurse not agreeing with her. The nurse

made the difficult decision not to do what the daughter requested because the nurse is the patient's advocate and respects the patient's autonomy.

Another challenging decision was when the children were noisy in the patient's room. The nurse could tell there was something wrong with the patient. She needed rest and could not get any since the children were noisy. Nurses need to make the difficult decision of standing up for their patients, even if it is standing up to the patient's family. The family understood why the patient could not rest and accepted it, but the nurse had to decide to say something so they would get the hint. The nurse's decision to say something about the patient getting her rest resulted in the children leaving so the patient could finally rest. The patient needs rest throughout the day so it does not affect her health.

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

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

In the first scenario, the nurse made that decision based on one of the four nursing ethics principles. That one principle is autonomy, which means the patient has the right to choose for themselves. If a nurse experiences any scenario involving a patient's autonomy, the nurse will involve the patient since it is ultimately the patient's decision. Unless legal documentation provides someone else the power to make medical decisions for a patient, the patient must make their own medical decisions.

In the second scenario, the nurse made that decision based on her responsibility to advocate for the patient and one of the four principles of nursing ethics. That one principle is beneficence, which means doing only good. The nurse sought the patient's best interest because her health could be affected if she did not rest enough. The nurse spoke to the patient's family and helped them understand that the noise from the children kept the patient from resting

displayed beneficence. If any patient experiences a lack of rest due to any disturbance, whether from family or roommates or even technology such as television, a nurse should respond in kind and try to resolve the issue for their patient so they can get the rest they require.

Have similar situations been experienced in current clinical rotations?

- a) How did nursing or others respond to the situation? Please explain.**
- b) Describe successful communication strategies used or experienced in the clinical setting.**

I have not experienced similar situations since I have only been through one clinical so far, and as a first-semester student, there were certain things I could and could not do for the patient. There was a scenario during one of the clinical days that the nurse for a patient demonstrated beneficence with her patient. A female patient was experiencing some form of incontinence and was utilizing bed pads for several days to soak up urine or excrement. The nurse told her to notify someone when she needed to use the bathroom because she wanted her to start using her muscles more so they would not experience atrophy. The patient preferred using the bed pad instead of a commode or the standard toilet. The nurse had to explain the benefits of getting up and using the toilet instead of the bed pads. The nurse demonstrated beneficence by explaining and persuading her to use the toilet or commode. Using the bed pads would have been easy, but using the toilet would benefit the patient's health in the long run. No one else responded to the situation because the patient's nurse and I were the only ones in the room at the time of the conversation. The nurse utilized several forms of communication while conversing with the patient. She used active listening skills, and verbal and non-verbal communication, including open-ended questions and excellent eye contact, avoided any why questions, and used education to communicate the benefits of using a toilet instead of the bed pads. The nurse spoke calmly, used simple and easily understood sentences, and avoided using words the patient might easily misconstrue (Eliopoulos, 2021).

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.

Discussing end-of-life treatment options with individuals and their families before they become ill can reduce some burdens on family members. Having advanced directive forms filled out will allow the patient's wishes to be heard even if they are unconscious or lost the mental capacity to make the decision. These documents allow the patient autonomy when they cannot decide near the end of life. The nurse will advocate for the patient and ensure the achievement of those advanced directives to the best of his or her ability. Discussing this topic beforehand clears up much confusion with the medical team since they do not have to worry about the family's choosing. Disadvantages of discussing this topic beforehand could include the family not agreeing with the individual making such plans and the legal documents being several years old, which could cause the family to attest that the individual has changed their mind since then. Even if the family members disagree with the individual's requests, the medical team still has to respect the patient's wishes and follow through with the directives. This issue could make the family very irate with the medical team. Even if the advanced directives are many years old, the medical team must respect the most current one the individual has filed.

Reference

Eliopoulos, C. (2021). *Gerontological nursing* (10th ed.). Wolters Kluwer.