

These Guidelines emphasize the specialized communication skills and ethical considerations that are associated with feline hospice and palliative care, along with offering a framework to utilize when working with a hospice and palliative care patient. Treatment recommendations should focus on providing comfort, using feline pain management best-practices, and maintaining quality of life (QOL).

### What is Hospice and Palliative Care?

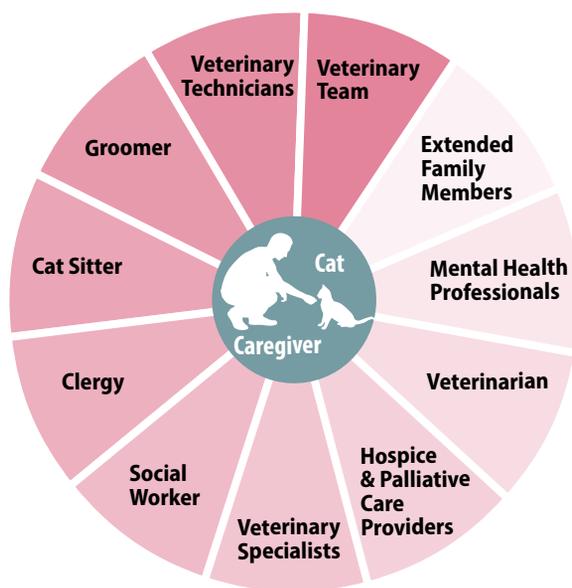
**Hospice Care:** is provided to cats when they are diagnosed with a life-limiting illness and medical goals shift from curing a condition to focusing on a cat's comfort and QOL.

**Palliative Care:** is care provided to patients with both curable and incurable diseases, focusing on relief from symptoms and providing comfort care.

### Unit of Care

Expanding from the feline patient being the sole focus of care, the unit of care includes caregivers and their needs. Utilizing this approach also pairs veterinary professionals with social workers, charities, and mental health professionals to facilitate open communication about treatment preferences and goals of care.

Everyone in the unit of care works collaboratively.



### Critical Communication Strategy for Caregivers

1

Create an appropriate setting which includes a private space with no interruptions. Do not rush, be observant, and ask the appropriate questions during the initial consultation.

2

Get the caregiver's perspective (e.g., what do they know already and how much do they want to know?).

3

Get permission to share information with them.

4

Be empathetic, direct, and straightforward with compassionate transparency; use open-ended questions.

5

Conclude by summarizing what was discussed, addressing questions/concerns that remain, and acknowledging the plan of care with the next steps.

### Ethical Considerations

- Contemporary application of bioethical principles in veterinary medicine considers the patients themselves. When applying bioethical principles to cats receiving end of life care, veterinary professionals accept the limitations presented by beings who cannot self-report on their own behalf while striving to achieve optimal outcomes for them, ultimately leading to minimizing pain and providing a peaceful transition.
- Respect for the cat's autonomy means considering the cat's disposition or temperament, receptiveness to interactions, willingness to take medications — essentially, the cat's willingness to participate in their own care.
- The veterinary health care team's bioethical obligations to the cat's caregiver, the care unit, and to the cat provide a lens through which to consider all the diverse aspects of hospice and palliative care. This offers a formal framework for the shared decision-making that benefits cats, caregivers, and their care units.

## Understand Communication Preferences

### Cat Caregivers:

- Value breaking down big pieces of information into manageable bite-sized “chunks.”
  - The veterinary team should check to make sure caregivers understand what is being communicated, paying attention to their body language.
- Need to feel listened to and safe to share what could be very personal information about their beliefs, family dynamics, and finances. It is essential for communication to be compassionate.
- Need empathy and to not feel judged.
- Appreciate a focus on their cat when conversing with their veterinarian.
- Tend to use the pronoun “we” to include their cat, instead of the pronoun “I.”
- Appear to be along for the ride as passengers of the visit, instead of wanting to be the drivers that direct the course.
- Appear to accept the veterinarian taking the lead, provided that the veterinarian signposts the direction of the visit.
  - When sharing information that can be upsetting for the caregiver, offering a signpost or “road map” of where the conversation is going can help caregivers know what to anticipate and feel supported.
- Appear to prioritize communication skills based on their ability in order to lessen distress, distrust, and fear so as to limit the transfer of negative emotions to their cat.
- Tend to see value in every member of the veterinary team.
  - It matters less who on the veterinary team reaches out to make contact as long as **someone** does.



### Quality of Life (QOL)

- The impact of diseases themselves and treatment-related effects both impact QOL.
- More therapeutic interventions and radical surgical procedures are now available to prolong life, but we must put the patient’s best interests first despite pressure from caregivers.
- Just because we can does not mean we should. Quality of life, rather than quantity of life, is the priority.
- Cats live in the moment and do not know that “tomorrow may be better” while going through unpleasant treatments.
- QOL assessments should focus on whether the individual feline patient has a life worth living.



### Comfort Care

- Providing comfort care for the hospice or palliative patient is a priority.
- Comfort care needs to consider the physical, emotional, and social needs of cats.
- Comfort care includes pain assessment and both acute and chronic pain control.
- Use integrative medicine modalities when appropriate.
- Addresses feline emotional health impaired by compromised physical health with pain and/or illness. This includes alterations in the cat’s physical environment and ensuring the cat’s five pillars of essential needs are met (See Hospice and Palliative Care Guidelines for more information.)
- Addresses the inappetence, nausea, thirst, breathlessness, and anxiety-fear that hospice and palliative care patients often experience.

## The Five Step Hospice and Palliative Care Plan

This process serves as a foundation to help the veterinary team implement a consistently effective hospice and palliative care treatment plan for feline patients.

**STEP 1:** Evaluation of the caregiver’s needs, beliefs, and goals for the cat and establishing budgets of care.

**STEP 2:** Education about the disease process and delivery of care.

**STEP 3:** Development of a personalized plan for the cat and cat caregiver.

**STEP 4:** Application of hospice or palliative care techniques.

**STEP 5:** Emotional support during the care process and after the death of the cat.



## End of Life

The desire for death to come quickly and gently should not override the importance of allowing the caregiver(s) the time they need, and the veterinary team the opportunity to have everything in place. Additional information and resources can be found in the AAFP’s End of Life Educational Toolkit ([catvets.com/end-of-life-toolkit](https://catvets.com/end-of-life-toolkit)).