



Covenant  
Health

Palliative Institute

# Dignity in practice: Exploring a last wish program in hospice care

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**Presenters:** Matthieu Coulombe, Chaplain and Spiritual Care Practitioner, Covenant Health and Fate Hurtada, Registered Nurse, Covenant Care.

**Hosted by:** Sheila Killoran, Education Lead, Covenant Health Palliative Institute and Christy Roulstone, Covenant Health Palliative Institute



# Reminders

- This session is being recorded.
- Please do not disclose any personal health information during the session.
- Your microphones are muted. When we invite participation, please unmute yourself if you'd like to speak at that time.
- If you experience technical difficulties, please let us know in the chat.



# Last Wish

*"Make a wish your deepest heart holds and  
feel the joy as it quickly unfolds."*

# Land Acknowledgment



# Faculty/Presenter Disclosure

Presenters: Fate Hurtada & Matthieu Coulombe

- Relationships with financial sponsors:
  - Grants/Research Support: None
  - Speakers Bureau/Honoraria: None
  - Consulting Fees: None
  - Patents: None
  - Other: Employee of Covenant Care - Foyer Lacombe



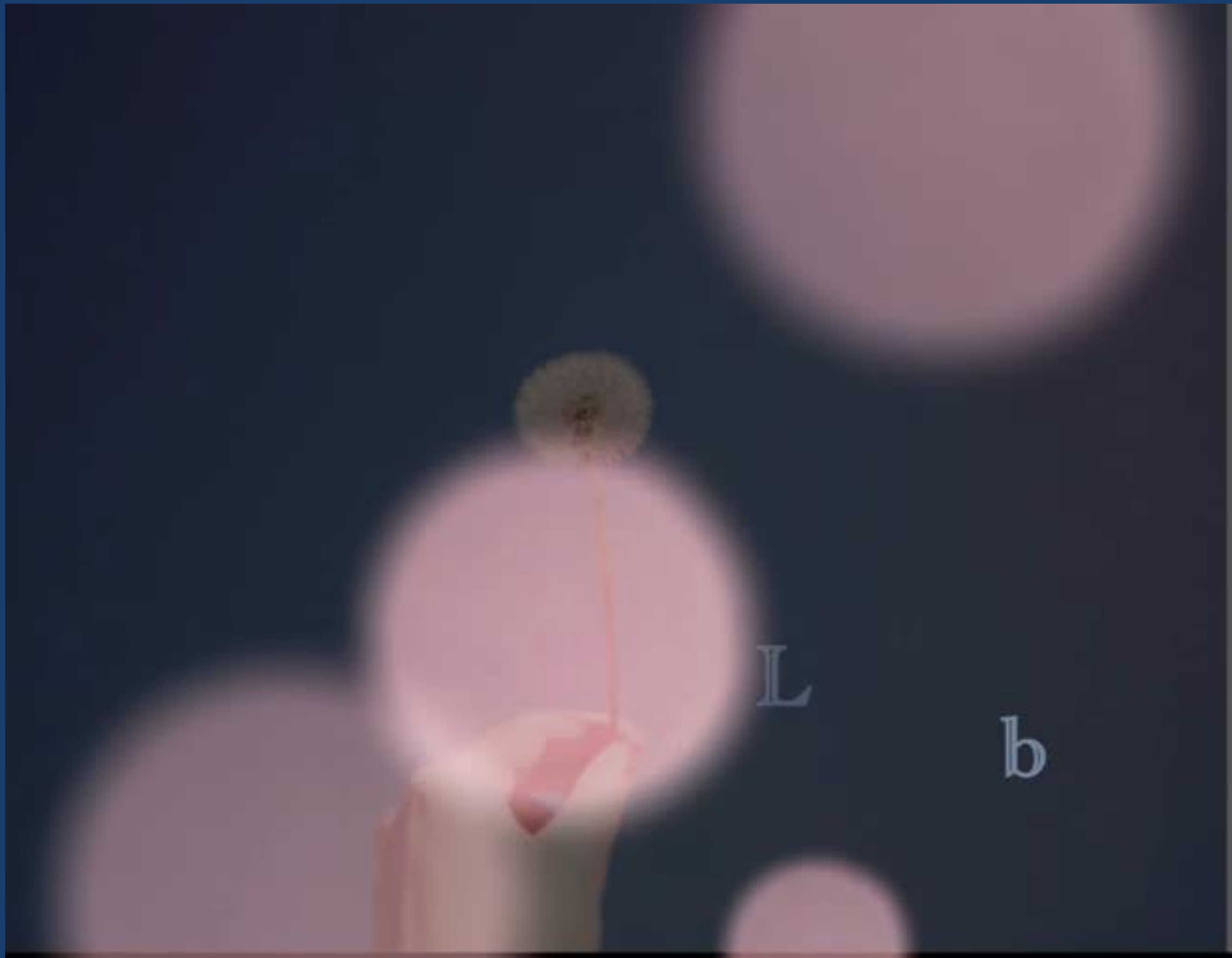
# Disclosure of Financial Support

- This program has received financial support from Covenant Foundation in the form of Comfort Care Grant to provide funds for the fulfillment of wishes.
- Potential for conflict(s) of interest:  
No conflicts of interest.



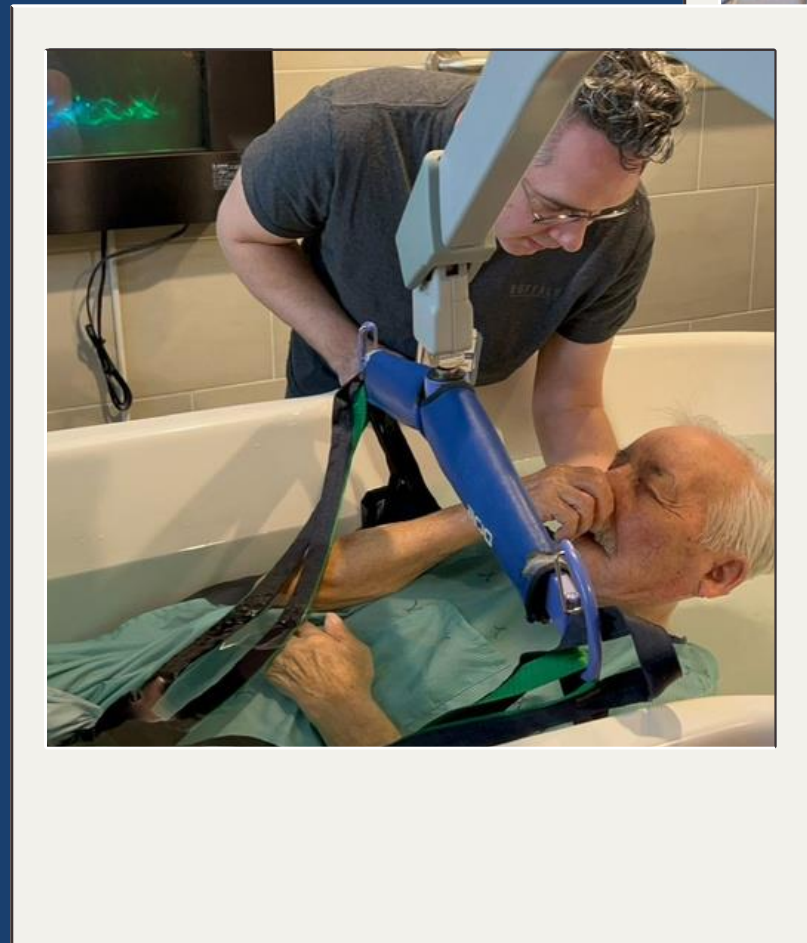
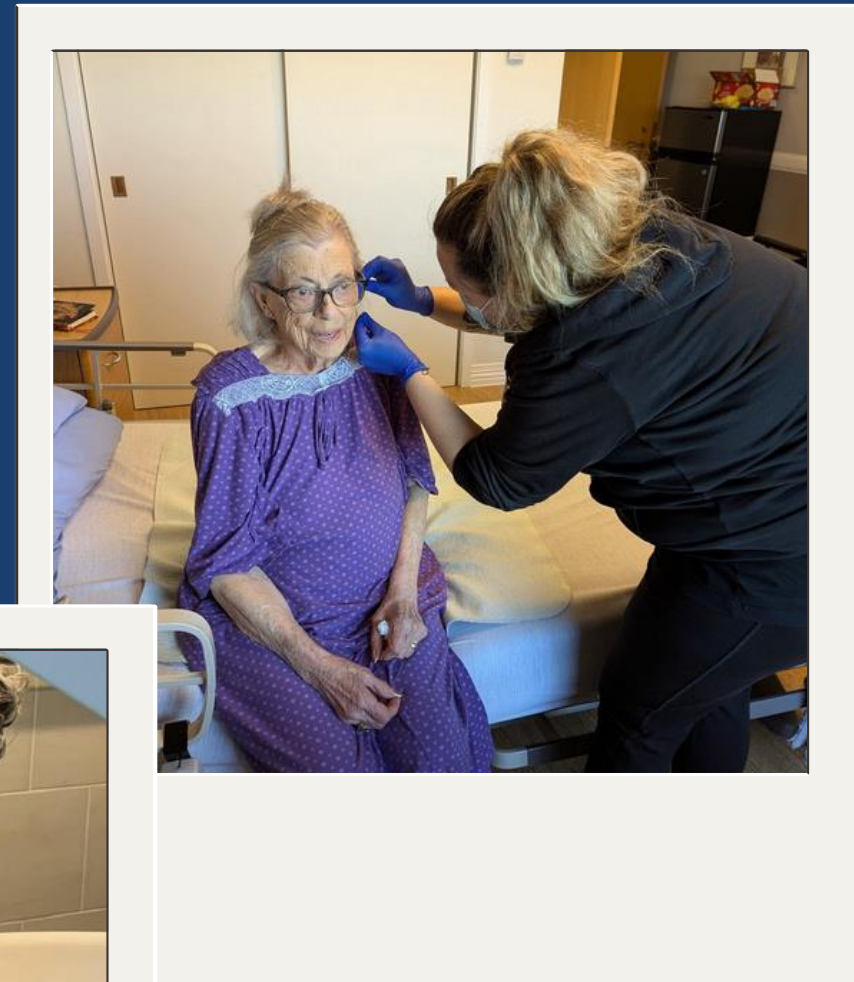






