

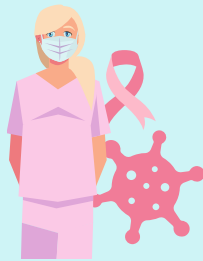
DESCRIPTION



Per the NCP (2018) guidelines, attention to all domains of care becomes increasingly important at the time an individual nears death. Hospice care is the gold standard for patients nearing the end of life and should be introduced early so individuals/families understand its philosophy, eligibility, benefits, and limitations.

COVID-19 CONCERNS

- COVID-19 is causing unprecedented mortality rates worldwide, particularly for patients immunocompromised from cancer
- Nurses across systems and settings are bearing witness to increased suffering and greater numbers of deaths than ever before
- Maintaining the sacredness imperative to end-of-life care has become increasingly challenging in the context of COVID-19, with oncology nurses taking greater responsibility to navigate complex family dynamics at all stages of the bereavement process
- COVID-19 has required oncology nurses to discuss, address, tend to, and reflect on death and dying in ways that may impact nurses' health and wellbeing into the future



ASSESSMENT CONSIDERATIONS



- Individuals with cancer who are diagnosed with COVID-19 may experience rapid physical decline, leaving them emotionally, spiritually, mentally, or socially unprepared to die
- Social and caregiver considerations should be prioritized in the context of changing visitor restrictions and the need for loved ones to have closure to say good-bye and provide comfort at bedside
- Assessing spiritual and cultural needs throughout the cancer trajectory will assist with streamlining care to ensure integrity and the end of life
- Marginalized or isolated individuals often require additional emotional support at this time

QUESTIONS FOR PATIENT

- Are you at peace?
- What are you most worried about?
- How do you best like to be comforted?



QUESTIONS FOR PATIENT AND FAMILY

- What is most important to you right now?
- What are you hoping for?
- This is a difficult time and everyone's needs are different. Can you tell me a little about how you think the team and I can best support you?

ADDITIONAL SUGGESTIONS FOR CLINICAL PRACTICE

- The time surrounding death remains sacred ground despite changes secondary to COVID-19
- Maintain exemplary practices related to delivery of compassionate care, creating a healing and therapeutic environment, using deep listening, and validating the patient/family experience
- Prioritize self-care and emotional processing as cumulative exposure to serious illness, dying, and death affects nurses' wellbeing over time



RELATED RESOURCES



- Anewalt P et al. (2020). Grief and Bereavement for Family Members who Can't Visit their Sick Relatives or Attend Funeral Services– Briefing Note. Global Palliative Care and Covid-19 Series. Available at: <http://globalpalliativecare.org/covid-19/uploads/briefing-notes/briefing-note-grief-and-bereavement-for-family-members-who-cant-visit-their-sick-relatives-or-attend-funeral-services.pdf>
- Hospice & Palliative Nurses Association. (2020). HPNA Primary Palliative Nursing for Patients with COVID-19: Nursing Care and Support at the End of Life. Available at: https://advancingexpertcare.org/HPNAweb/Education/COVID19_PrimaryPalliativeNursing.aspx