

# 2023 Forum on Aging in Rural Oregon



# End-of-Life Doulas in Rural Oregon: Improved Support for Living with Advanced Illness

Elizabeth Johnson, MA and Erin Collins, MN RN CHPN
The Peaceful Presence Project







# End-of-life Doulas in Rural Oregon: improved support for living with advanced illness

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## Learning objectives

At the end of this presentation, participants will be able to:

- 1. Describe the role of the end-of-life doula.
- 2. Differentiate between medical and non-medical support needs at the end-of-life.
- 3. Recognize how community-embedded support improves end-of-life care for rural Oregonians.



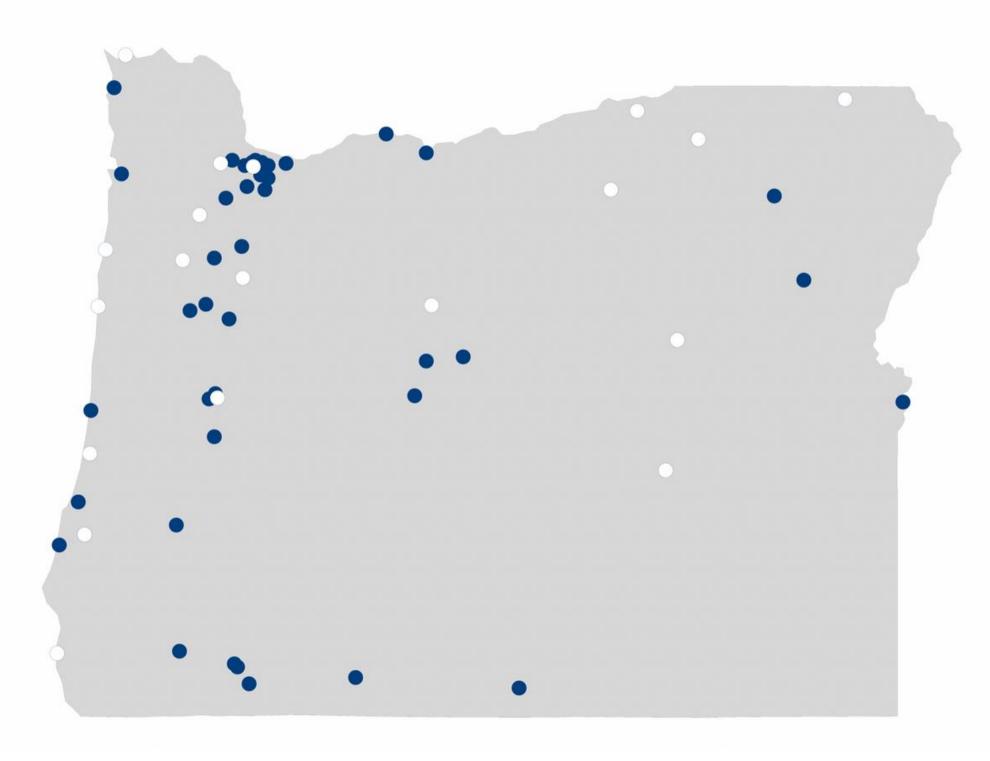


We reimagine and transform the way communities talk about, plan for and experience the last stage of life.