# Last Wish Program Genesis

- Began with a simple request from a hospice resident.
- Started a process of recognizing how this compassionate question could be offered to each hospice resident.



# Last Wish Program Overview

## Purpose

- Fulfill the last wishes of hospice patients to enhance their quality of life and bring joy and peace in their final days.
- Connected to the concept of dignity within care.

“For anyone privileged to look after patients at whatever stage of the life cycle, the duty to uphold, protect, and restore the dignity of those who seek our care embraces the very essence of medicine.” - Harvey Chochinov<sup>1</sup>

“The essence of dignity in healthcare resides in recognizing the uniqueness of the individual, resulting in them feeling that they are seen, accepted, and embraced for who they are.” - Dr. Pam Orr<sup>2</sup>



# Last Wish Program Overview

Influenced by Compassion (Shane Sinclair)<sup>3</sup>

Last Wish program betters:

- Quality of Care
- Patient Outcomes
- Healthcare Provider Wellbeing



# Last Wish Program Team

We developed a committee for the last wish program in hospice to ensure that patient wishes are fulfilled compassionately and efficiently.

- Project lead- Fate Hurtada, RN
- Project coordinator-Morgan Filipchuk, RN
- Members at large (Staff & Volunteers)





THE

TEAM

# Funding

Funding for Last Wishes is supported by:

