

## Vignette #1: 0.00–6.05 Acceptance (6 min.)



### Objective

By the end of this vignette, viewers will be able to reflect on how end-of-life care decisions can affect patients and their family members.

### Summary

Diane Ryan, RN, describes Calvary Hospital and her observations as an RN.

### Patient Highlighted

Carole Bailey; chemotherapy no longer effective.

### Discussion Point 1

Mrs. Bailey and her daughter appear to have accepted the fact that medical interventions such as chemotherapy will not cure her illness, prolong, or save her life at this point. They have opted to forego further chemotherapy and instead to pursue comfort measures.

### Discussion Question 1

Reflect on the possible viewpoints of the varied players in this scene (Mrs. Bailey, her daughter, Diane the RN), and how they may be affected by this decision.

### Further Discussion/Points as Needed to Prompt Audience Interaction

How does Mrs. Bailey appear to you? Is she calm? Comfortable? While she appears to be medicated and perhaps sedated, she still has enough pain that she doesn't want to be moved much. She has told her daughter that she doesn't want to leave her grandchildren, and her daughter has ensured that she can see their picture from her bed. Although she is quiet, does she appear sad? What might she be thinking? Does it appear to you that she has reached an acceptance stage? Why or why not?

Mrs. Bailey's daughter speaks freely about the decision to stop the therapy and how hard her mother has fought her cancer battle. She is holding back tears and her face is flushed while she jokes and chats and refers to the photograph of her children. What might she be thinking? Does it appear that she has reached an acceptance stage?

Diane talks about her own future death, and how she wants it to happen. How do you think that her experiences to this point may have contributed to her wishes?

### Discussion Question 2

Sometimes people use the terms "hospice" and "palliative care" interchangeably, yet while they have similar attributes, they are different in ways. Discuss the differences and similarities between hospice and palliative care and how, according to Diane the RN, Calvary Hospital provides care to people in these situations.

### Further Discussion/Points as Needed to Prompt Audience Interaction

**Hospice** definition (According to the *End-of-life Nursing Education Consortium (ELNEC) Core Curriculum Guide* [revised 2016]):

"Hospice is a team approach to provide care to people with life-threatening illness or injury and supports dignity of life, irrespective of how much time the person has (NHPCO, 2015). In addition, hospice: supports the patient through the dying process and the surviving family through the dying and bereavement process. Provides comprehensive medical and supportive services across a variety of settings and is based on the idea that dying is part of the normal life cycle. Provides care in the home, residential facilities, hospitals and nursing facilities, and other settings (e.g. prisons). Hospice cares for the terminally ill (prognosis of 6 months or less)."

**Palliative care** definition (According to the *End-of-life Nursing Education Consortium (ELNEC) Core Curriculum Guide* [revised 2016]):

"The definition of palliative care in the United States described by both the US Department of Health and Human Services (HHS) Centers for Medicare & Medicaid Services (CMS, 2008), the National Consensus Project (NCP, 2013), and the National Quality Forum (NQF, 2006) states:

"Palliative care means patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate patient autonomy, access to information, and choice."

### Discussion Question 3

Calvary Hospital is described by Diane the RN as a place where people go at the end-of-life and they know they will "never ever leave." She describes the hospital as a place where people who are dying can have dignity and can die in a peaceful, beautiful way. Discuss how a hospital such as Calvary varies from an acute care setting in terms of care provided, goals of care, and possible patient expectations when being admitted to Calvary or any similar hospital.

### Suggested Applicability to Nursing Courses and/or to Care Settings

**Courses:** Palliative/Hospice Care; Mental Health Nursing; Medical/Surgical Nursing; any course focused on communication, bereavement, ethical issues, quality of life, spirituality, family systems and/or culture. **Care Settings:** Orientation and/or in-service programs for health care providers in primary, acute, long term, hospice/palliative care, and/or home care settings.

### Suggested Congruence with ELNEC Modules

Palliative Nursing Care; Pain Management; Symptom Management; Ethical Issues in Palliative Care Nursing; Cultural/Spiritual Considerations in End-of-Life Care; Communication; Loss, Grief, Bereavement.

## References

ELNEC-Core Curriculum © COH & AACN, 2007. Revised January 2016.

National Hospice and Palliative Care Organization (NHPCO). (2015). NHPCO facts and figures: hospice care in America. Alexandria, VA: Author. Last accessed December 11, 2015 from: [http://www.nhpc.org/sites/default/files/public/Statistics\\_Research/2015\\_Facts\\_Figures.pdf](http://www.nhpc.org/sites/default/files/public/Statistics_Research/2015_Facts_Figures.pdf)

Centers for Medicare & Medicaid Services (CMS). (2008). Medicare and Medicaid programs: hospice conditions of participation; final rule. Federal Register. Vol 73. Washington, DC: Author. Last accessed December 11, 2015 from: <http://www.gpo.gov/fdsys/pkg/FR-2008-06-05/pdf/08-1305.pdf>

National Consensus Project (NCP) for Quality Palliative Care (2013). Clinical practice guidelines for quality palliative care, 3rd edition. Last accessed December 11, 2015 from: [http://www.nationalconsensusproject.org/Guidelines\\_Download2.aspx](http://www.nationalconsensusproject.org/Guidelines_Download2.aspx)

National Quality Forum (NQF). (2006). A national framework and preferred practices for palliative and hospice care quality. Washington DC: Author. Last accessed December 11, 2015 from: [http://www.qualityforum.org/publications/2006/12/A\\_National\\_Framework\\_and\\_PREFERRED\\_Practices\\_for\\_Palliative\\_and\\_Hospice\\_Care\\_Quality.aspx](http://www.qualityforum.org/publications/2006/12/A_National_Framework_and_PREFERRED_Practices_for_Palliative_and_Hospice_Care_Quality.aspx)