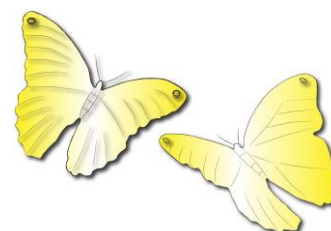


Patient information

Last days of life

Care of the dying



Information for relatives, friends and carers

Introduction

The nurses, doctors and other staff are here to help you work through your worries and concerns and to offer care and support at this sad and challenging time.

The Hospital team looking after your relative or friend have observed a change in their condition that indicates to them that your relative or friend is dying.

The dying process is unique to each person, but in the majority of cases a plan of care can be put into place to support the patient, hospital team and relatives or friends to achieve the best quality care at the end of life.

If you want to talk to the doctors and nurses caring for your relative/friend please do not hesitate to speak to them regarding any worries or concerns that you may have with the plan of care in place.

Treatment / medication

It may not be appropriate at this time to continue some tests; these may include blood tests, blood pressure or temperature monitoring.

The staff should also talk to you about maintaining your relatives or friend's comfort; this should include discussion regarding positioning in bed and mouth care.

The doctors will review the medication and stop any that are not required. Oxygen and fluid therapy will also be reviewed and may be stopped if it was felt that they were not benefiting your relative or friend.

They will prescribe new medication so that if a symptom should occur there is no delay in responding. It may not be possible to give medication by mouth at this time, so medication may be given by injection or sometimes, if needed, by a continuous infusion in a small pump called a syringe pump. (Please ask the nurses if you would like them to explain this in more detail). There is also an information leaflet available.

The nurses looking after your relative or friend will make regular assessments of his or her condition.

If you are aware that your relative or friend has expressed a wish for organ or tissue donation, please bring this to the attention of the doctors or nurses looking after them so they can contact the appropriate people.

Our Trust is a Tissue Donation Alliance Site. The families of loved ones, who pass away, may be contacted by a Specialist Nurse from NHS Blood and Transplant, shortly after the death. Donation will only take place if family are happy to proceed.

Religious, spiritual or cultural needs

Staff should determine your own wishes and those of your relatives or friends with regard to spiritual and pastoral care. The Chaplains in the hospital are an integral part of the support available and are often called upon to provide spiritual and pastoral care. This involves lending a listening ear for anyone in need, without judgement, whatever a person's faith or beliefs. Needs vary and the emphasis is on a welcome for everyone and compassionate care at all times.

Please ask your nurse if you would like the chaplaincy to visit or contact the chaplaincy team on 01284 713771 or visit the chapel, on the ground floor, where you will find the chaplaincy offices.

Coping with dying

There comes a point in most people's lives when death and dying may be contemplated, whether this is our own death or that of someone close to us, but we don't know what to expect. To help reduce the anxiety which often comes from the unknown, this leaflet describes the main, typical features of the dying process. It anticipates some of the questions you may want to ask and will hopefully encourage you to seek further help and information if required.

Observing someone who is approaching death may be a frightening experience for some people. Although the dying process is unique to each individual, there are usually some common characteristics and changes which a person may show at this time. Being alert to these changes may help both relatives, friends and staff

understand what is happening and therefore, feel better prepared to deal with these changes and support each other.

The changes which indicate that life is coming to an end fall into three main categories:

1. Reduced need for food and drink
2. Changes in breathing
3. Withdrawing from the world

Although any one of these signs can be attributed to something other than dying, bear in mind that the events described here are happening to a person whose illness is already so severe that their life is threatened.

Reduced need for food and drink

When a person stops eating and drinking, it can be hard to accept, even though we know they are dying. Initially, as a person gets weaker, the effort of eating and drinking may simply become too much, and help with feeding may be welcomed at this time. Eventually, however, there may become a time when food and drink is no longer needed. This can be distressing for carers and it may feel like a failure not to provide this, as food and drink are closely associated with nurturing. At this time, moistening the lips and mouth and applying lip salve may be all that is required. Family and friends can be involved in helping to provide this, which may bring comfort to the individual and their loved ones.

Changes in breathing

People suffering from breathlessness may be concerned they will die fighting for breath. Towards the end of life, the body becomes less active and therefore the demand for oxygen is actually reduced to a minimum. Sometimes breathing difficulties can be made worse by feeling anxious.

The knowledge that someone is close by is not only reassuring but can really help in preventing breathlessness caused by anxiety. There will be changes in breathing levels and the sounds of breathing. For most people the final moments will be peaceful and breathing may become slower or intermittent before finally stopping. It is not unusual to have long pauses between breaths when death is very close (within minutes or hours). Sometimes in the final hours of life breathing can incorporate a noisy rattle. This is due to the build-up of secretions in the chest, which the person can no longer cough up. This noisy breathing can be upsetting to carers but it doesn't usually appear to cause distress for the patient. Medication, along with a change of position, may be used to reduce this. At this stage, regular pressure relief and turning of the person may no longer be appropriate and they should be moved for comfort only. The skin can become pale prior to death. As the end of life

approaches the person's circulation slows and their fingers, toes, ears and nose may feel cool and turn bluish in colour. This is a natural thing and doesn't mean they need 'warming up'. A Volunteer Ward Companion can support the patient and be a comfort for family / friends.

Withdrawing from the world

This is a gradual process. The person will spend more time asleep and may be drowsy when awake. This apparent lack of interest in their surroundings is part of a natural process and may possibly be accompanied by feelings of tranquility. It should not be seen as a snub to loved ones.

