An End-of-Life Comfort Care Program for the imminently dying patients in an acute Hospital

Lee MY (1), Lau CKE(1), Wong WFA (1), Tang WF (2), Kwan WMC(3), Tong WCM (1), Tam OFS (4)
(1) Department of Medicine, NDH (2) Department of Accident and Emergency, NDH
(3) Palliative Care, NTEC/BBH, (4) Central Nursing Division, NDH

Keywords:
end-of-life care
comfort care plan
imminently dying patients

Introduction
There are many patients with terminal illness end up their last few days of life in acute hospitals. The need for enhancing the quality of care for these imminently dying patients is prominent. North District Hospital piloted a program named End-of-life Comfort Care to ensure patient who enters the final few days or hours of life a peaceful and dignified death.

Objectives
(1) To promote comfort care for dying patients at the final days of life;
(2) To enhance communication with families of the dying patients and provision of psych-social-spiritual support as necessary

Methodology
A nursing guideline in End-of-life Comfort Care was developed to guide nurses the necessary nursing interventions. An End-of-life (EOL) Comfort Care Plan was developed for ward nurses to provide a user-friendly tool to implement the nursing care. Accident and Emergency Department, Intensive Care Unit, had adapted the care plan fitting to their special clinical situation. Training in end-of-life comfort care workshops and briefing sessions were provided to equip nurses with the related knowledge and skills. Post-intervention questionnaires of the bereaved families and focus groups interviews of the nurses involved were conducted to evaluate the program from the perspectives of clients and staff.

Result
In May, 2017, the EOL Comfort Care Program was piloted in three medical wards, A&E, and then rolled out to all medical wards including ICU in September, 2017. By end of December, 2017, 36 EOL Comfort Care Plan had been initiated. Twenty-five bereaved families responded. Over 90% indicated satisfactory on items of flexible visiting hours, privacy, symptoms control, personal hygiene and respond to enquiry. Nurses identified the EOL Comfort Care was important to enhance dignity of the
patients at the dying phase and the care plan a useful tool for nurses to ensure comfort care measures had been given. The End-of-Life Comfort Care Program was well accepted by families and nursing staff. It has also enhanced the quality of care for the dying patients. This program will be rolled out to surgical and orthopedic wards of North District Hospital in 2018.