**RNSG 2573**

 **Health Care Concepts 3**

**Concept –** END OF LIFE

**Concept Definition**

Processes and issues related to death and dying across the life span.

**Exemplars**

*Senescence (Aging) Persistent vegetative State (PVS)*

*Amyotrophic Lateral Sclerosis (ALS) (chronic disease ending in death)*

*Pancreatic Cancer (Hospice and Palliative Care)*

*Tay Sachs (pediatric)*

**Objectives**

1. Describe what the concept of end of Life means (including definition, antecedents, and attributes).

2. Discuss End of Life exemplars including *Senescence (Aging), Persistent vegetative State (PVS), Amyotrophic Lateral Sclerosis (ALS) (chronic Disease ending in Death), Pancreatic Cancer (Hospice (Palliative Care), and Tay Sachs (pediatric)*.

3. Compare and contrast the philosophy of palliative care and hospice care.

4. Describe the physiologic processes and clinical manifestations of impending death.

5. Formulate relevant prioritized nursing diagnoses that address physical, psychosocial, spiritual and learning needs for the patient referred to palliative care or hospice.

6. Explain scientifically based standardized palliative care and end of life tools to assess patient and family.

7. Explain evidenced based strategies and interventions to plan and intervene in the management of symptoms experienced at the end of life, both traditional and complementary therapies

**Concept Analysis Diagram**

Note: Diagram is on separate page.

Explanation of End of Life Diagram:

End of Life care is processes and issues related to death and dying across the life span. In order for End of Life care to occur the following antecedents must be present: terminal illness/advanced disease, hospice criteria met, and a timed defined aspect of care. The attributes, which measure whether End of Life care exists include: holistic care addressing the needs of the patient and family; focusing on the quality of life versus quantity of life; and care as opposed to cure.

Sub-concepts are components of End of Life care and include: life review, spirituality, hospice care, developmental landmarks and task work, palliative care/symptom management, and advocacy. Interrelated concepts can affect change in End of Life care or vice versa. These concepts include: diversity, grief, comfort, coping, communication, teamwork and collaboration, and patient centered-care. Positive consequences of End of Life care may include feeling respected, alleviation of symptoms of distress, quality of life, and dignified death. Negative consequences of End of Life care may include physical pain, unrelieved symptoms, spiritual distress, and broken/unresolved relationships/guilt.

When nursing care is required the focus is placed on improving the antecedents in order to optimize the attributes and ultimately produce positive consequences.

**Assignment**

Prior to class:

1. Review the following content from previous courses
* Comfort, Communication, Coping, Diversity, Evidenced Base Practice, Patient-Centered Care, Teamwork and Collaboration
1. Review the following Nursing Diagnoses and associated interventions
* Anticipatory grieving
* Death Anxiety
* Acute or Chronic Pain
* Rear
* Risk for Compromised Human Dignity
* Risk for Caregiver Role Strain
1. Readings/Viewings

References:

* Giddens, J.F. (2013). *Concepts for nursing practice*. St. Louis: Elsevier.
	+ Chapter 49: Palliation
* Lewis, S., Dirksen, S., Heitkemper, M. & Bucher, L. (2014). Medical-surgical

nursing. St. Louis: Elsevier.

* Chapter 5
* Chapter 10

Internet

* Case Study Terri Schiavo Jeopardy format

<https://jeopardylabs.com/play/case-study-terri-schiavo>

* National Hospice and Palliative Care Organization

<http://www.nhpco.org/resources/end-of-life-care--resources>

* End of Life Resources Death with Dignity National Center

<http://www.deathwithdignity.org>

* National Hospice Palliative Care Organization Caring Connections

<http://www.caringinfo.org>

* Hospice and Palliative Nurses Association

<http://www.hpna.org>

**Content Outline**

Concept: End of Life

1. Review of concept analysis
2. Barriers to end of life care,
	1. Moral distress in nurses
	2. Compassion fatigue
	3. Symptom management
3. Tenets of palliative care and hospice care
	1. Pediatric palliative care/hospice,
4. Cultural and spirituality issues
5. Legal issues/advanced directives
	1. Dying bill of rights.
6. Stages of grief related to dying
7. Quality of life issues
8. Progressive changes in the terminal phase

CONCEPT ANALYSIS DIAGRAM – END OF LIFE

**Nursing Care**

* Directed toward what contributes to a normal concept and is thereby related to all factors involved in or with the concept. Not always needed to have a normal outcome.

 Attributes

* Defining characteristics of the concept
* What must occur for the concept to exist

Antecedents

* What precedes the concept for it to exist
* Events or incidents that must happen before the concept

Consequences

* Untoward events or outcomes that occur due to malfunction within the concept
* Positive events or outcomes that occur due to proper functioning within the concept

Interrelated Concept

* Concepts which can affect change in the other
* Concepts which work together to ensure a normal process
* Concepts which if depleted or impaired can cause a negative consequence in the other

Sub- Concept

* Critical components of major concept

**Nursing Care**

Comfort

Grief

**Attributes**

Holistic Care Addressing Needs of Patient and Family

Quality of Life vs Quantity

Care vs Cure

Coping

Diversity

Patient Centered Care

Teamwork & Collaboration

Communication

**Interrelated Concepts**

Palliative Care/Symptom Management

Developmental Landmarks and Taskwork

**End of Life**

Processes & issues related to death & dying across the life span.

**Consequences**

**(Outcomes)**

Physical Pain

Unrelieved Symptoms

Spiritual Distress

Broken/Unresolved Relationships/Guilt

Quality of Life

Dignified Death

Alleviation of sx distress

Feeling Respected

**Positive**

Hospice Care

Advocacy

Life Review

Spirituality

**Antecedents**

Terminal Illness/

Advanced Disease

Meets Criteria for Hospice

Time Defined Aspect of Care

**Sub -Concepts**

**Negative**