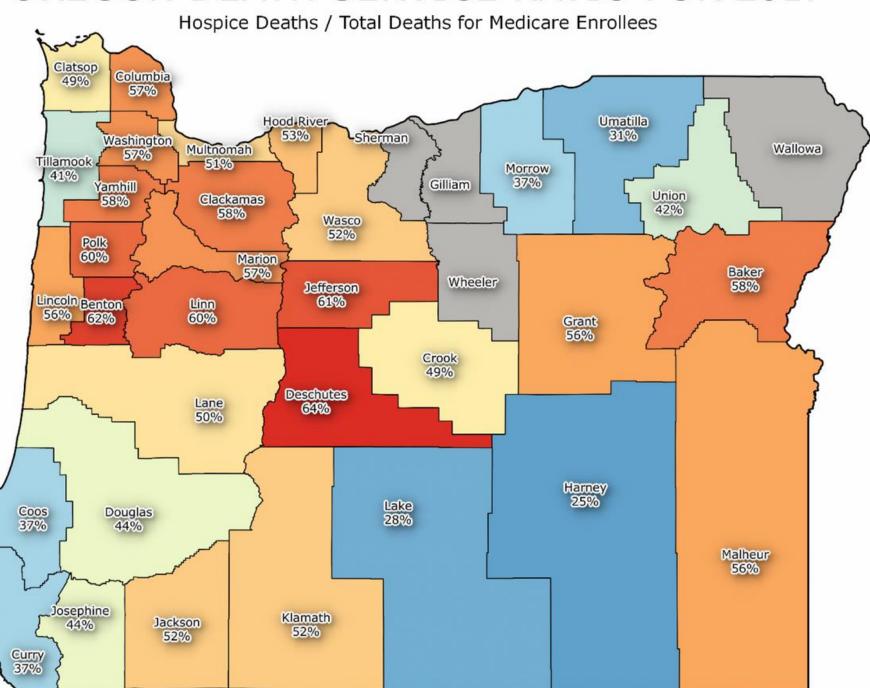
Vision: A culture in which every community member receives compassionate, equitable support through the end of life.

# End of Life Care in Oregon

Figure 2. Availability of Hospital Palliative Care in Oregon



#### OREGON DEATH SERVICE RATIO FOR 2017



### What is Palliative Care?

#### Palliative care:

- Helps people with serious illness stay at home rather than having to go to the ER or the hospital.
- Reduces physical discomfort, improves quality of life, and makes living with a serious illness easier.
- Both for the person and those who help care for them.

Hospice provides this same whole-person care after someone chooses to forego further treatment for their illness.



## Domains of Palliative Care



# Compassionate Communities Model of Care

Compassionate Communities widen the circle of caring and provide much-needed support to patients and caregivers facing serious illness and death.

- Conversations around death, dying, and bereavement normalized and productive.
- Palliative care repositioned to support community-based health and social care for people at the end of life and their families.
- Strong networks of care and resiliency

### 95% RULE

Only 5% of a dying person's time is spent face to face with a medical professional

- -What are we as a community doing with the other 95% of the time?
- -What quality of support are people receiving, and from whom?
- -Is it sufficient?



"My Grandmother was born and raised in Wallowa County; when she needed hospice, the visiting nurse service was the only thing available— and that was only during regular business hours.

So to receive good end of life care, we had to move her away to Union County where she could reside in an assisted living facility and receive hospice. That's 35 miles away.

For other seniors who don't have family nearby, I really think doulas can offer the needed support"



### End of Life Doulas



- End-of-Life Doulas [EOLDs] are non-medical companions to the dying and their families.
- EOLDs complement other services that a dying person and their family may be receiving, including hospice and/or palliative care.
- EOLDs provide a wide range of holistic life support services to address:

