

Hospice Care Legacy and Dignity Project Jade Johnson Health Care Studies



Introduction

- "The mission of Amedisys is to honor those they serve with compassionate home health, hospice, and personal care services that apply the highest quality clinical practices" (Amedisys, 2022, para 4). This allows patients to maintain a sense of independence, quality of life, and dignity.
- Hospice volunteers offer companionship and help with everyday tasks to maintain the patient and their family's routine.
- As well as nursing care and routine home care, Beacon offers grief and bereavement counseling, social work services, spiritual care, and support, volunteer support and much more (Amedisys, 2022).
- Beacon demonstrates excellent initiative and commitment to excellence in serving their patients wherever they call home.
 This includes a private residence, assisted living, and other settings (Amedisys, 2022).



Internship Project Objective

- To create lasting memories for patients, family, and staff by gaining trust and companionship through patient visits.
- Being able to educate and show future volunteers how beneficial a patient visit can be.

Related Literature

- Dignity therapy is an individualized psychotherapy that aims to relieve emotional distress that can be caused by their terminal illness. The therapy offers the patients an opportunity to reflect on things that are important to them or memories they would like to recall and or share with their loved ones (Martínez et al., 2017).
- The dignity therapy protocol begins with nine standard questions; these questions are options for the patients' consideration and reflection about what they want to say. These questions guide a conversation with dignity therapy trained professionals and the answers to the questions are then recorded. After the information has been transcribed and edited, a legacy document is produced and given to the patient and or family (Martínez et al., 2017).
- Volunteers are a major part of hospice care and without the help and contributions of volunteers, hospice would not be able to provide the level of care and comfort to patients and families for which hospice is renowned for. Hospice volunteers receive extensive training in providing comfort and support to families facing end-of-life issues (Hospice Services of Massachusetts, 2021).
- Volunteers help to provide an atmosphere of warmth and understanding to the patient and family before, during, and after death. They are there for interaction and companionship to the patient and the family, and they also assist in many other different ways, such as reading, sitting quietly with a patient, listening to music with a patient, running errands for the patient and or family, relieving the caregiver, administrative work in the hospice office, and assistance with transportation and household chores (Hospice Services of Massachusetts, 2021).

Project: The Effects of Dignity Centered Questions on Patient Memory

- > Using insight from Dignity Therapy (DT) Protocol.
- Presented are three out of the nine questions conducted with the patients.
- Observed an improvement each week.
- Each week she was able to be more specific and recall other parts of her memory.

Patient: Rosemary T.

1. Tell me a little about your life, what do you remember the most?

(Week One) "Rosemary, not the spice."

(Week Two) "I am from Bridesburge, Philadelphia."

(Week Three) "I had two brothers, Carl, and Lenny. I had a cousin who was like a sister to me."

(Week Four) "I had a lot of friends growing up, we would make paper dolls. We would cut out clothes from the magazines and use them for clothes for the dolls we made."

(Week Five) "My birthday is in November."

(Week Six) "My family bred canaries, and we would keep them. Sometimes I would give one away."

(Week Seven) "We had so many dogs growing up, but the birds were so pretty. They were orange and yellow."

2. What is one of your Favorite Memories?

(Week one) "I must pick one, I have many. I do not know."

(Week Two) "Going with Michael (son) to Tijuana, Mexico."

(Week Three) "We only went for the day; we went to the dollar store."

(Week Four) "The dollar store was not very different from other dollar stores."

(Week Five) "Michael lived in California at the time, so we decided to cross the border into Mexico."

(Week Six) "Michael thought I was crazy."

(Week Seven) "I miss sitting in the living room with my family, me and my brothers would talk, watch to and play monopoly. My brothers would make fun of me and call me "Barey" they thought it was so funny."

would make fun of me and call me "Rarey" they thought it was so funny."

(Week Eight) I made my daughter a Halloween costume. It was a pumpkin I made from paper mâché, the costume was so big she would not fit through the doorways, it was funny."

3. What was your favorite hobby?

(Week one) "I loved arts and crafts."

Visiting consistently with the patient.

