When Death Occurs at Home: A Guide for Families









Connecting you with care Votre lien aux soins

Having someone die at home can be a positive and peaceful experience. Understandably, people often have questions about what to expect when caring for someone going through the dying process. While everyone is different and may not experience end-of-life changes in the same way, this guide will prepare you to help someone you care for, as their body slows down.

Do Not Resuscitate

Post the "Do Not Resuscitate Confirmation" form on the fridge or any other obvious place, if this decision has been made or instructions were given about this.

What to do when you notice the following signs

By following these guidelines, the end-of-life process can be easier for both you and the person you are caring for.

Longer periods of sleep and difficulty waking

- Plan conversations when the person is more wakeful and alert
- Keep visits short or encourage visitors to sit quietly at the bedside



 Have a guest book at the bedside for visitors to write comforting notes. You can read these notes to the person at a time when he/she is awake

Decrease in appetite

People tend to stop eating near the end of life.

- · Offer small servings of light foods
- Encourage eating only when the person can tolerate doing so
- · Offer fluids frequently between meals
- If nothing tastes good or if their appetite is poor, tell him/her that it is okay not to eat

Thirst

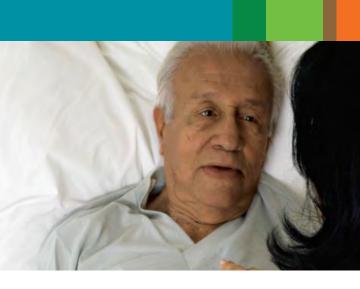
- · Keep the inside of the mouth moist
- Clean the mouth by using a baby toothbrush



- · Use alcohol free mouthwash
- Apply lip balm
- Offer ice chips or small chunks of watery fruit, such as pineapple and watermelon

Difficulty swallowing or forgetting to swallow

- Respect the person's tolerance to food and fluid
- Forcing the person to eat or drink at this stage may cause vomiting or choking
- Offer small amounts of food; if it is refused, do not insist
- Gently remind the person to swallow
- If having difficulty swallowing pills, discuss with the person's nurse, family physician or care coordinator another way to give medication



Periods of confusion and difficulty recognizing familiar people or surroundings

- · Speak calmly and naturally
- Re-orient the person of the time, place and who is in the room
- Avoid arguing with the person
- Keep the room dimly lit, perhaps by adding a night light
- Hold the person's hand to reassure him or her

Restlessness in the last few days of life

- Restlessness may take the form of pulling at bed linen, seeing things, etc.
- Give reassurance
- Play calm and soothing music

- Avoid physical restraint
- · Offer gentle massage
- Contact the person's family physician, nurse or care coordinator

Irregular or shallow breathing

- It is common for breathing to stop for 10–30 seconds before starting again
- If breathing is difficult, an electric fan may help
- Inform the person's nurse, family physician or care coordinator of any concerns with breathing

Noisy breathing

- This is caused by saliva collecting at the back of the throat
- Noisy breathing is not painful or difficult for the person, but can be disturbing to you
- Turn the person onto their side
- Raise the person's head or upper body with pillows
- Administer medications as instructed by the person's family physician or nurse
- Inform the person's nurse, family physician or care coordinator of any concerns with breathing

Irregular pulse/heartbeat

 This is normal. It is a sign that the body is slowing down

Response to voices or touch

- Speak in a calm, natural way
- Share your emotions and tell the person what he/she means to you

Changes in urine and bladder control

- · Urine production will decrease
- Urine will become darker in colour and may have a strong odour
- If you have any concerns, the nurse can provide advice regarding incontinence products, urinary catheter

Changes in skin colour

- The finger nails, hands and feet will be pale and bluish and the skin may feel damp because the circulation is slowing down
- · The person will not feel cold
- Use the normal amount of bed coverings to keep the person comfortable



At the time of death

- DO NOT CALL 911
- Contact the nurse or family physician to inform them; the physician may not come as the nurse can determine that death has occurred
- There will be no response, no breathing, and no pulse/heartbeat
- The person's eyes will be fixed in one direction; they may be open or closed
- There may be loss of bladder and/or bowel control
- If you want, contact a sibling or friend; take all the time you need to be together and share memories about the person
- At a time that is convenient for you, contact the funeral home and they will arrange to come for the person

Key contacts

Complete the form below so you know whom to contact at all times:

Nurse:
Phone #:
Physician:
Phone #:
Funeral home:
Phone #:
Care Coordinator:
Phone #:
Family and other contacts:

For more information:

Call us at 310-CCAC (2222) or 1-800-538-0520 or visit us online at: www.champlainccac.ca.

About the Champlain CCAC

The Champlain Community Care Access Centre (CCAC) is one of the largest health service providers in eastern Ontario, connecting people to care in a region covering over 18,000 sq. km.

Every year, the Champlain CCAC assists thousands of people in diverse communities to navigate a complex health system. The CCAC supports clients in a variety of settings through injury, illness and the complications of aging or disability by connecting them to community based services and other resources. Our Client Care Coordination teams help develop care plans for people of all ages, focused on maintaining independence and dignity at home. When required, the CCAC also provides guidance through the application and admission processes to long-term care facilities.

For more information call **310 CCAC (2222)**, or **1-800-538-0520**, or visit: **www.champlainccac.ca**. For additional information on community services and educational resources please go to: **www.champlainhealthline.ca**.