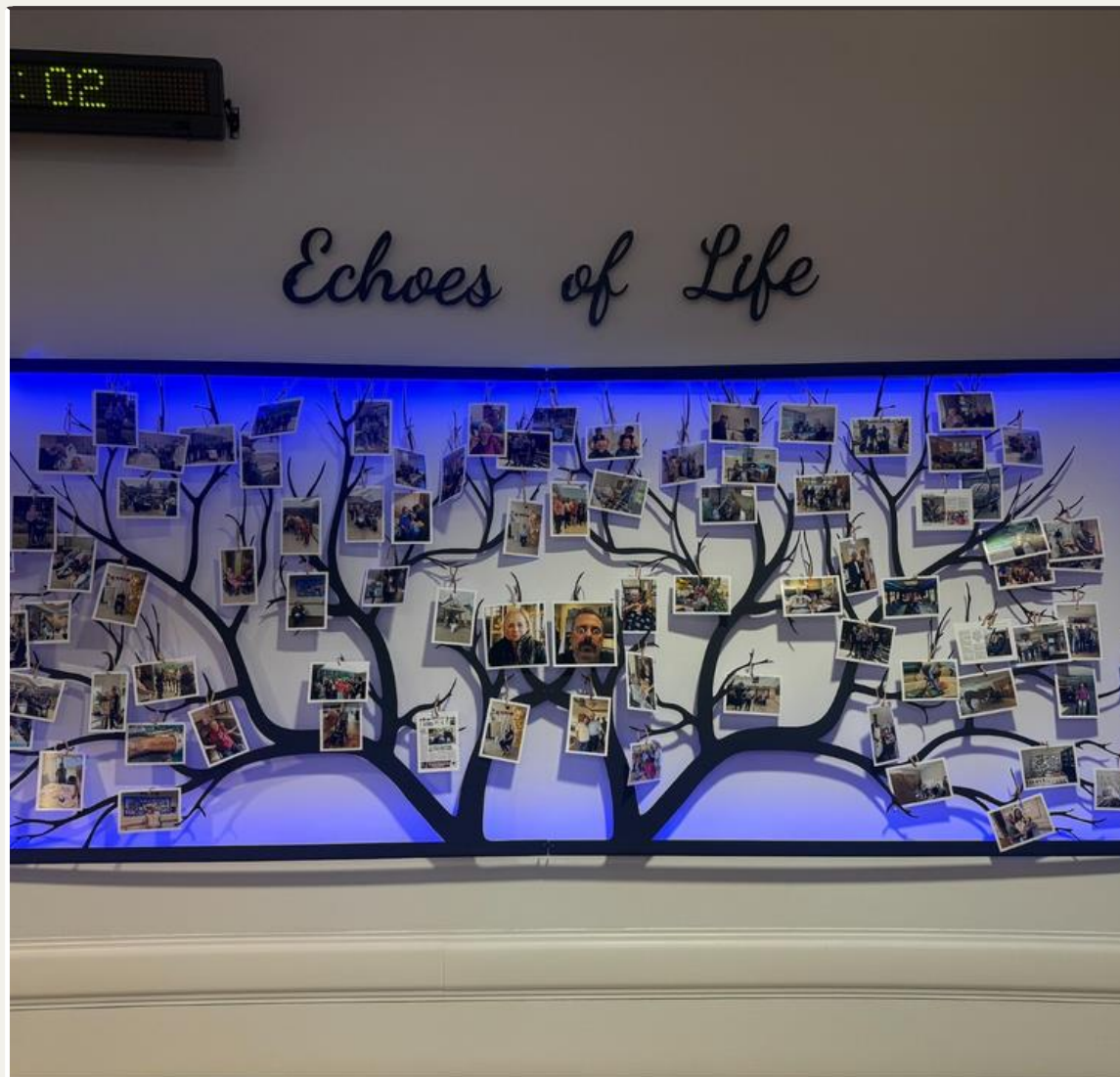
- Community involvement (Wish Wednesday)
- Sponsoring businesses
- Comfort Care Grant through Covenant Foundation
- Donations



# Last Wish Examples

## Wish Types

- Wishes can be as unique as the individual. To help people to think through the idea of a last wish, we include ideas such as experiences (family visits, spa, special meals), items (favorite books, mementos) or events (birthday celebrations, music events, living memorials, etc)



