# The Comfort Care Home & Mercy Doula Training Program: Giving Individuals The Ability To Die With Dignity

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#### **Comfort Care Home**

Palliative care embraces the principle that care for the dying must be equitable and accessible to all, and will deliver care based on the expressed value of most Americans to die at home. The ability to be in a home, where palliative care can take place, is lacking for many marginalized and disenfranchised people, including the mentally ill, the homeless, the frail elderly living alone, and others with limited social structure. When these people are eligible for hospice care, the barrier to receiving this care is that they lack the social structure for caring in their own home or in a home in their community. Erie County Medical Center (ECMC) sees many of these patients, as a safety net hospital that is also a behavioral health center. ECMC is creating an alternative to institutional care that can fill this large gap for our patients. This gap is being filled by the creation of a comfort care home for the dying- a community based home, with care given by volunteers from the community. This community home will care for 2 people, as they die, in a home that is supported with volunteers, many trained as mercy doulas.



## Reflections

Those who do not know any better,
Read about the latest theories and techniques.
In doing so, they fill their consciousness.
Thus, they have no room for the dying.

Those who know better
Discard theories and techniques.
In doing so, they leave space in their consciousness.
Thus, they have some room for the dying.

The more space you have,
The more welcome the dying will feel.

Do not impose.

Simply repose.

Repose with open arms.

The Tao of Dying ~Doug Smith

#### **Potential Implications**

Our hope is to continue to engage local universities to provide this training as part of their community service requirement for students, specifically medical students. The success of this project will be evaluated and measured by the Gold Humanism Society Chapter at the University at Buffalo Medical School. Each medical student volunteer will complete a pre-test survey as he/she begins the Doula experience. The pre-test survey instrument will measure each volunteer's perception of death and dying and level of confidence in working with dying patients. Upon the conclusion of the Doula experience, medical student volunteers will participate in a post-test survey which will elicit feedback about their perceptions of the experience, new sensitivity it has given them and changes in their level of confidence in working with dying patients, and insight about how the Doula experience may influence their future approach to and practice with dying patients.

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#### Mercy Doula Training Program

Each day in our community, there are individuals who have either outlived or don't have an established network of family or friends who may otherwise spend time with the dying person. These people are in desperate need of a companion to accompany them on their journey from this life. A study conducted at ECMC demonstrates that a significant number of patients die alone either in the hospital or at Terrace View, ECMC's long term care facility. These patients with irreversible illness face the end of life in isolation because they are often homeless, mentally ill, and/or lack caring support from family or friends.

In response to this need, Erie County Medical Center (ECMC) has launched a pilot project to establish Western New York's first Mercy Doula Program with a specific interest in training future healthcare providers; this includes medical, nursing, and social work students. This project has been designed to recruit volunteers to provide dying patients with support services so that they are not alone when facing the end of life. A small number of medical students and community volunteers have been specially trained as "mercy doulas" who ease the dying patient's sense of isolation by providing him/her with emotional and social support. Meaningful connections have been made that touch the lives of both the dying patients and the volunteers. We have seen firsthand that these relationships have made a significant difference to patients facing the end of life.

### Participants Share Their Thoughts

"I liked how personal it got. I didn't expect to be asked about my own beliefs and expectations of the dying process. It was interesting to listen to what everyone had to share."

"I liked the group participation.

Talking about sensitive subjects was nice.

Good sense of community."