

Helping Hospice Patients and Family Members Achieve End-of-Life Goals

Having a clear, shared understanding of a hospice patient's goals is never more important than in the patient's final days, when worsening symptoms can potentially lead a family member to call 911—sending the patient to the hospital in an ambulance when they would prefer to remain at home, and inadvertently leading to the revocation of hospice services.

To help ensure hospice patients, family members and their care team are all aligned on end-of-life goals throughout the patient's time in hospice, VNS Health Hospice Care has begun providing its team members with enhanced training in compassionate conversation and listening skills, and is also coaching them in the use of a detailed guidebook on end-of-life conversations from the Institute for Healthcare Improvement.

The guidebook is now in use by all VNS Health Hospice Care teams, and the information it generates is being integrated into patients' electronic medical records to help guide delivery of care. The booklet, "Your Conversation Starter Guide," asks a series of questions that patients and family members can discuss with the care team. These include, "What does a good day look like for you?" and "What or who supports you during difficult times?"

VNS Health Hospice patients and their family members receive the conversation guide when they are admitted into hospice

care, and care team members then use it on an ongoing basis.

“Every team member on every single visit is expected to keep the conversation going,” says Noreen Coyne, a registered nurse and Associate Vice President, Hospice Education and Clinical Support at VNS Health, who leads the hospice training.

In addition to being trained in use of the guidebook, hospice team members are also receiving enhanced instruction on overall conversation skills. “The overarching theme of this skills training is the importance of focusing on individuals as a person, not a patient,” says Joseph Bleiberg, Queens Lead Social Worker for VNS Health, who leads this part of the training.

Such conversations can help clinicians support quality of life at end of life. For example, Joseph says, when the team asked a Queens patient what a good day looked like, he said fishing at the Bayside Marina. That was a goal the VNS Health Hospice care team could—and did—deliver on, mindful at the same time that his “good day” might be different in a few weeks’ time. “Our patients set the goals,” says Joseph, “and we help meet them.”

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