When a Terminal Diagnosis is Made

Likewise, the ethical principle of autonomy requires that for us to make informed decisions about our health care and address end-of-life issues, that we have all the available medical information with which to make those decisions.

Providing a cognitively aware resident with essential information about their prognosis enables them to be an informed and independent decision maker regarding the kind of end of life treatment options they want to pursue. It also offers timely opportunity for the resident to address personal issues, whether it be:

- reconciling with loved ones
- experiencing peace with the Divine in their dying process
- finding closure to personal matters
- doing important "life review" work that aids in discovering the meaning and uniqueness of our life's contributions as we end the journey of life.

Energies that go into maintaining secrets and a "conspiracy of silence" while withholding significant personal information can be better put to use in providing a sense of comfort, presence and solidarity in the face of human loss. It also avoids the potential sense of betrayal and anger that result if the resident becomes aware that such information has been intentionally kept from them.

Often by asking ourselves, "What would I want to be told in this situation?" we gain a sense of which way to proceed in these sensitive areas.

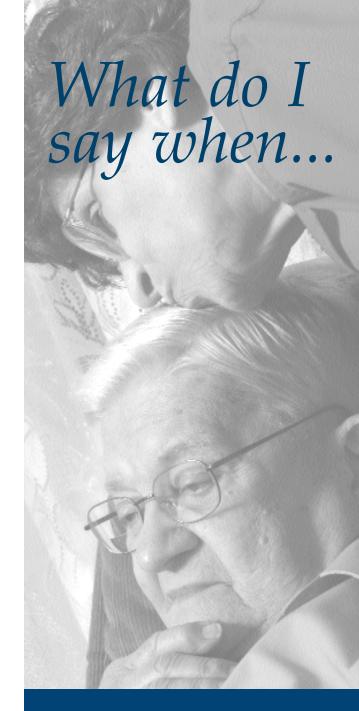
The Chaplain and Social Workers are available to work with you in offering support and planning how to break difficult news when that occurs.

A Final Word

When responding to someone's loss or bad news it is perfectly all right to say... "I heard such and such. I don't know what to say, but I feel for you at this time."

We can also just listen to them and offer the opportunity for sharing... "Tell me what this has been like for you." *More important than what we say is that we offer our care and listening presence.*

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Discussing Difficult Issues With A Loved One Feeling like a "Bad News" Bearer...

Sharing "bad news" with an elder family member can be a difficult decision when the final journey of life is already filled with so much change and adjustment to loss. It inevitably raises discomfort as well for the family caregivers involved.

It is important to carefully consider the benefits and drawbacks of disclosing difficult developments such as the long-term nature of a placement, the death of a family member, or a terminal diagnosis.



Issues -When a Placement is Permanent

Knowing whether an admission may be permanent is not always possible when considering placement in a skilled nursing or rehabilitation setting. When that decision seems certain, either pre-admission or following a period of rehab intervention, it is wise to broach this subject with the person.

Doing so will aid adjustment during the transition period and hasten acceptance. Most residents find that after one to three months, the facility and staff are an acceptable option. Frequently, the pleas to "go home" diminish within a short time as relationships are established and adjustment to the routine of care and activities is successfully made.

Hoping that a loved one can be coaxed into admission with the promise that it is "temporary" is unfair to the person and counterproductive to the eventual adjustment.

When a Loved One Dies

Most people, whether elders or not, want to be informed about essential matters that concern themselves and loved ones. Having the opportunity to grieve, find closure, and say goodbye to the deceased at funeral services is a basic need and right for us all. While painful, it aids us in facing our own mortality and enables us to experience the healing support that can be found on such occasions.

