Apr 20th, 1:00 PM - 3:00 PM

Death and Dying: Deciding Between Hospice and Palliative Care

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Purpose
Provide education on death and dying to family members as they navigate through this time specifically differentiating between hospice and palliative care.

Background
After spending several weeks on an oncology unit it was discovered that many patients and family members are ill informed about their options at end of life. They are often confused about the differences between hospice and palliative care. It is a difficult time for families and it is essential to provide all the necessary information to decide upon a plan of care. This issue lead to the formation of an educational brochure aiding family members in deciding between hospice and palliative care. The brochure provides details about these two end of life options. The aim of palliative care is improve the quality of life for a patient who is suffering for a serious illness. Palliative care can be used along side curative measures. Hospice care lacks curative intent and concentrates on providing comfort to the patient (Aina & Kelsey, 2017). In addition to defining hospice and palliative care the brochure will explain where one can concentrate on providing comfort to the patient. Hospice and palliative care can be provided in a hospital setting, certain extended care facilities, and in the patient’s home (Kassam, Skiadaresis, Alexander, & Wolfe, 2014).

Methods and Results
The completed brochure providing education on hospice and palliative care as well as guidance for emotional support was distributed through the oncology unit and utilized by patients and families that would benefit from this discussion. The patient and family’s baseline knowledge on these options was assessed first. All of the patients had little to no knowledge on the differences between hospice and palliative care. If they did receive any education by the team of doctors they were left with many unanswered questions. The brochure is a gate fold pamphlet with six sections filled with information and noted references. It is colorful, typed in a legible font, and includes pictures. The patient-friendly pamphlet, free of medical jargon is easy to understand for all cultures and developmental levels. After distribution, the patients provided positive feedback and stated the brochures gave them crucial information used to decide between hospice and palliative care for their loved one. The results of implementation were not only positive from the patients and families but from the staff as well who can utilize this tool to teach patients and answer questions.

Discussion
Hospice and palliative care are the two frequently chosen care options at the end of life. Patients and family members often lack the necessary information to decide which option works best for them. This leads to the need of more education which the created brochure provided. This brochure held significance among the oncology unit because it was a tool each and every patient at the end of life could benefit from. The patients and staff on the unit revealed the the brochure aided them in better understanding the two options which eased the stress of decision making at such difficult time. Along with the education the brochure also provided resources for emotional support for the family which is crucial during this time in order to make the best decision for the loved one.

Conclusion
This project identified a need in the community of nursing and established a way to aid both the nursing community and patient and families. The knowledge of end of life care and the emotional support is lacking in patients and families. The brochure created assists the nurses by providing an easy way to educate their patients and their families. When the patients and the families receive this brochure and the knowledge that comes along with it they are able to make not only the most informed decision but this best decision for their future care.

Future Directions
In order to continue to have a positive impact on the patients’ and families’ end of life care experience nurses must continue to utilize the education brochure. It is imperative nurses take advantage of this aid. The brochure will change the experience patients and families have during end of life care for the better. It will reduce stress and anxiety as well as provide support to the families. Hopefully this teaching tool can be introduced to other hospitals to benefit patients and families alike during this difficult time.

Acknowledgements