

Foundations of End of Life Care: Your Client Is Approaching End of Life – Now What?

Lesson Facilitator: Tim, Ingrid, Sharon, Tammy			
Attendance: All disciplines			
Overview/Purpose: 3 sessions 8:30 am – 12:30 pm October 20, October 27 & November 3, 2014 <ul style="list-style-type: none"> See objectives 		Learning Intentions/Objectives <ul style="list-style-type: none"> Understand the foundations of end of life care utilizing a dynamic approach/framework to care Reference other courses and content throughout materials 	
Preparation and Resources <ul style="list-style-type: none"> Flipcharts, powerpoint, internet access 		Standards and Policies Addressed <ul style="list-style-type: none"> Clinical Practice Guidelines CRNBC Standards CHPC Standards of Practice 	
Time	Key Concept	Content	Instructional Strategies
0830hrs	Elder Welcome	Welcome to territory & acknowledgement of need for self-care (triggers)	Disciplines, Rural, urban, small town
0845	Introductions	Introductions of presenters.	Who we are, what we do, where we come from.
0855 hrs	Pre-test (Tim)	Ask all participants to take a few minutes to perform the pre-test.	
0900hrs	Learning goals (Tammy)	Objectives in handout	Review objectives



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0905hrs	What is palliative care (Tim)	Definition, changing models	Review definition and models
0910hr	The Journey (Sharon)	Components of the journey	Overview of the framework, dynamic approach
0915hr	Values & Belief (Ingrid, Sharon)	Overview of cultural caring framework, reflective practice	Review each slide with an example Exercise: What is a good death?? Open up forum to call out answers.
0935hr	Spirituality (Sharon and Elders)	What is spirituality, well-being, personhood, and dignity	Define spirituality and well-being, overview of personhood and dignity. Story: The Three Stone Cutters and reflect back.
0950hr	Elders	How spirituality is woven into living with dying	
1015hr	Break	Optional	
1020 hr	Forging a relationship (Ingrid, Tim-video) (Elder)	Concepts re: walking the journey Objective is personhood, client as centre of care	Read Dame Cicily Saunders Story of Care video
1035hr	Debrief (Sharon, Tammy, Tim, Ingrid and Elder)	A Story about Care	<p>Questions to ask:</p> <ol style="list-style-type: none"> 1. Who is Jim? 2. What are his concerns? 3. What if you were the HCP who walked in and sat down on the chair with Bill – how would you feel? How would you begin the interaction? 4. What are the red flag issues? <p>Note – acknowledge impact – emotional/physical</p> <p>Elder-lead discussion about challenging personal and community experiences in relation to video concepts</p>

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1105hr	HCP role in relationship (Tammy)	Values and beliefs, rescuer vs helper, trust with HCP	Discuss role of HCP, walking journey, difference between rescuer and helper
1115hr	Goals of care (Tim, Ingrid)	How to assess GOC	Discuss what GOC is, assessment Youtube video: http://www.youtube.com/watch?v=45b2QZxDd_o&NR=1
1135hr	Debrief video (Tim, Ingrid, Sharon, Tammy)		Use 4 questions from video Use experiential exercise – case study for GOC “Cheryl”
1155hr	End of day one. Tammy	Assignments Reflect on experience with a past patient (possibly First Nations) in light of learnings from Elder and discussion	
<u>DAY TWO</u>			
830hr	Welcome	Welcome from Elder.	Prayer and discussion of triggers
840hr	Cultural safety - Leena		
845hr	Homework		Assure that pre-tests are not being marked – more of information for our team. Assurance that homework is optional and even if participants don't do it, they will still get their certificate. Confidentiality – only look at patterns or themes.
850hr	Ongoing support (Ingrid, Tammy, Sharon)	Highlight psychosocial and physical impact	Transition points, PPS. Exercise – how do you see these losses impact Jim? Or modified from discussion from Day 1.
910hr	Loss, ACP (Tammy, Sharon)	Implications, ACP	What ACP is and what it isn't



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935hr	Assessment (Tim, Ingrid, MC, Tammy)	Baseline assessment, importance of spiritual assessment, psychosocial	Review assessments
1005hr	Common symptoms (Tim, Ingrid)	ESAS, pain management	ESAS, symptoms, total pain, assessment, classification of pain, barriers, treatment Youtube video: http://www.youtube.com/watch?v=KREufd4t0vo (Opioid phobia)
	Break – 5 min.		
1120hr	Elder	Elder present on complementary therapies for pain management	
1200hr	Overview of Exercises		
<u>DAY THREE</u>			
0830hr	Welcome (Elder)	Welcome	Review homework assignment – summarize 5 min each.
0845	Review of Symptoms (Tim, Ingrid)	Nausea	What is nausea, causes, assessment, treatment. Invite elders for non-pharmacological measures.
0855		Dyspnea	What is dyspnea, causes, assessment and treatment. Invite elders for non-pharmacological measures.
0900		Constipation	What is constipation, causes, assessment, treatment, complications. Invite elders for non-pharmacological measures.
0905		Delirium	What is delirium, causes, assessment, treatment Impact on family. Invite elders for non-pharmacological measures.



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0915		Asthenia	What is asthenia, treatment, coping, referral. Invite elders for non-pharmacological measures.
0920		Cachexia	What is cachexia, origin. Invite elders for non-pharmacological measures.
0930	Review of symptoms (Tim)	Review using a game format	How to be a millionaire? Have each person write down their answers. Figure out how to use 3 lifelines on videoconferencing.
0945	Disease trajectory (Tim)		Frailty, cancer, organ failure
0950	Needs (Sharon, Tammy)	Transitioning to EOL	Spiritual/psychosocial needs
1000	PPS (All)	PPS 40-30%	Summary of points at this PPS
1005	Break		
1015	Actively Dying (All)	Preparing for death, PPS 20%	Summary of points at 20%, common EOL symptoms: restlessness, dyspnea, and pain, respiratory congestion. Invite elders to talk about rituals at EOL and share experiences in treating the above symptoms.
1020	All	Unresponsiveness	Summary of points at 10%. Invite Elders to share their thoughts.
1025	Ingrid, Elder	Death	Summary of death PPS 0%, post-mortem care. Elder to contribute thoughts/rituals at time of death.
1045	Ingrid	After death	Exercise – what do we say to the family if we were present or just walking in to pronounce or walking in the first time after death had occurred? Would your approaches be different if an indigenous patient had died? If so, how?

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1100	Grief and bereavement (Sharon, Tammy)	Assessment and bereavement visit	Types of grief, picture, bereavement visits, spiritual crisis. GP pathway.
1130	Indigenous practices (Elder)		Discussion lead by Elder around grief and bereavement processes; practice in communities
1140	Summary (Ingrid)		Review of foundations, dynamic approach
1145	Post Test		Allow 10 min.
1155	Evaluation	UBCLC to send evaluation to participants * Reminder of 6-month follow-up	