Physical

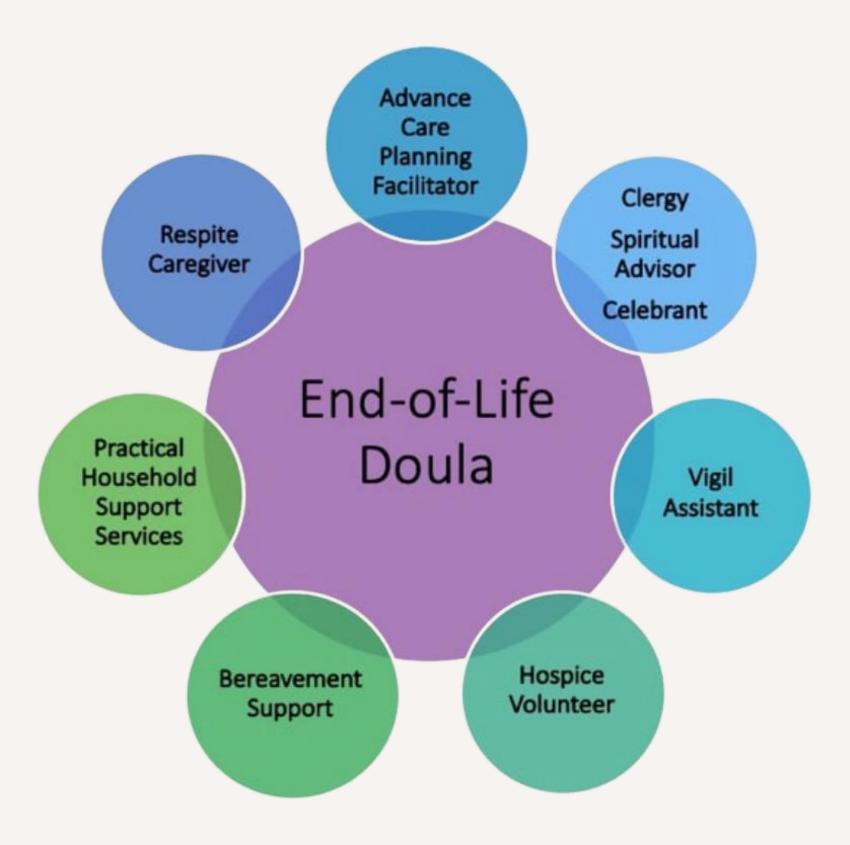
Emotional

Spiritual

**Practical** 

## Doula Model of Care

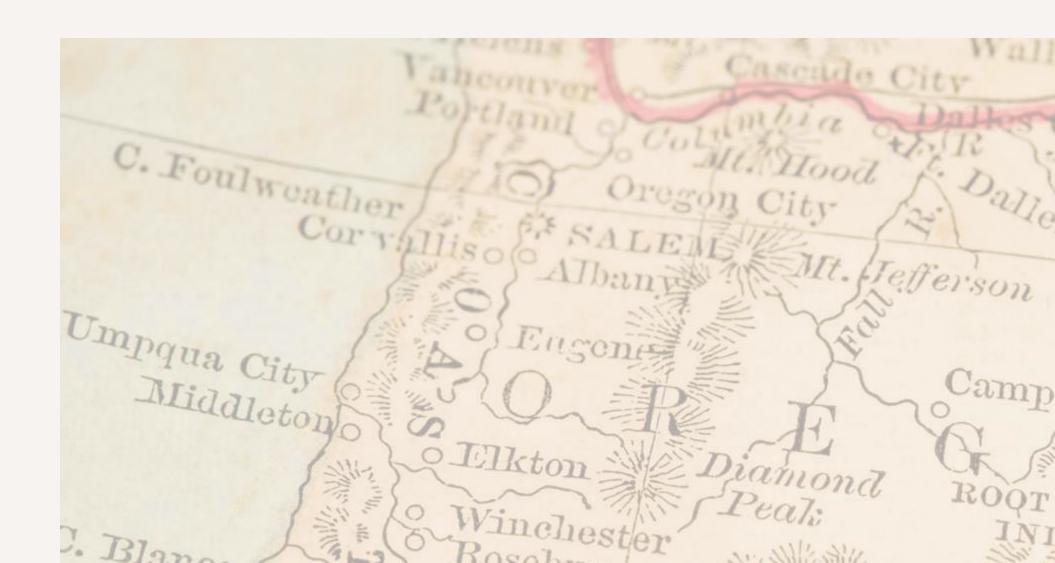
Helping to fill unmet needs



# Oregon-Based Rural End of Life Doula Training

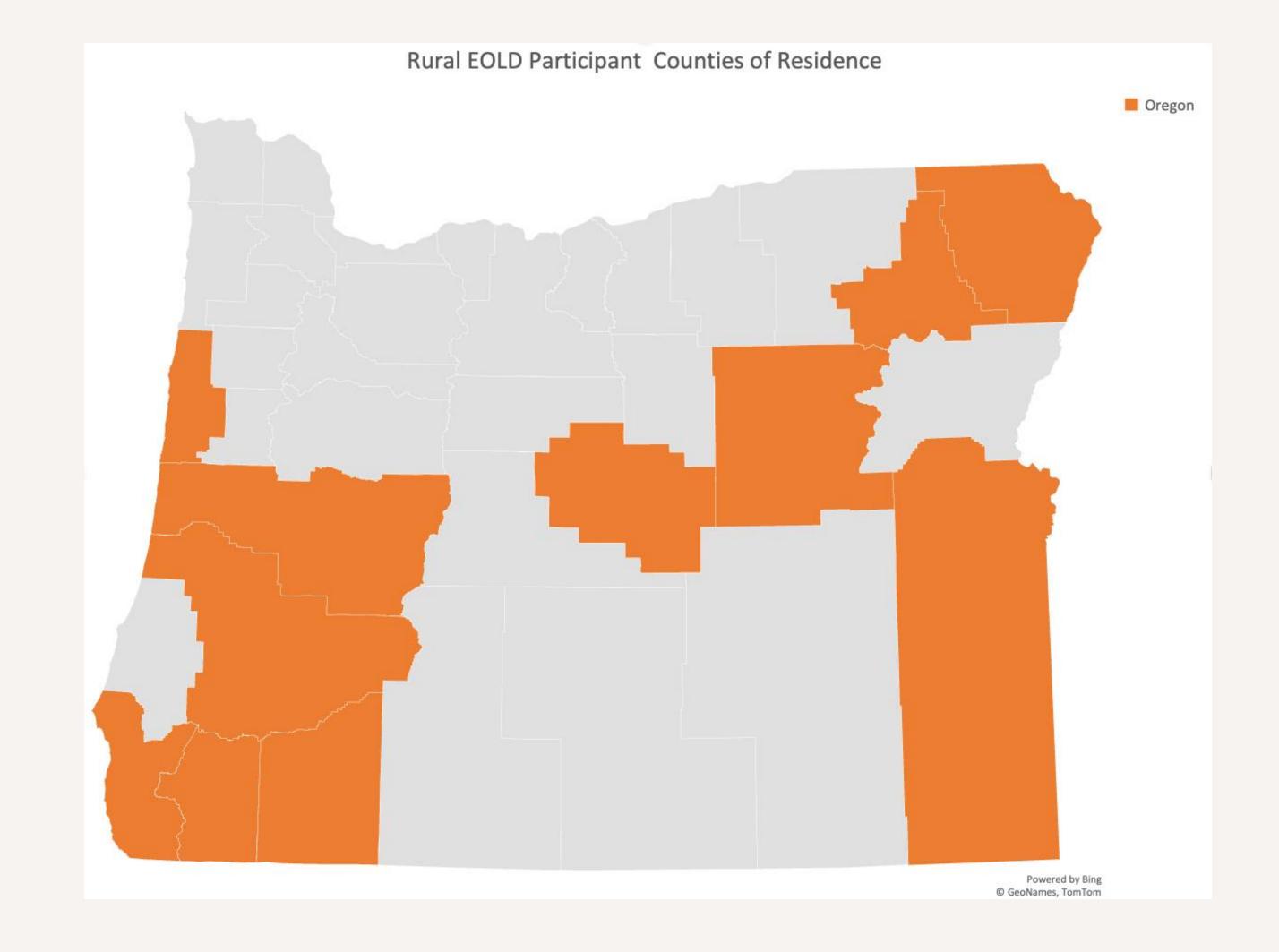
#### **Process:**

- Conducted basic needs assessment
- Secured Funding: Braemar Charitable Trust
  - 12 students
  - 8 weeks of online learning
  - 5 hr in-person immersive workshop
- Recruitment via rural networks
- 75 applicants from across rural Oregon

