

End of life care

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End of life care The main goals of end life care are to promote the quality of life and to relieve suffering among the dying patients. For the achievement of these goals, a nurse must be able to give attention to spiritual, social and existential needs of the patient and the family. Meeting the health needs of the dying patient demand in cooperation of high level of professional ethics where the patient must be treated with autonomy, beneficence and non-maleficence. Nevertheless, despite the presence of palliative care, most elderly patients are not allowed to die in the comfort of their homes as per their wish. This is because of failure to promote the significance of home based care among the family members of the dying patients (Aslakson & Pronovost, 2011).

Most patients do not die in their homes as per their wish due to the overstretched nature of health care team. The work burden in hospitals and hospices does not give effective opportunity for the nurses to offer home-based care thus denying the patients the chance of being nursed in their homes. Equally, the family of the dying is normally ignorant on the importance of a home environment for the dying. This thus makes the family members override the wishes of the patient to be left to die at home (Heyland et al., 2010).

Promotion of effective end life care demands that the autonomy of the patient be preserved. A nurse must promote the wish of the elderly patients to die in their homes by giving health information on the dying process and the needs of the dying to the family members. Informing the family members on the need for the patients to die in their homes is important as it prepares them to be part of a team that manages the patient at home. Nurses must

equally liaise with the social workers to enhance visitation of the dying patients in their homes (Davison, 2010).

References

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