During the final days or hours of life the dying person could drift in and out of consciousness. They may still be able to hear what is being said around them and may take comfort from the presence of family, friends and carers. At the end of life most people do not rouse from sleep, but die peacefully, comfortably and quietly.

The nurses and doctors looking after your relative or friend are there to support you and help you to work through any worries or concerns you may have.

Side rooms: Unfortunately it is not always possible for patients to be nursed in side rooms at the end of life. However, we will make every effort to facilitate this where possible. Please speak with your ward nurse about this.

Relative / carer useful / practical information

Due to unprecedented circumstances because of the COVID-19 pandemic, some of the information in this leaflet will not apply. Please speak to the ward nurse for up to date information.

This information is being provided so you are aware of the facilities available to you whilst you are spending time with your relative or friend. It is also important to look after yourself at this time.

Visiting

There may be circumstances where you wish to stay with your relative / friend outside of normal visiting times. Please do not hesitate to discuss these requests with ward staff as open visiting can usually be arranged. If you have open visiting and have not received a carers' badge please request one from the ward. For the main, relatives and carers spending long periods of time at the bedside, there are meal/drinks vouchers available from ward staff. These provide concessionary prices in Time Out restaurant situated on the first floor. Unfortunately visiting and access to Time Out may be limited at times for infection prevention reasons. Comfort packs are available for visitors staying for long period of time.

Car parking

The West Suffolk Hospital site has barrier-controlled car parks, for use by patients, visitors and staff.

There are separate car parks for staff and the general public. These are clearly marked around the site. The main patients / visitors car park **A** is in front of the hospital, the first car park to the right as you enter the site.

Additional parking for patients and visitors is provided at the rear of the site in car park **D**. This is near the Macmillan Unit and Education Centre and is suitable for people attending the Day Surgery Unit/Eye Treatment Centre, Macmillan Unit, pathology, pharmacy, ward F1 (Rainbow) and other wards/departments as required.

Car park barriers: West Suffolk Hospital operates a number plate recognition system for all vehicles, so there are no barriers at the entrance to the site.

When entering the site, the system will log the vehicle number plate automatically. When ready to leave, visitors simply need to visit one of the pay stations on site where they will be prompted to enter their vehicle registration number. The cost of parking will then be displayed, and visitors can choose to pay by cash, card or via a free app called Glide Parking, which can be downloaded on the Apple app store or from Google Play.

The barriers placed at the exit of the site will recognise the vehicle registration and that the parking has been paid for, and will open automatically.

Parking for family carers: Family carers who are parking on site will need to visit the car parking office at the front of the hospital to log their number plate, so that they are charged the correct fee.

Public transport

There are frequent buses that run from the hospital to the bus station please ring 01284 702020 for more information.

Taxi service

Free telephone service to local operators can be found in the hospital reception front foyer.

Telephones

There are no public phones but the ED would allow you to use theirs.

Refreshments

The Courtyard cafeteria: On the ground floor near the front entrance:

Monday to Friday	8.00am – 8.00pm
Saturday	9.30am – 5.30pm
Sunday	9.30am – 5.30pm

Time Out restaurant: On the first floor at the rear of the hospital. Open all day from 7.30am until 8.00pm for snacks, light refreshments and hot meals:

Breakfast	8.00am - 11.00am
Lunch	12.00noon - 2.00pm
Evening meal	6.00pm - 8.00pm

Toilets

Ground floor: by main reception; by X-Ray Depart; by Pathology Dept at rear of hospital; on the corridor by ward G5/G9; on the corner of the corridor opposite G8.

First floor: entrance to Wards F5/6; entrance to Wards F7/8; by CCU/Rainbow Ward at rear of the hospital.

Shops

Selling cards, gifts, newspapers, magazines, chocolates, sweets, drinks, snacks, toiletries etc.

The Friends of the West Suffolk Hospital Shop

Open:	Monday – Friday	8.30am – 8.00pm
	Saturday - Sunday	1.00pm – 4.30pm

W H Smith

Open:	Monday to Friday	6.30am - 8.00pm
	Saturday	8:30am - 6.00pm
	Sunday	8.30am - 6.00pm

Cash back: This is available from The Friends shop maximum of £20 per day and WH Smith with a maximum of £50.

Lifts: These can be found in the middle of the hospital for access to the first floor.

Post box: Situated at the front of the hospital near the transport office:

Collections: Monday to Friday 5.00pm; Saturday 11.30am

Chaplaincy and pastoral care (Ext 3486/3771)

The chapel and multi-faith area are available 24 hours a day for private prayer and reflection. Groups and individuals are welcome. From the front entrance take the left-hand corridor and follow it round.

Blanketeers support group: Second Wednesday of the month

Patient Advice and Liaison Service (PALS)

PALS provides someone for patients and their families or carers to turn to if they need information about the Trust services or have worries and concerns about these services.

The PALS office is situated in main reception and is open during office hours Monday to Friday and the staff can also be contacted on 0800 917 9673 (24 hour answer phone service).

Enquiries

If you have any questions or queries please do not hesitate to speak with a member of staff.

Please feel free to contact the ward at any time if you have any concerns.

It is very helpful to the ward team if you ensure that they have your correct name, contact telephone number and address.

The Hospital Palliative Care Team can be contacted by your ward nurse if we can be of any help or support at this time. Contact ext 3776 Monday to Friday 9.00am to 5.00pm, Saturday 8:00am to 4:00pm or email: palliativecare@wsh.nhs.uk

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (formerly DisabledGo)
<https://www.accessable.co.uk>



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