Enhancing Communication in Hospice Settings

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Palliative Care

Improves the quality of life of patients with life-threatening illnesses and their families through the prevention and relief of suffering.

- Pain relief

- Physical suffering
- Psychosocial suffering
- Emotional suffering

Hospice Care

A form of palliative care that uses a team approach to provide care to people in the final phase of terminal illness and focuses on comfort and quality of life.

- Medical care
- Pain management
- Emotional support
- Spiritual support

End of Life Care

Often refers to the last weeks or days of life, although discussions and decisions regarding end-of-life care may be initiated long prior to this point.

- Wishes related to end-of-life care
- Preferences about end-of-life decisions
- Final messages to family, friends and counselors

End of Life decisions

- NOT an easy discussion to initiate
- End of life vs rest of life
- Decisions may change based on quality of life

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Communication Vulnerability and Challenges

- Anxiety
  - Conditions change quickly
- Pain
  - Management
  - Recognition of non-verbal signs
- Dementia
  - Change in personnel, settings
- Unresolved issues

Themes

- Range of AAC
- Techno- connectedness
- Partners
- Quality of Life
- Quality of Death

Communication Topics

- **Getting needs met**
  - Pain/symptom management
  - Caregiver issues
  - Clarifying needs w/caregivers
  - Giving instructions/directions
  - Bereavement
  - Spiritual issues
  - Funeral arrangements
  - Finances

- **Supporting social relationships**
  - Reminiscing
  - Relationships
  - Quality of life
  - Fears about the future
  - Finding closure
  - Staying connected w/family and friends
  - Letting go

Letting Go

- Unresolved issues
- Mend relationships
- Make decisions known
- Hospice mantra
  - “Please forgive me”
  - “I forgive you”
  - “Thank you”
  - “I love you”

Bag of Tricks

- Alphabet boards
- Picture boards
- Boogie board
- Dry erase board
- Laser pointer on ball cap
- Eye gaze boards
- Etran boards
- Switch-adapted call chime
- Switches
- Tablet with apps
- SGD**

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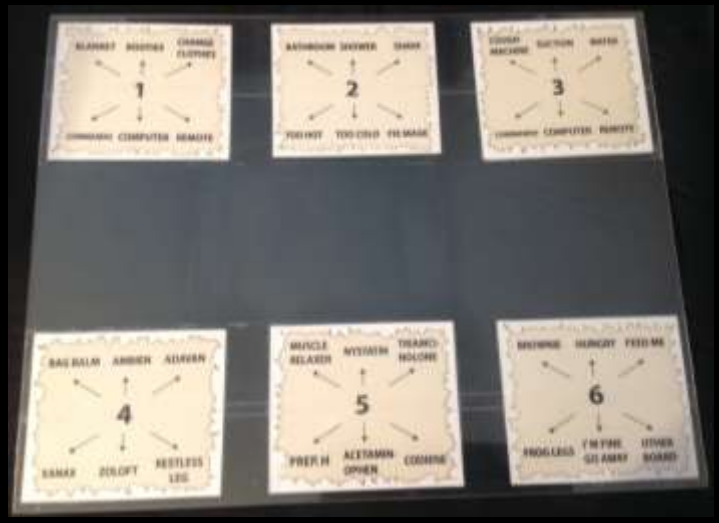
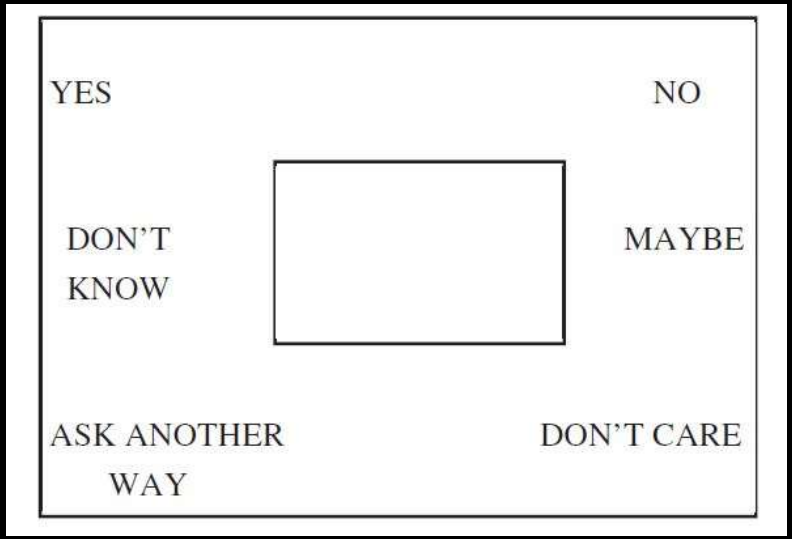
Low Tech

A	B	C	D		
E	F	G	H		
I	J	K	L	M	N
O	P	Q	R	S	T
U	V	W	X	Y	Z
Space		Oops		end	





Strategies For Success

- Trained personnel / human support (ALS binder)
- Ensure adequate time for communication
- Ensure adequate access to communication tools

- Hospice does not always have SLPs, never mind those who are trained in using AAC.
  - Family may need to advocate, and this is best done before signing on.
- Caregivers, patient advocates, family, nurses, staff all need to be trained in low tech methods of communication, regardless of location.
- Patients still use high-tech at end of life. Taking it away or assuming they don't need it robs them of their ability to say what matters most.

LISA
DEBBIES LAST
WORDS WERE
SPOKEN ON THE
ALS EDGE GAZER
(2) HRS BEFORE SHE
PASSED

"I LOVE YOU ALL." THAT
INCLUDED YOU AND THE
~~ALS~~ ALS
STAFF I'M
SURE.

Your kind

expression of sympathy

is deeply appreciated and

gratefully acknowledged

THANK
MILT
AND
FAMILY