

PRACTISS Elderly End of Life Scenario Supporting Roles

Role	Description (Role, Behaviour, Key Moments, Script)
Patient	<p>You are essentially moribund for this scenario. You have very cool peripheries (as demonstrated with ice) and look grey and ashen. Your mouth is wide open, and your eyes are staring into space. You are breathing comfortably with an occasional mild cough. You may be provided with oxygen, and/or IV fluids started. They may put your legs up and tilt the head of the bed down.</p>
Patient's Granddaughter	<p>Background: You received a call from the home that your grandmother was very unwell and had been taken to hospital. You have power of attorney, and kind of knew this day would come as it's been a rocky past 6 months with her. She has been going downhill fast at the nursing home and no longer recognizes any of the family. She is intermittently aggressive and for the last week she hasn't been eating or drinking anything.</p> <p>No one has ever brought up her end-of-life wishes with you before, but in the back of your mind you did realize that she might die soon. The GP said she had a urinary tract infection when he visited a couple of days ago and seemed to think that this is the reason she was off her food and prescribed some antibiotics.</p> <p>Stage 2: Participants will be undertaking an initial assessment recognizing the severity of the patient's condition. They will seek information from you, notes and other sources to determine cause and likely prognosis. Ideally, they will quickly engage in a discussion regarding the patients end of life wishes.</p> <ul style="list-style-type: none"> • End of Life Discussion: You really want to have this discussion at the patient bedside. You are a little surprised that the doctors seem to think the end is so near. You are relieved but kind of guilty that you are feeling relieved that she might die. You don't want her to suffer and feel bad about just 'letting her die'. You ask if there is anything that can be done. <ul style="list-style-type: none"> ○ If participants attempt active management -> "She wouldn't have wanted all of this" ○ If the doctors ask what they think she would have wanted you are very clear that she would like to die peacefully and would not want any life support/ICU/ventilation or CPR. ○ If the doctors ask "what do you want us to do" you are less clear and suggest that you do want things done if they will help her.

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	<ul style="list-style-type: none">○ The conversation ends with a plan to complete an “Allow Natural Death” Plan (also known as comfort care) to reflect and respect the wishes of the patient end of life care.
ED RN	<p>Act as a normal ED RN, providing initial handover and assisting with bedside care of the patient.</p> <p>Stage 2:</p> <ul style="list-style-type: none">● If participants keep trying to attempt active management -> “I think you better talk with the family member, it seems like she is really uncomfortable with what we are doing here”