





■ SENIOR CARE

Talking About End of Life Wishes - Unique Card Game Can Help

Norwell VNA Blazes Trail

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The Pat Roche Hospice Home uses unique cared to help people spell out their end of life wishers. Pat Roche Hospice Home

By Joan F. Wright, member National Council of Certified Dementia Practitioners Updated July 13, 2016

Talking about end of life wishes is tough on everyone. Families, physicians, health professionals tip toe around the topic. Unique playing cards, called *GoWish*, are being innovatively used by Norwell Visiting Nurse Association (NVNA) and Hospice to entice seniors to talk about their end of life wishes.

Wishes We Might Have

Cards include wishes like:

Not being connected to machines.

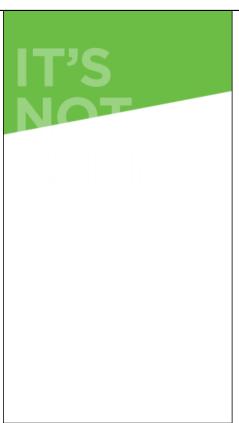
To keep my sense of humor.

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To be able to talk about what scares me. To maintain my dignity.

Not dying alone.

How to Play

GoWish was introduced by NVNA as part of the training of home care and hospice staff. Created by Coda Alliance, it's a great tool to introduce serious considerations in a non-threatening way. With 36 cards in the deck, each player divides it into







Our clinicians and office staff participated in various sessions to play the game and discuss their own individual concerns and wishes. It was an eye opener for many, but most importantly, provided invaluable insight into what our patients must consider in their lives. What is often most revealing through the game, is that many people don't really know what their loved one wants. What one person may consider very important, another may not.

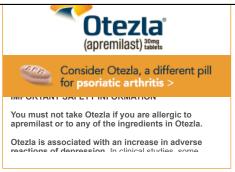
The genius of this game is that it gets difficult conversations started in an easygoing way.

Such wishes are expressed when people come to our hospice residence, the <u>Pat Roche Hospice Home</u> in Hingham, Mass. Some of our younger residents didn't want to die in the same home as where their children would continue to live.









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Yet, they wanted a home-like setting where their family could visit whenever they'd like and not feel like they were in an institutional type building. Others have had no family or relatives who lived close by and their wish to die at home was compounded by not wanting to die alone. The option to come to our residence where the staff is available 24/7 gave them great comfort.

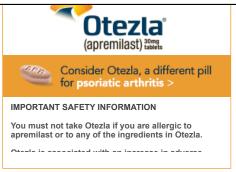
This is precisely why NVNA and Hospice pursued establishing the Pat Roche Hospice Home. We found that many patients could not remain safely at home to die. Some elderly couples found that caring for a sick spouse at home was becoming too cumbersome for both of them. The hospice residence has allowed them to return to husband and wife while professionals provide the care.

At the same time, our hospice residence has enabled many families to gather together for memorable occasions in those final weeks of life. Children and grandchildren can play in the surrounding field or walk the trails within the abutting farm reservation.









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Families can gather together for meaningful dinners and visits. In fact, we've been proud to have helped families celebrate birthdays, graduations, and even a baby shower, in our family area that includes a large family room and full kitchen. Here, families can be families and their loved one who is in our hospice care can join the celebration to the degree he or she feels comfortable doing so without leaving the residence.

Some family members tell us that they didn't realize how beneficial the hospice residence could be or that their loved one would want to live there. Having the conversation with loved ones and/or the people who will be responsible for overseeing one's care is perhaps one of the most important things anyone can do. Without letting others know what one really wants when faced with serious decisions, loved ones are left guessing, and very often make decisions based on their own wishes and not those of the person who is sick.

But just as important is designating a person to make decisions when one cannot make them for his or her own self. NVNA and Hospice are taking extra steps to help facilitate such conversations through education with our own clinicians and also within the 27 communities we serve south of Boston. Recently, we became a community partner of Honoring Choices, another initiative to educate people about choosing a healthcare proxy and discussing individual wishes and concerns. The two actions – appointing a proxy and having the conversation(s) – are keys to optimum health when living with chronic and/or advanced illnesses and wishing for positive end-of-life experiences.

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