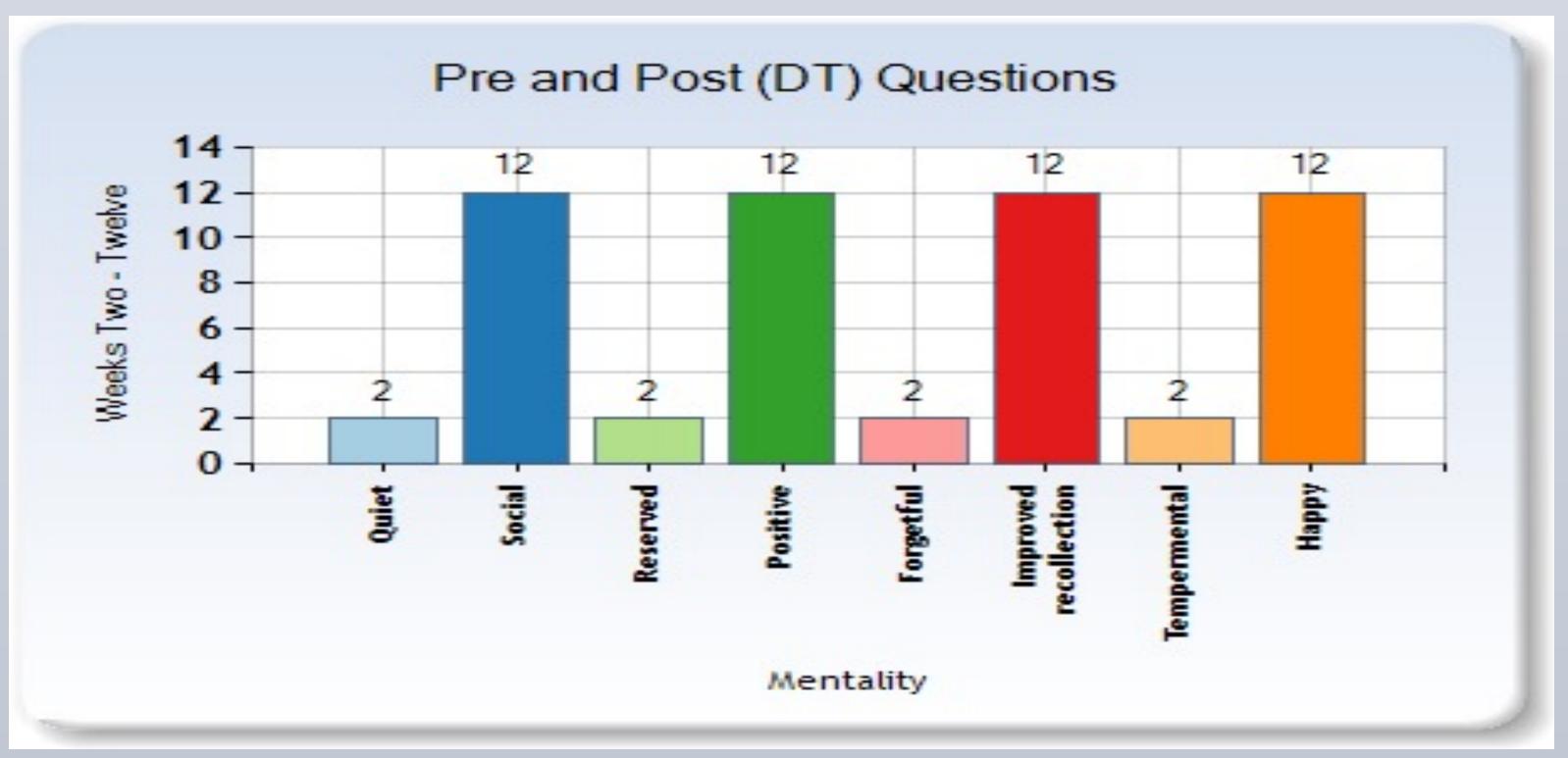
(Week Two) "I miss sewing, I liked it very much. My mom helped teach me how to sew."

(Week Three) "I saved up my money and bought a sewing machine."

(Week Four) "I learned how to sew in a home economics class. When I was 8 or 9 years old a woman who lived down the street from me

taught me how to crochet. I really enjoyed it."

(Week Five) "I could make suits, jackets, and skirts. I used to make curtains too that would match the bedspreads."



Materials and Methods

- Getting to know the patient, building trust, and companionship.
- Producing questions best suited for the patient, based on dignity therapy protocol.
- Keeping up to date on coordination notes from nurse and chaplain.
- Recording questions and answers from patients, so I have their story in their words.

Results

Weeks of conversation and questions based off a dignity therapy approach showed improvement of memory.

• Each week I would ask the patient the same questions, each time her answers became more detailed and specific.

The patients would express a feeling of importance and appreciation.

Patients felt a sense of dignity and respect being asked questions about themselves, their lives, and their thoughts.

Lessons Learned

- 1. Hospice needs more volunteers to fulfill the needs of patients and family members.
- Volunteer programs make it possible for patients and their families to have some of their emotional needs met. This includes compassion and support during the patients end of life process.
- 2.Communication and listening skills are essential elements in hospice care.
- These skills enhance your relationships with people and make it more enjoyable to converse with you. They also increase your ability to be successful in your endeavors and set the foundation to understand and build more knowledge.
- 3. That it is never too late to make a difference in someone's life.
- Conversation and dignity-based questions can be vital to a patient's quality of life.
- It is also important to factor in mental stimulation, without it the neurons shrink and so does the brain. This can cause memories to fade and depression to set in.

Conclusion

- Since interning at Beacon Hospice in Lawarence Ma, I have had the privilege and opportunity to be a part of weekly tuck in calls to patients, weekly patient visits, bereavement services, honoring veterans/pinning ceremony, and charts of life for patients.
- Dignity therapy is a practical tool designed to enhance the sense of purpose and self-worth for the seriously ill patients.
- Being able to show and educate other volunteers in gaining the same information from patients.
- Volunteers play a significant role in improving patient memory and quality of life.

References

Amedisys. (2022). About Amedisys. https://www.amedisys.com/about/

Hospice Services of Massachusetts. (2021). Our dedicated volunteers. https://hospiceservicesofma.com/volunteers/

Martínez, M., Aranzamendi, M., Belar, A., Carrasco, J. M., Carvajal, A., Rullán, M., & Centeno, C. (2017). 'Dignity therapy', a promising intervention in palliative care: A comprehensive systematic literature review. Palliative medicine, 31(6), 492–509. https://doi.org/10.1177/0269216316665562

Acknowledgements

Karen Powell, Volunteer Coordinator and Site Supervisor
Hannelore Nalesnik, Chaplain