

When Someone is Dying

Palliative Care

Patient Information Leaflet

Introduction

The experience of dying is unique to each person and those important to them, therefore each patient will have their individual needs assessed.

The nurses and doctors looking after your relative or friend believe there has been a change in their condition that indicates they may be dying. We want to provide care in a way that respects their dignity, privacy and confidentiality, whilst achieving the best quality of care and comfort for the patient and those important to them.

When appropriate and with patient consent, you will be involved in discussions regarding the plan of care, with the aim that you fully understand the reasons why decisions are being made. All care and decisions will be reviewed regularly by the care team. Please feel free to ask staff any questions you have at any time.

You remain an important part of the care of your relative or friend and your involvement is welcomed. Please do not hesitate to let the staff know if you have any requests or wishes, or if you feel any needs are not being met.

You will be asked who to contact in the event of a change in your relative or friend's condition, day or night.

Please let ward staff know if there are any particular times you DO NOT wish to be contacted, for example, during the night.

Medication and Procedures

Medication will be reviewed and any medicines that are not helpful at this time will be stopped. New medication may be prescribed to help control symptoms, and will only be given if needed.

It may not be possible to give medication by mouth at this time, so medication may be given by injection or, if needed, by a pump called a syringe driver to continuously maintain comfort.

The doctors and nurses will provide comfort measures with minimum disturbance to your relative or friend. It is usually not appropriate to continue some procedures, e.g. taking blood, blood pressure and temperature monitoring.

Physical Changes

As time goes by your relative or friend may become drowsy and spend more time sleeping. Their breathing pattern may change and can become irregular and noisy. A change in position can help, and medications may be given to reduce noisy breathing. Whilst you may find this upsetting, this usually does not distress the dying person.

Over time, their sleep will become deeper and eventually they will be unable to be woken. Their skin may become pale and cool prior to death. Most people do not awaken, and die peacefully and comfortably.

Reduced Need For Food and Drink

A loss of interest and reduced desire for food and drink is part of the normal process of dying.

When a person stops eating and drinking it can be hard to accept, even when we know they are dying. Your relative or friend will be supported to eat and drink for as long as they are able and wish to do so.

Symptoms of thirst or a dry mouth at this stage usually do not indicate dehydration, but are often due to medication or breathing through the mouth. Mouth care is very important at this time. If you would like to share this care, the nurses can show you how mouth care is given.

If your relative or friend cannot take fluids by mouth, in some cases a drip may be required. This decision will be made by the medical team and will only be used if it will benefit the patient and cause them no harm. This decision will be explained to them, if possible, and to you.

Spiritual, Cultural, and Faith needs

If you or your relative or friend have spiritual, cultural or faith needs, please let the care team know. You will be given the opportunity to discuss what is important to you all at this time regarding wishes, feelings, faith beliefs and values.

Chaplaincy

The chaplaincy department and chapel area are available for everyone. If you have any particular spiritual needs, the chaplaincy department have a list of faith contacts and a chaplain can be available to meet with you to discuss any particular needs or concerns and engage in appropriate prayers and rituals.

Pre-Bereavement/Post-Bereavement

This is a very difficult time for families and if you would like extra support or information please ask to see the Bereavement Specialist Nurse who can help with emotional and practical concerns.

The Bereavement Team will contact relatives after death to advise and support them through the post bereavement processes (death certificates, registering the death etc.)

Mementoes: A lock of hair or a handprint can be a treasured bereavement memento for some people. If this is something you would like to consider, please speak the nurse in charge.

Tissue Donation: If you would like to know more about how your loved one can help others through tissue donation, please speak to the nurse in charge.

Useful Contact Information

Palliative Care Team:

- **RLI** - Tel: (01524) 516498 / (01524) 512399
- **FGH** - Tel: (01229) 403853

Chaplaincy:

- RLI - Tel: (01524) 519231
- FGH - Tel: (01229) 403715 / (01229) 465061
- WGH - Tel: (01539) 795419

Bereavement Team:

- RLI - Tel: (01524) 516071
- FGH - Tel: (01229) 406770

If you wish to send an email to any of the teams listed above, please use:

palliativemedicine.team@mbht.nhs.uk
(or non-urgent messages)

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Other formats

If you would like to receive this information in an alternative format, then please contact : 01539 795497.

Travelling to our hospitals

For the best way to plan your journey visit our website:
<http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS): 01539 795497.

Useful Contact Details

NHS 111 (for 24 hour urgent health advice): telephone 111

Your Information

If you would like to know how we use, share, disclose and secure your information and your rights of access to the information we hold about you, visit the Trust's website: <http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS) on 01539 795497.

Evidence

Details of the evidence used in writing this leaflet are available on request from: Patient Information Officer at 01524 512476.

Feedback

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment, please speak to a member of staff or contact PALS on 01539 795497.

UHMBT is a no smoking Trust. Smoking is not permitted on any of the hospital sites. You can contact the NHS North Lancashire Stop Smoking services on the number below:

NHS Quit Squad - **0800 328 6297**

If you live in Cumbria, please call **0300 013 3000** to find a local pharmacy who are offers 1-2-1 support and nicotine replacement therapy.

University Hospitals of Morecambe Bay Trust: a great place to be cared for; a great place to work.