

Policy on Dealing with a Dying Client

Policy Statement

Ace Care recognises that clients who are suffering from terminal illness and who are in the last stages of that illness need total care, including emotional care and frequent attention.

Aim of the Policy

This policy is intended to set out the values, principles and policies underpinning Ace Care's approach to dying and death.

Policy on Death and Dying

At all times the staff will be aware of the client's condition and be in constant contact with the client's GP to ensure that the client is in the best possible place and to provide the care required.

Any specific arrangements surrounding the death of a client, e.g. religious rituals before, after or at the point of death, will be documented and staff will be aware of such arrangements. The client's GP or relatives may be able to advise in these cases.

Companionship

1. The involvement of family and close friends is essential to the well being of the client.
2. Staff will encourage a relationship of trust and allow Ace Care to be more responsive to the client's needs.
3. Staff will spend time listening and talking to the client as well as caring. They will respond directly to requests for arrangements to be made so that the client feels that things are put in order before his or her death.
4. Extreme care will be taken when caring for an unconscious client. Staff will be aware that an unconscious client may still be able to hear and be aware of the presence of someone else in the room and so care will be taken not to discuss the client's condition within the room.

Comfort

1. The client will be made as comfortable as possible and his or her comfort will be checked regularly.
2. Ace Care acknowledges that cleanliness is important and the continuation of a daily bath will be maintained for as long as possible.

3. A normal routine will be continued with respect to hairdressing, shaving, chiropody, etc unless the client expressly wishes this not to be so.
4. Care will be taken in relation to the prevention and treatment of pressure sores, oral hygiene and dehydration.

Food

1. Frequent small refreshing drinks will be given so that the client consumes enough fluid and doesn't dehydrate.
2. If solid food cannot be tolerated, liquidised food, soup or a food supplement will be offered to the client.
3. The client will be allowed to enjoy a favourite food or drink, eg chocolate or a glass of beer or whisky, if they wish.

Pain Control

1. As far as possible the dying client should be kept free from pain.
2. The client's GP will be consulted to advise on what kind of painkillers the client wants or needs.
3. It is the client's decision to decide whether he or she wishes to take painkillers which leave him or her feeling awake or the stronger type which may leave him or her feeling drugged.
4. The staff should be aware of the degree of pain being experienced by a client.

Staff

1. Support will be provided for those staff caring for terminally ill clients. Staff should feel that they can discuss their feelings and experiences with other staff members, perhaps as part of a weekly staff meeting.
2. Staff will make sure that they treat the dying client like any other client, affording them the same amount of care and attention.
3. Staff will not purposefully avoid awkward conversation. Staff may feel that by talking naturally to a client they are being insensitive to the situation, but this is rarely so. The client needs to feel that he or she can talk about his or her forthcoming death, if he or she wishes.
4. Staff will try to answer all of a client's questions. Staff will not selectively decide to ignore difficult remarks or questions. If the carer is unable to answer

medical or religious questions, these will be referred with the client's knowledge to a more qualified person.

5. Staff will make sure that the client is not isolated from interacting with other clients within Ace Care unless it is his or her wish to be alone.

Relatives and Friends

1. Staff will encourage relatives and friends to visit as often as possible and at any time.
2. Relatives will be offered emotional comfort and support and be given the chance to share their fears and experiences with caring staff. This will help both staff and relatives come to term with the death.
3. Staff will find out whether a relative wishes to be contacted if the client deteriorates or dies during the night.
4. Staff will make sure that the relative is kept informed and completely up to date with the client's treatment and condition and facilitate discussion with the client's GP if necessary.
5. If a relative wishes to become involved in caring for the dying person, staff will make every effort to incorporate this into the daily routine, e.g. if a relative wishes to help feed the client or help the client to bed for the night the relative will be made aware of the client's normal routine and will be encouraged to participate.
6. Other clients may wish to share in the companionship of the dying client and it is important that they are not excluded. It is essential that they realise that death within Ace Care is shared and that they in turn will be loved and comforted if necessary.

Training

All new staff should read the policy on dealing with a dying a client as part of their induction process.

