

Validation	Evaluation	Observation	Intervention	Outcome	Validation
<p>6. Coordination among Family or Relatives Integration of consciousness on care policy and the last moment of life based on the patient and change of family relationship.</p>	<p><input type="checkbox"/> Check whether patient and family to share the same feelings toward death</p> <p><input type="checkbox"/> Family participation in care</p> <p><input type="checkbox"/> Family's willingness of caregiving</p> <p><input type="checkbox"/> Communication between patient and family</p> <p><input type="checkbox"/> Relation between patient and family, and presence of key person</p> <p><input type="checkbox"/> Family role in relation between patient and family</p> <p><input type="checkbox"/> Assess caregiver's intention about care (by oneself or ask professionals)</p> <p><input type="checkbox"/> Observation/Judgment of care knowledge for family</p> <p><input type="checkbox"/> Health condition of caregiver</p> <p><input type="checkbox"/> Physical burden of caregiver</p> <p><input type="checkbox"/> Psychological burden of caregiver</p>	<p><input type="checkbox"/> Communication with family and patient</p> <p><input type="checkbox"/> Family role in relation between patient and family</p> <p><input type="checkbox"/> Care burden</p> <p><input type="checkbox"/> Refuse to care</p> <p><input type="checkbox"/> Lack of care knowledge</p>	<p><input type="checkbox"/> Support family and relatives to share common view on death.</p> <p><input type="checkbox"/> Support family role in relation between patient and family</p> <p><input type="checkbox"/> Listen to the caregiver's complaint</p> <p><input type="checkbox"/> Possible replacement of caregiver if necessary</p> <p><input type="checkbox"/> Utilization of practical use of social resources if necessary</p> <p><input type="checkbox"/> Instruction of effective care-giving methods</p>	<p><input type="checkbox"/> The patient and family can share the same feeling about death</p> <p><input type="checkbox"/> The patient can take a role of family members to the last moment</p> <p><input type="checkbox"/> Physical and psychological burdens are reduced and stable care-giving can be</p> <p><input type="checkbox"/> Caregiver can understand method of necessary care and medical treatment.</p>	<p>7. Support for Loss, Grief and Bereavement Share the sorrow expressed in various way with the dying patient and family and support them to establish a new relationship.</p> <p><input type="checkbox"/> Grasp of the situation when losing through death</p> <p><input type="checkbox"/> A thought of a bereaved family</p> <p><input type="checkbox"/> Existence of regret</p> <p><input type="checkbox"/> Family's expression</p> <p><input type="checkbox"/> Whether it has on the clothes which patient or a</p>
<p>8. Support for Fundamental Needs Support for daily living activities, especially due to physical dysfunction.</p>	<p><input type="checkbox"/> Observation of comfortable conditions.</p> <p><input type="checkbox"/> State of keeping client's body clean, support of keeping clean</p> <p><input type="checkbox"/> Observation of necessity of changing bed clothes</p> <p><input type="checkbox"/> Observation of excretion</p>	<p><input type="checkbox"/> Risk of fall</p> <p><input type="checkbox"/> Lack of comfortable life</p> <p><input type="checkbox"/> Lack of selfcare</p>	<p><input type="checkbox"/> Understand/listen to what patient wants in life.</p> <p><input type="checkbox"/> Education/Instruction of caregiving</p> <p><input type="checkbox"/> Oral care</p> <p><input type="checkbox"/> State of keeping client's body clean, support of keeping clean, and education</p>	<p><input type="checkbox"/> Patient felt comfortable.</p> <p><input type="checkbox"/> Caregiver can provide correct care.</p>	<p>Number of Rehospitalized:</p>
<p>Number of vist :</p>					

Terminal Care Format for the elderly with cancer (Separation-by-Death)

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Support target by period :

It attends at death and can check with the death which occurs dignified. A family can lose a patient through death peacefully.

A bereaved family's comfort and healthy management
Assistance of recovery from grief

- 1 The purpose of examining Variance is to confirm the consistency between Assessment care action and desired outcome. Analysis and examination of the relation between assessment care action and desired outcome is for standardization.
- 2 Choose the reason and write a variance code number (a number followed by reason) in the answer section.
- 3 Fill in the blank in red if there's a lack of standard assessment or care action.

Variance code: The reason for

1. Client's physical or mental condition.
2. Client's refusal or unwillingness.
3. Client family member's refusal or unwillingness.
4. Lack of staff.
5. Staff's incompetence.
6. Problem about teamwork.
7. Functional problem about staff involved.
8. Lack of social capital.
9. Quality problem about social capital.
10. Others
11. Non-applicable

Care Categories	Assessment	Ground of Assessment	Care Service	Variance	Expected Outcomes	Variance
1. Support for Loss, Grief and Bereavement Share the sorrow expressed in various way with the dying patient and family and support them to establish a new relationship.	<input type="checkbox"/> Grasp of a family's situation after one month and two years dying <input type="checkbox"/> Grasp of the process of grief <input type="checkbox"/> Grasp of a way which receives a family's death when passing at the house and to respond to <input type="checkbox"/> Grasp of the situation when losing through death <input type="checkbox"/> A thought of a bereaved family <input type="checkbox"/> Existence of regret <input type="checkbox"/> Observation of unsolved grief <input type="checkbox"/> The disposal after death is whether to have met a family's hope. <input type="checkbox"/> A family's physical assessment <input type="checkbox"/> Assessment of a life situation <input type="checkbox"/> A care team checks how the case is caught.	<input type="checkbox"/> Loss <input type="checkbox"/> Grief <input type="checkbox"/> Bereavement <input type="checkbox"/> Family's satisfaction <input type="checkbox"/> Family's grief <input type="checkbox"/> Physical problem <input type="checkbox"/> Psychological problem	<input type="checkbox"/> A thought is pulled out <input type="checkbox"/> correct if it is wrong recognition <input type="checkbox"/> Make contact with family after patient death. <input type="checkbox"/> Tell the family "you did a great job"		<input type="checkbox"/> What satisfying separation by death was able to carry out is recognized. <input type="checkbox"/> Death is overcome, and a family can regain his footing and can return to a life. <input type="checkbox"/> Neither a moral target nor a body target has big abnormalities.	
			<input type="checkbox"/> Enforcement of Death-Conference by the Care Team		<input type="checkbox"/> From a case, unification of consciousness within a care team and strengthening of cooperation can be performed.	

Number of visit in grief care :