# Process

## Last Wish Process

- Information at admission- we introduce families and residents to the program.
  - Visual Inspiration
  - The goal
- Education on urgency- we operate under the philosophy that "Today is the best you're going to be - Dr. Dixon"
- Exploring wish types- Simple joys, adventure, connection
  - One page application form - The wish, the why and special requests
- No guarantees on a wish fulfillment but clear communication along the journey
- We then post in the St. Albert Facebook group every Wednesday for what we call 'Wishful Wednesday'



# Process

## Last Wish Implementation

1. Last Wish request received by care team
2. Committee lead notified
3. Committee lead shares wish request with committee through WhatsApp  
(Patient identifiers removed)

1. Committee members work towards fulfilling wish
2. Resident and family notified of progress



# Recognition

- Last Wish Certificates
- Wish Wednesday Updates



# Impact on Residents

- Residents gain meaning, hope, and purpose in their end of life journey.
- Residents experience increased peace, contentment, and joy through the Last Wish (preparation and experience).
- Assists with residents' ability to express their ongoing grief through meaningful moments of connection.
- Provides residents a sense of power & choice in their end of life journey (restores autonomy).
- Enhances residents' dignity



# Impact on Family & Friends

- Decreases anxiety.
- Decreases moments of anger/mistrust of the healthcare system.
- Assists them to cope with anticipatory grief process.
- Provides significant moments of connection that aids in the grieving journey.
- Provides meaningful memories.
- Intentionally connects them to their loved one.
- Positive improvement on ESAS score.



# Impact on Staff

- Decreases healthcare burnout & fatigue.
- Increases workplace satisfaction.
- Enhances a sense of meaning, purpose, and fulfillment in their healthcare role.
- Increases collaboration among shifts and fosters unity.
- Inspires team to reach for greater quality of care.
- Improves relationship with residents and their support networks.
- Bring joy into the facility.



# Impact on Volunteers & Community

- Demystify end of life/palliative care in the great community. Helps to see EOL care in a different light.
- Promotes compassionate community.
- Inspires community donations and fulfillment/joy in assisting with a wish.
- Inspires the greater community to engage in advance care planning and important conversations.
- Reduces stigma about hospice care.



“I know that he was looking forward to us gathering. Pain meds and discomfort might have stolen his ability to fully take in the evening, or he felt more able to let go knowing we were going to keep coming together. We are thankful to Foyer Lacombe for having such a program.” Patti M.





**Jenny Maier** · 24w · by

Author · Rising contributor

I hope I'm speaking for everyone when I say I LOVE these wishes and updates. Please keep doing them!!