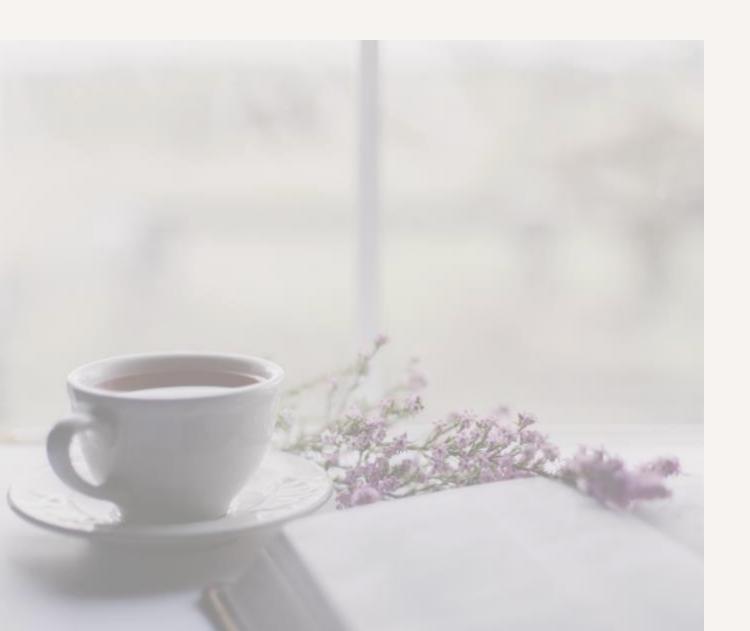


Wallowa
Grant
Union
Malheur
Crook
Douglas
Lane
Lincoln
Jackson
Josephine

Curry



# **Training Details**



- 8 week training: March 1 to April 26
- 6 to 10 hours of independent learning per week
- Four, 1.5 hr zoom calls & final in-person workshop in Bend, Oregon

#### Primary areas of focus:

- Training to End of Life Doula model of care
- Networking between trainees across Oregon
- Cultivating plan for providing support in home communities

# Training Curriculum

- Foundations: Relationship with Self, Others and Systems
- Doula Model of Care:
   Communication, ethics, knowledge set and professionalism
- Doula Skill Set:
  - Grief
  - Family dynamics
  - Legacy and life-review
  - Other supportive interventions

- Inclusive care & cultural humility
- Self stewardship and professional boundaries
- Planning for Care Advance care planning and end of life planning
- Community: Resources, networking and establishing a practice

# Getting to know each other in person:

"we come from so many differencesgeographic locations, different ages and experiences— yet our humanity has been confirmed— we came together under our shared commonality"



# Experiential learning:

"This taught me how to be able to connect on shared experiences, rather than on prescriptions or solutions"











# **Project Goals**

Widening the circle of caring for patients and caregivers

Identifying roles and individuals who can embed skillset in existing professions or capacities

Expanding cohesive presence of informed community members who can support, especially in resource-limited settings

