

Palliative and Hospice Care Reflection

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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?

There are many ways that nurses can ensure that a client is being kept comfortable. One of these ways would be to ask the patient what he/she may need. Most people think that older patients are not able to articulate what they need, but that is not the case. Older patients are able to tell what they need and it is the job of the nurse to relay that information and make the right decisions to make sure that the patient is ok. In terms of providing psychosocial and spiritual comfort, the nurse could reach out to pastoral care, or find out the client's religious/spiritual affiliations and set up meetings with important members within that community. Also, coordinating family and friend visits could also help with client comfort.

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

There are a few ways that the nurse can provide support for the family of a dying client. One of these ways would be to set up visits with the family so that they can spend as much time as they want with the client. Also, social work deals with the helping the entire family of the client, and this could be important as members who are struggling with coping could be identified and given the right resources for extra help to cope if need be.

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

One feeling that occurred would be a feeling of sadness, which is probably the most common feeling. There is also a small feeling of pity, but not in a negative way. Compassion towards that person is also another feeling that is felt when interacting with a person with a life-limiting illness.

Were the feelings or emotions adequately handled?

The emotions were adequately handled, yes. There could have been better communication and listening, but all in all, the emotions were checked and there were no issues.

Was there adequate communication with the ill person?

There could have been better communication. The ill person was well taken care of, but at the same time, there is always room for improvement when it comes to patient care. Sometimes, depending on if things are busy or if there is something more important that needs to be done, communication can be cut short, and it is important to follow up to ensure that all needs are met.

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

The person with the illness seemed like there were doing okay. There was no issues during the interactions and they were very mild-mannered in temperament.

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

Yes, the interactions could have been improved by more active listening and back-and-forth communication.