



MY MISSION TO CARRY OUT PALLIATIVE CARE

Chang Chiung-Wen, Palliative Care Home-visit RN, Taichung Tzu Chi Hospital

“Doctor, please, help grandma! What can I do? She is not responding.”

That was 15 years ago after I graduated from the nursing college for a few years. Grandma once said she might not live to see my graduation...

Doctor confirmed an inoperable tumor in her liver. Family members gathered around her, stone white and wordless. The air was stagnant and cold. I felt a sudden pain in my heart when the news broke. Grandma motherly pictures started flushing through my mind like a video camcorder. I crawled besides her bed calling her name, tears flowing down my cheek, I felt helpless. Even though I am a nurse, yet I can do nothing about it. I need answers, “What can I do?”

Hospice – the Last Piece of Puzzle to Life

That was my first experience for the loss of a loved one. My sadness and sorrow was never healed, yet buried deep inside in the unknown. I do not know where grandma had gone. Sometimes when I am home, the opening of the old door

reminds me of grandma. When lightning strikes, whenever I fall, and in my dreams, grandma is there with a smiling face.

Life is impermanent, that piece of puzzle stays with me to hospice care. I saw the life and death in hospice, just like Dharma Master Cheng Yen said, “We don’t own our body, we only have the right to use it.” Every child, adult, and elderly, has a one way ticket to the final destination. No matter how famous you are, whether you are a CEO, an ordinary citizen or a homeless person, there is a stop to get off the train for another journey in life.

I grew up with my patients, participated with their struggles; their sadness, sorrow, tears, emotion, dreams, and new chapters in life, new beginnings...

I reinvented myself, and found the key to open the sorrow buried inside me. I learned to accept my shortcomings, the imperfections, and love myself as a person, to take good care of her.

Hospice Home Care – End of Life

With over six years of hospice care experience, I became involved with home hospice care in 2011, delivering hospice home care as an outreach service.

“Dear Miss Chang, do you know what a miracle is?”





Half year into the program, I was asked that question by a 42 year-old lung cancer patient, struggling with cough while talking. While I was contemplating, he cleared his throat with water and continued, “For me, when I see the sun rises every day that is a miracle. If I go down, my whole family will go down also. I have two six-year olds and I am the only provider. My wife has never worked before and she is too afraid to even knock on neighbor doors. My parents are healthy and I can’t let them worry about me. I have to fight...”

I was planning to bring up intubation, I swallowed it hard and instead listened to him cry. I was speechless. His condition worsened at night. With his permission, we did an intubation procedure on him and escorted him to the ICU. His kidney was failing and we performed a kidney dialysis. Soon after, he passed away leaving the family behind.

This case was referred to hospice end-of-life care probably too late. Patient and family were undergoing the struggle, both physically and mentally. In order for us to prepare the family and ease the patient to final hospice care, we did not have enough time to do it. Because of this, we have to extend our mission of good hospice care to the surrounding perimeters, out of the hospice safety zone.

Over time, we encountered suspecting patients and family at the beginning, and gang members threatening for prognosis improvement on patients. Our Taichung Tzu Chi Hospital Hospice Care Division is designed to help terminally ill patients with good medical care and mental support, pain assessment and control, and educational meetings with family members for consensus decision making. We are proactive in raising the awareness of patients' rights, reducing conflicts and common misunderstandings, and eventually benefiting all with our service.

Seize the Moment to End-of-Life Care

"I decide to sign the DNR waiver form. I hope to have a green burial. There is nothing we can carry away after death; our body decomposes so there is nothing I can't give away. I want to live every single day until the end without any regret..."

She was lying on the bed and leaning toward the window, with sunrays shining upon the face of our volunteer, nicknamed "Sunflower", her eyes filled with crystal clear determination...

After Sunflower contracted cancer, she motivated many patients to reach out to serve the elderly. She touched many hearts with her warmth. During her final days with our accompanying, we trust each other and believe hospice care patients should not be bound to the beds waiting. We held hands, feeling the warmth from each other, sharing our life stories, and praying in our hearts that we can affect many others. May this act of love be spread to many more into the future.

Hospice care is not passive; rather, it is active to fulfill a good ending. I love this mission of care and the inter-relationship, the sincerity with warmth and emotion, and the accompanying of patients and family at their lowest point. We carry them with respect and dignity. That is the attractive values of good hospice care.