Ultimate Goal: A more death literate Oregon



### Rural Oregon County Mapping

Home

Statewide Resources

Glossary of Terms

Crook County

Douglas County

Harney County

Jefferson County

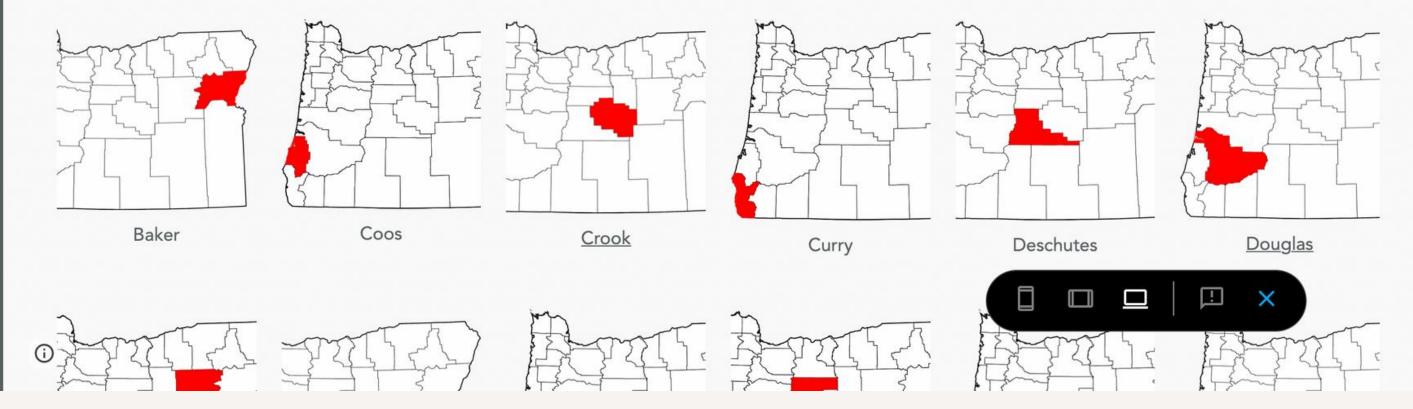
Lane County

Wheeler County

### End-of-Life (EOL) Friendly Criteria for Communities:

- 1. Community supports educational events about the end-of-life
- 2. Multiple care options are available for aging and dying patients
- 3. Hospitals offer palliative care to patients
- 4. Funeral and burial options are available within the community
- 5. Majority of adults have been given the opportunity to have an Advance Care Planning conversation
- 6. Local clinicians have been trained to have end-of-life conversations with their patients

## Rural Oregon EOL Mapping

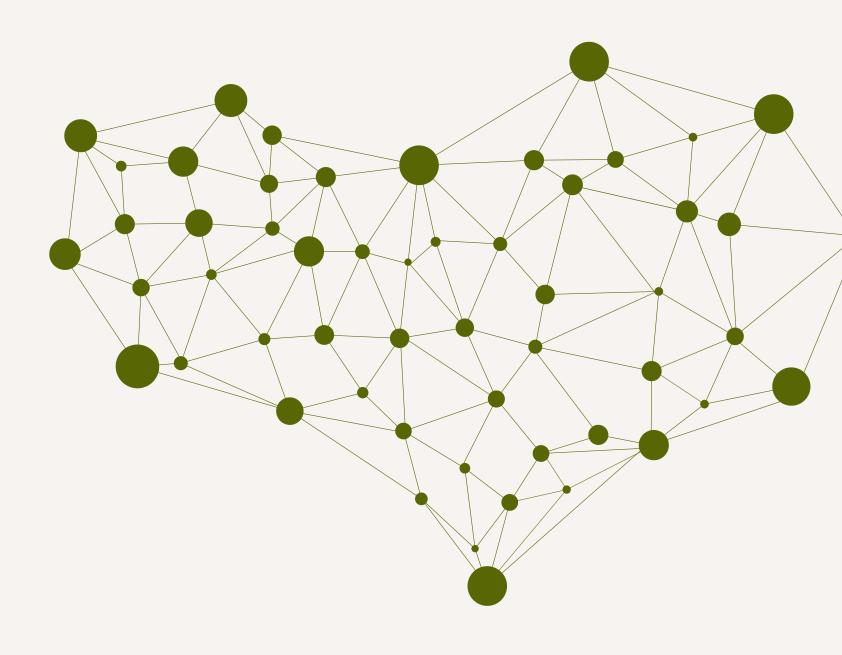


### Statewide Network for Serious Illness Care

- Peer to peer networks established in each county
- Ongoing mentorship and support to encourage best practices
- Referrals and directory for EOL care practitioners

#### Education and training opportunities for:

- Community Health Workers
- Community-based volunteers (OABHI model)
- Professional end of life doulas



