Enhance 'End of Life Care'(EOL) through TOL program and Bereavement care in
Infirmary patients
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Introduction
The Infirmary in Haven of Hope Hospital admitted very frail patients with terminal
malignancies and various end stage diseases and organ failure. The mortality rate is
generally higher. Bereavement care during the end of life is very important to relatives
and patients. Studies had showed that ineffective coping and increased patient's level
of immobility and symptoms increased carers' depression, and they may ignore their
own health needs during these situations. Promoting the care during the time when
the patient entering the dying process and enhancing bereavement care for carers are
essential in the immediate comfort of patients as well as the support of relatives in
difficult times.

Objectives
The aim is to have a better support to the carers when the patients entering the dying
process, to enhance the patients and carers' coping, and to have a comprehensive
symptoms control approach to the terminal ill patients, so that these patients and
carers can have a better coping during these stressful and grief situations.

Methodology
Before the program, a simple semi-structured survey was conducted to review the
ward staff's view towards care in EOL, and assess their limitations, stressors and
fears during the care. The a series of training and sharing by Palliative care team and
Medical Social Worker were conducted to introduce the concept of EOL and
Bereavement Care. The program is a multi-team approach. When the patient entered
the dying process, the staff would communicate with the senior nurses and MO
in-charge, and to alert the carers, so that more frequent visits can be arranged. For
patients with terminal malignancies, a consensus should be made between the
doctors and nurses that the patient is perceived to have life expectancy within one
week, and the Palliative Care team is alerted to review for the patient's treatment
regime, including symptom assessment and control. In communicating with the
relatives, the nurses would assess their grief and coping. For perceived abnormal
grief or patients with complicated social problems, bereavement care is started. Other than the psychological support and patient comfort management, the Infirmary nurses would alert the MSW for the bereavement care, with the help of clinical psychologist and chaplain if needed.

**Result**
Up till Feb., 2013, total 27 cancer patients were referred for EOL program and assessed, and total 30 cases were referred for Bereavement care. Including EOL care and Bereavement Program during patients' end of life process helps to promote patients' comfort, enhance carer support, and may help to prevent unfavorable conditions such as depression and guilt.