



Service Priorities and Programmes Electronic Presentations

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Submitting author: Ms Mo Ching LAM

Post title: Ward Manager, TWGHs Fung Yiu King Hospital

The Effectiveness of Patients' End of life care in a Geriatric Step-down Hospital

Lam MC (2), Lo YF (2), Wong EKC (2), Chan FHW (1)

(1) Department of Medicine, (2) Nursing Department, TWGHs Fung Yiu King Hospital

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Introduction

With increasing frailty and co-morbidities of older patients in hospital who passed away during their hospitalization, an End of Life Clinical Plan for inpatient (EOL-CPi) has been commenced in FYKH since 4 June 2012 for providing better care for dying older patients.

Objectives

The EOL-CPi discontinues unnecessary/inappropriate interventions; addresses spiritual needs; discusses plan of care with relatives; provides comfortable environment and flexible visiting hours.

Methodology

In order to evaluate the effectiveness in providing comfort care in patients' last days of life, a survey was performed on March 2016 by disseminating questionnaires to clinical staff including doctors, nurses, physiotherapists, occupational therapists, chaplains and medical social workers.

The Questionnaire made reference to Quality of dying & death (QODD) --- questionnaire for nurses, of which, 11 questions were selected from QODD about experience that patients might have during their last days of life.

Result

A total 81 questionnaire received from varies clinical departments. 20 Male 61 Female staff, among them there were 9 Doctors, 59 Nurses, 2 Physiotherapists, 3 Occupational-therapists, 4 Medical Social Workers and 4 Chaplains of Christian/Catholic/ Buddhist responded. Most of the staff were under 5 years of experience (39.5%) and over 16 years of service in present profession (44.4%). About 80% staff agreed that their patients had pain under control; appeared to breathe comfortably, and feel at peace with dying.

70 (86.4%) staff agreed that patients appeared to keep patients' dignity and self-respect.

71 (87.6%) staff found patients had spent time with their families or friends, 61 (75.5%) staff agreed their patients were touched or hugged by loved ones and 9 (11.1%) stated they did not know.

74 (91.4%) staff found that families had said goodbye to patients at time of death.
63 (77.8%) staff also found one or more visits from a religious or spiritual advisors and
57 (70.3%) had spiritual services or ceremonies before patients' death.
The tailored made local End of Life clinical plan (EOL-CPi) for dying older patients in
FYKH was well appreciated by FYKH staff. Overall, the staff rated the experience of
patients' death good (80.9%). The staff believed that patients recruited in EOL-CPi
had received holistic and high quality End of Life care.