

Overview of End of Life & the Older Adult

Education for Health Care Professionals

Part 1: Defining End of Life



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Defining the End of Life (EOL)



- EOL is a complex topic that requires reflection on what is most important to the individual.
- EOL usually refers to when an individual is deemed to be dying in the near future as a result to chronic illness, functional decline, and/or life-threatening symptoms.
- EOL care gives special support and attention to those who are close to death.
- The overall goals of the care are primarily focused on comfort and the quality of life.

(Registered Nurses' Association of Ontario [RNAO], 2011; Fowler & Hammer, 2013)



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Hospice Palliative Care

- Hospice Palliative Care aims to relieve suffering and improve the quality of the living and dying. It strives to:
 - Help individuals and families address physical, psychological, social, spiritual, and practical issues.
 - Discuss their associated expectations, needs, hopes and fears.
 - Prepare for and manage goals of care along with the dying process.
 - Cope with loss and grief during the illness and bereavement.
- Hospice Palliative Care requires a team approach to support individuals, their families, and caregivers. HCP are encouraged to be governed by educational standards that are suitable to professional conduct in regards to EOL care.

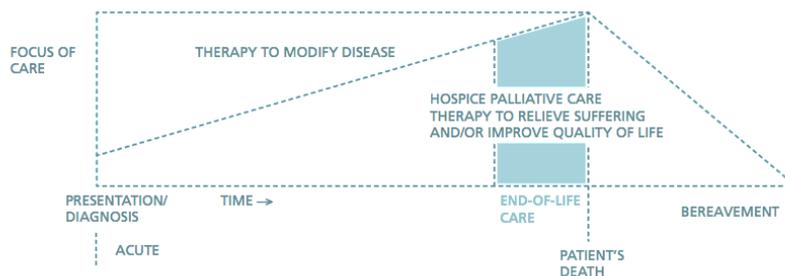
(Canadian Hospice Palliative Care Association [CHPCA], 2017)



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A Model to Guide Hospice Palliative Care



- Hospice Palliative Care usually begins from the presentation or diagnosis of the illness. As time passes, the illness may require relief of suffering to improve the quality of life for the individual. Lastly, supporting the families and caregivers during bereavement are important concluding elements of EOL care.

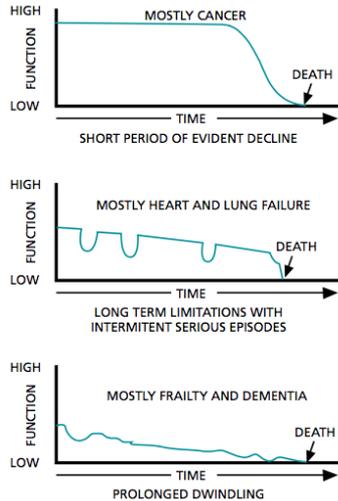
(RNAO, 2011; CHPCA, 2017)



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EOL Trajectories



EOL can follow different paths. The trajectories of health and illness can be shown in example by these graphs.

- To begin, an individual with cancer may have a good period of health and then, it may follow with a short and fast period of decline before death.
- Whereas, an individual with diseases other than cancer, such as heart and lung failure, may experience long-term disability with periodic exacerbations and then, with a sudden death.
- Lastly, an individual living with frailty and/or dementia may experience a steady decline towards death.

(RNAO, 2011)

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Domains of Care

- Caring at the EOL requires a comprehensive and holistic assessment of individuals and their families and should be based on the Canadian Hospice Palliative Care Association (CHPCA) Domains of Care, which include:
 - Disease management
 - Physical
 - Psychological
 - Spiritual
 - Social
 - Practical
 - EOL care/death management
 - Loss and grief

(RNAO, 2011; CHPCA, 2017)

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Assessment Tools

Other assessment tools that are essential for EOL care may include:

- [Palliative Performance Scale \(PPS\)](#): This tool was developed by Victoria Hospice and it is a framework for measuring progressive decline in palliative individuals.
- [Palliative Care Toolkit](#): A 3-step model of best-practice tools for supporting primary health care providers with palliative care delivery.
- [Edmonton Symptoms Assessment Scale](#): A tool to assist in the assessment of nine symptoms common in palliative care individuals.
- [Pain Scale](#): Learning package of RNAO Best Practice Guideline to assess and manage pain among older adults.

Click on the link to connect directly to the assessment tool.



Philosophy of EOL Care

EOL care for older adults:

- Requires a compassionate and active approach that ensures dignity, comfort, and support for those who are living with or dying from life-threatening conditions.
- Must be sensitive to personal, cultural, and spiritual values, practices and beliefs that involve support for the dying individual, families, friends, and anyone involved.
- May include preparing the individual and family for death, making decisions that are consistent with the prognosis, and supporting the family with the loss and grief during the illness and bereavement process.

(Ontario Palliative Care Network [OPCN], 2017; Schmit et al., 2016)

