

End of Life Care in a Medical Respite Center

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Circle the City
healthcare for the homeless



Circle the City's Experience with End of Life Care

- Partnership with Hospice of the Valley
- Average 1-3 hospice patients
- CTC providers work with hospice nurse and hospice social worker closely to provide care
- Patients admitted with primary decisions made by CTC providers with guidance available through Hospice of the Valley when needed



Galen's story

- Galen was admitted to Circle the City Medical Respite on 1/12/2017
- 64 year old man with squamous cell carcinoma of left neck and mandible that was diagnosed in August of 2016 after he developed a facial nerve palsy
- He had completed 4 weeks of chemotherapy and had recently had all his teeth removed in anticipation of radiation in 1-2 weeks

- A friend of his served as his medical power of attorney
- Feedings via PEG tube
- Large mass left neck, left facial nerve palsy
- 40lb weight loss over previous 4 months, fatigue

Initial Medical Course: aggressive treatment

- Pain medication (immediate release liquid morphine and extended release morphine- MSIR 10-15mg q4, MSER 30mg BID)
- Management consisted of pain control, self management of tube feeds
- PET scan done 1/25/17 to better delineate treatment plan
- Progressively more hoarse and weaker
- Working with case management to obtain expedited SSI benefits through Compassionate Allowances program with goal to move in with friend (MPOA) March 8, 2017

Medical Course: aggressive treatment

- 2/2/17- PET scan results revealed metastatic disease in lymph nodes of neck and lungs
- Patient told by oncologist he has 6 months to live
- Only option for treatment was palliative chemo and radiation

Change in goals of care

- Over the next two weeks Galen received 3 of 4 intense radiation treatments to be followed by palliative chemotherapy
- He became progressively weaker
- After the 3rd radiation, he opted to stop treatments
- 2/15/17: Mr. I decided to proceed with hospice

Getting to know Galen...

- Galen reported he was at peace with his terminal illness and was able to openly voice regrets he had
- He previously had a lawn care business for 25 years
- He was married in 1978 for 16 years and had one step son who came to visit him at CTC weekly
- He had a long history of alcoholism but had stopped drinking 4 years prior
- He was a lifelong smoker
- Alcoholism and medical condition led to his homelessness

Medical Course

- 2/17/17: Galen asked to stay at CTC until his death and was moved into an isolation room
- Mass of neck enlarging, wound care needed daily to control odor and discharge
- Pain medications increased to help with increasing pain

Meanwhile...

- 2/22/17: case manager found out he received SSI benefits
- Galen asked his case manager to help him open a bank account and purchase a new phone
- Outings were arranged to complete these tasks
- He received frequent visits from his step-son, friends outside of Circle the City and patients at CTC stopped by his room daily

Comfort Care

- 2/27/17: Galen reports he hadn't "felt this good in weeks"
- 3/4/17: increased swelling of face and jaw, prednisone started with improvement
- 3/7/17: all medications changed to liquid except MSER which Galen asked to continue to take in pill form

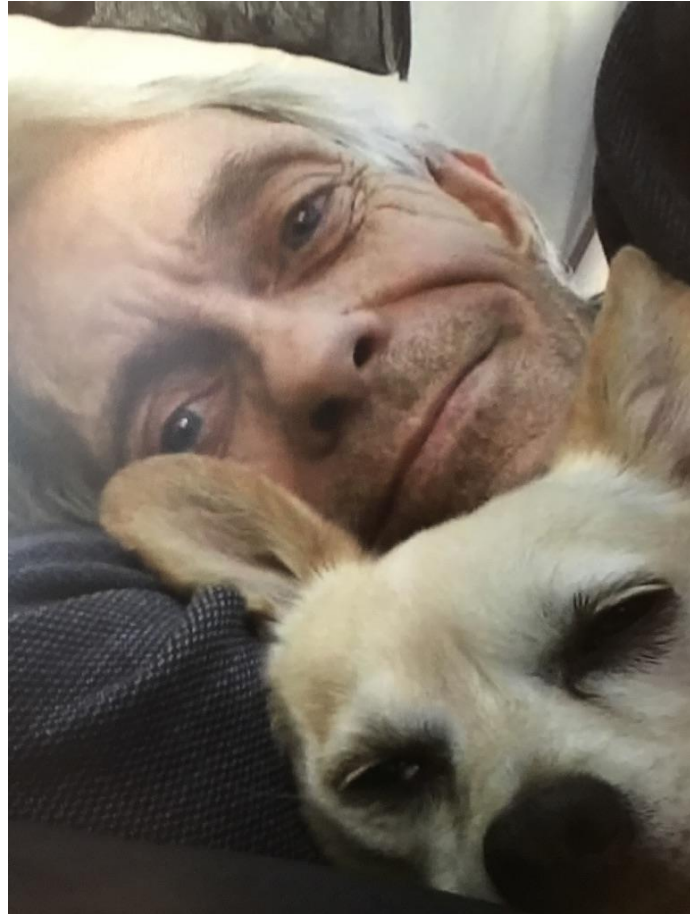
Continued comfort care

- 3/14/17: speech more affected by the swelling, patient only able to speak in a whisper
- 3/23/17: Fentanyl patch added for improved pain control
- 3/24/17: Pt began to decline wound care
- 3/25/17: Incontinent episodes with hospice nursing assistants coming several times daily to help with changing patient and bathing (in combination with CTC staff)
- 3/27/17: patient asked to stop all tube feeds, reported pain to be completely controlled

Nearing the end...

- 3/29/17: Galen asked for a chocolate bar which case manager bought at the convenience store next door
- 3/30/17: passed away peacefully with CTC nursing by his side at 0230.

In Memoriam: 12-21-1954 to 3-30-2017





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