

Client Comfort and End of Life Care Reflection

Julia Bushnell

Lakeview College of Nursing

4/17/2024

## Client Comfort and End of Life Care Reflection

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

I learned in this scenario that tension between family members takes the attention away from the patient. The nurse attempted to be there for the family as well as the client and often redirected them to the client who is the focus. Family members will deal with grief in their own ways but the common feeling is that they love and care for the client.

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

The biggest takeaways for me is that family will disagree with each other and look to the nurse for guidance. The nurse is supporting both the client and their family with the focus still on the client. Another big takeaway for me is that patient's may feel upset with themselves about their decision regarding their end-of-life care when they see how their family handles this news.

- a) During this video interaction I often saw the patient lying in bed while the daughters argued about her care without including her in the conversation. The nurse also had several situations where they looked to her for a response which influenced my decisions on the biggest takeaways.

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

I noticed that the daughters had several different opinions regarding the care for their mother. In my opinion, the daughters need to work this out between themselves, and it is not entirely appropriate to do it at the bedside. The daughters need to find a way to come to terms with their mother's decision regarding her care even if it is easier said than done.

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

The nurse needed to find a respectful way to tell the daughter the patient needs to get rest throughout the day and having her kids in there may have been overstimulating. The nurse also was asked to reach out to the chaplain by the aunt, but one daughter did not agree with this. The

nurse needed to encourage the family to work this out between themselves and ask the client what they would prefer.

- a) I know that if I were in some of these situations as the nurse I would struggle to come up with the right response. I feel that for the most part the family needs to discuss amongst themselves, but the nurse should intervene at times to make sure the client is priority. I would resort to asking the client if they wanted the pain medication or a chaplain rather than listening to what the family was saying.

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

- a) The factors included the patient's wishes while supporting the family during this hard time. The healthcare team knew this decision has not been easy for the family so the doctor and nurse wanted to speak with the family to discuss their concerns.
- b) **How will a nurse respond if this scenario presents again in the future?** The nurse should speak with the family to understand their concerns. The nurse should encourage the family to discuss amongst each other while listening to the conversation as the patient advocate. The nurse should speak with the patient to determine their wishes and make sure no decisions are made based off solely what the family says.

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

- a) **How did nursing or others respond to the situation? Please explain.** I have seen similar situations in clinical rotations and during my work experience. I have seen nurses be outstanding with the family while keeping their focus on the

patient. I have seen some nurses get frustrated with the family because they felt like they were making it about themselves.

- b) Describe successful communication strategies used or experienced in the clinical setting.** The successful communication strategies were restating, for example, “So what you’re saying is you are worried about your mother taking the pain medication.” This works to ensure the nurse and client understand the situation. Another communication strategy is offering self, observation, and active listening.

**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.**

The advantages of having families active in the treatment plan of the patient is for the emotional support of the patient. The patient has family members that are present and care about what treatment they receive. Another advantage is the family may find peace in being active in the treatment plan so they are aware of what is going on and have time to cope with and voice opinions on decisions. A disadvantage is that some family members may pull away from what is best for the client because they are thinking about themselves. I personally understand that we resort to thinking about our feelings when it comes to end-of-life treatment because we feel like we know our family member the best. Another disadvantage is that family members will not always agree with the treatment and may be arguing in front of the client, which can add more stress to the client.