



When death happens

When death occurs it can happen quickly. Sometimes the person will give several outward pants as their heart and lungs stop. Others may give a long out-breath followed quite a few seconds later by what seems another intake of breath. This may be repeated for several minutes. The skin tone alters and the facial expression usually relaxes. Their eyes may remain partially open. This is normal.

In due course, a nurse, doctor or other qualified person will need to come and confirm the death. The timing of this will depend on who is available and may take some hours especially if it is overnight or at a weekend.

If you are concerned about any equipment or devices call Community Nursing Team for advice.

After the death has been confirmed you can contact a funeral director.

Who to contact if you need help

Dying people and their carers are given a high priority by all care providers and they will always respond as quickly as they can. If you need further help or advice please contact:-

GP surgery

The doctors surgery is normally open during working hours Monday - Friday

Community Nursing Service

The Community Nursing Teams are integral in co-ordinating care and support at home. They can apply for extra care. Sometimes carers become tired and no longer feel able to manage. The team may liaise with other health professionals to access alternative care.

Hospice 24 hour advice line

St Margaret's Hospice	0845 07 08 910
Dorothy House Hospice	01225 722999
Weston Hospice	01934 423900
Weldmar Hospice	01305 215300

Weekends, Evenings and Night-time Call 111

If at any time you need to call 111, make sure you tell the call handler that you are calling about someone who is known to be 'coming to the end of their life'. Advise them of any 'Do not resuscitate' (Allow a natural death), Planning Ahead decisions or Advance Decisions to Refuse Treatment (ADRT), Treatment Escalation Plan (TEP) that explains their end of life wishes. This will make sure you speak to the right person (a clinical advisor and/or a GP) and if you cannot speak with them immediately they will return your call within an hour. They may arrange for an appropriate health professional to visit. This could take up to four hours but they will contact you and tell you when they expect to be with you. It is not usually necessary to contact 999.



What to expect when someone is dying at home

What to expect when someone is dying

Caring for someone at home who is dying can be emotionally and physically demanding.

Many people plan to die at home. This is not always possible. The most important thing is that you and your loved one feel safe and well cared for wherever you are.

What should you expect of yourself, the person you are caring for and the health professionals involved?

Whilst we would like to provide twenty-four hour care we know that this is not available at home through NHS, Hospice or Social Services. However, if additional help is needed contact your Community Nurse who will be able to advise. You may also want to consider your own support networks. This may include talking with friends, family and neighbours and asking for their help.



Changes you may see when someone is dying

- When someone is dying it may take days or even weeks.
- The person may not feel like eating or drinking. This is common as they use less energy.
- They may become weaker, less mobile, spend more time in bed and become more sleepy.
- Their mouth and lips can become dry, especially if their breathing is laboured and they are breathing through their mouth. Try to keep the lips and tongue moist. If they can manage sips of fluid try a drink. If they are no longer conscious, use a moistened flannel or the Community Nursing Team can provide mouth sponges that you can dip in fluid to clean the mouth.
- As swallowing becomes difficult ask someone, such as your GP, to review medications. They should stop what is no longer necessary. Medication may be more appropriate in a different form.

Last Hours of life

- An unconscious person may still be able to hear. Continue to talk to them even if they don't respond. Some people find having music, family chat or background noise soothing. Others prefer a quiet environment.
- A person's breathing can sound noisy or rattling. This sound may be distressing for you but generally the dying person is unaware.
- You may notice that the person has pauses between breaths. These can become longer until the person stops breathing.
- As a person gets closer to death their skin may become pale or cold to touch and their hands, feet and lips may become blue. In the final stages their feet and back may appear mottled. These changes are normal.
- If they become restless or distressed there could be simple changes to improve comfort, such as a change of position or room temperature. If there's not an obvious cause for this restlessness or distress then contact the Community Nursing Team. They may talk to you about the last time urine was passed or bowels opened or may discuss other symptoms and possible causes.