# CHW Education Opportunities

Palliative Care Continuing Education Fall 2023 Oregon State University

> 12 CEUs 4 weeks/ 3 hours per week

- Comprehensive understanding of serious illness care
- 8 Domains of Palliative Care
- Practical support and communication skills
- Advance Care Planning
- Community Stewardship

contact: erin@thepeacefulpresenceproject.org to be notified about enrollment opening



Scholarships available



# CHW Education Opportunities

End of Life Doula Training for Rural CHWs September-November 2023 8 weeks, 6-10 hrs per week

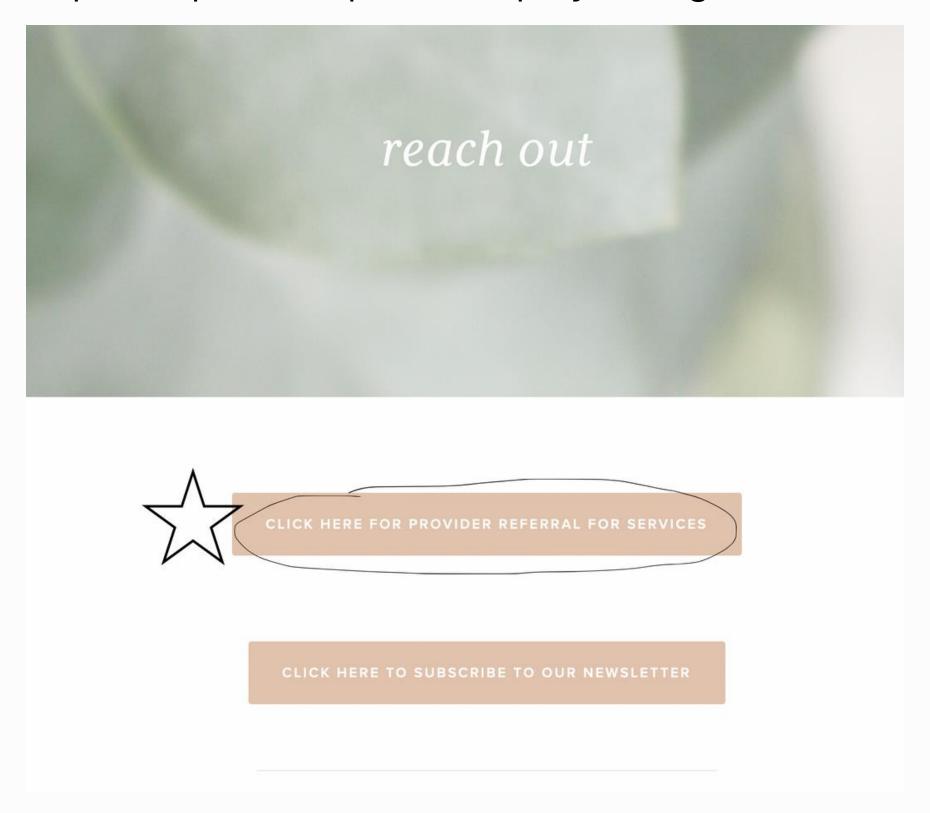
- Relationship with Self, Others and Systems of End of Life Care
- Companioning Skills: active listening, emotional support, vigil support
- Family dynamics, Grief and Loss
- Ritual, Ceremony and Celebration
- Advance Care Planning, End of Life Planning
- Self-sustainability
- Community Outreach and business development



contact: janessa@oregonclho.org to enroll Tuition is subsidized by Healthy Rural Oregon Program

# **EOL** Doula referrals

http://thepeacefulpresenceproject.org/contact



# We invite you to collaborate

## Let's make Oregon a model Compassionate Communities State



### Get in touch with us

- www.thepeacefulpresenceproject.org
- info@thepeacefulpresenceproject.org
- 541-647-8636



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# Thank you!



Part of the CareOregon Family