Reply 30



**Rebecca Krecsy-Chambers** · 10w · by

Author · All-star contributor

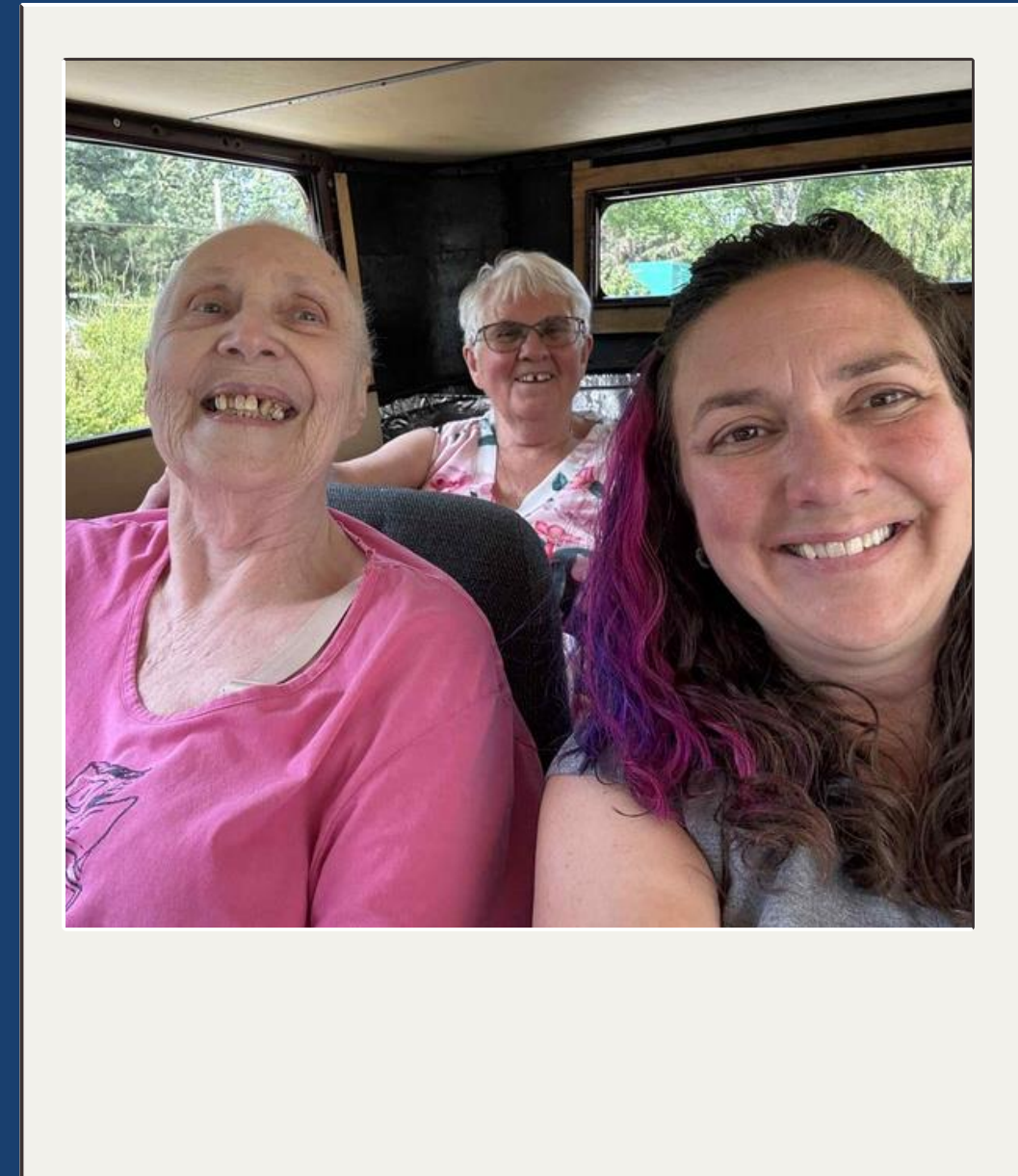
You all do such wonderful work, thank you so very much for allowing us to be a part of this

Reply 2



“I was excited to help grant a last wish, but I wasn't prepared for how deeply it would impact me. We often take something as simple as a drive for granted, yet she was soaking in every second—living in the moment, loving and savoring it. This wasn't just taking a sweet lady for a ride; it was a moment I will never forget. The two hours I spent with these lovely ladies touched my life forever.”

-Trish Wadson



# References

1. Chochinov HM. [Dignity and The Essence of Medicine: The A, B, C, and D of dignity conserving care](#). BMJ 2007; 335(7612): 184-187.
2. Dr. Pam Orr, quoted in: Chochinov HM. Dignity in Care: The human side of medicine. Oxford University Press, New York, 2023.
3. Sinclair, S. (n.d.). Compassion measure. Home. Retrieved December 5, 2025, from <https://www.compassionmeasure.com/>



# Questions



# Thank you!

# Psychosocial Spiritual Alberta CoP

See recordings and past sessions [here](#)



# Coffee Break Care Chats Podcast:

## New Episode on Pain

# Coffee Break

**CARE  CHATS**

*let's get comfortable with palliative care*

Learn about a palliative care on your coffee break!



On this mini episode you will learn about:

- Different types of pain
- Common opioid side effects
- Difference between opioid overdose and toxicity
- Some myths around pain and opioids

**LISTEN NOW**



# Evaluation



<https://redcap.albertahealthservices.ca/survey>

# Thank You!

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- Visit [Palliative Institute | Covenant Health](https://covenanthealth.ca) (covenanthealth.ca) to access all our tools and resources.
- Contact us at: [Palliative.Institute@covenanthealth.ca](mailto:Palliative.Institute@covenanthealth.ca)

