

For those driving to and from the hospital, we can provide a free parking permit.

- **Tissue donation:** Most people will already have made the decision about whether or not they would want to be an organ or tissue donor after their death. This is often done via the National Organ Donor Register. The majority of people who have died are able to donate tissue up to 48 hours following their death and it may be possible for their relatives to give consent to do this. If you think that this is something that your loved one had expressed as a wish in life, please speak to a member of staff or contact a specially trained nurse from NHS Blood and Transplant, who will give you more information about tissue donation. They can be contacted via pager on 0800 432 0559 or visit www.nhsbt.nhs.uk.
- **Spiritual support:** Everyone is an individual, who during life will have experienced things that are important and meaningful to them. These may be of particular importance to the person and of comfort to you at this time, e.g. a favourite piece of music or personal items. Spiritual care is available through the spiritual healthcare team for patients and those important to them for religious or spiritual support.

- **The Hospital Palliative Care Team** will often be involved and can give advice on managing symptoms and provide emotional support for you and your loved one. Please ask a member of the ward staff if you would like this support; alternatively, they can be contacted on 0118 322 7826.

We understand this may be all very unfamiliar to you. Please let us know if there are any questions or concerns you may have, no matter how insignificant you think they may be, or how busy we may seem. We want to provide the best care we can.

To find out more about our Trust visit www.royalberkshire.nhs.uk

If you need this information in another language or format, please contact us on 0118 322 7826 or email palliative.care@royalberkshire.nhs.uk

Hospital Palliative Care Team, December 2023.
Next review due: December 2025



NHS

Royal Berkshire
NHS Foundation Trust

What to expect when someone is dying

Information for relatives, carers and friends

It can be a difficult time when someone close to you is dying. Anxiety is often increased by not knowing what to expect. Although it is difficult to give exact details of how someone will die, this leaflet describes some of the typical features of the process of dying.

- **How long?** This is a difficult question to answer. There are occasions when a person who is thought to be dying lives longer than we expect, and vice versa. It is impossible to accurately predict when death may occur, but certain changes take place during the days leading up to death, which may indicate that the dying process has begun.
- **Reduced need for food and drink:** As the body system shuts down, the desire to eat and drink becomes less important, and there will come a time when food and fluids are no longer needed. The need for replacement, i.e. by a drip, is not normally necessary and the mouth can be kept clean and moist by good mouth care.
- **Changes in breathing:** Breathing pattern may change when a person is approaching death. Sometimes, there are long pauses between breaths or the breathing may become fast and shallow. As the body becomes less active, the demand for oxygen is reduced.

Occasionally, a rattle or 'bubbly' noise, caused by a build-up of mucous, may develop but does not cause the person distress. Changing their position or medication may help.

- **Skin changes:** The face, hands, arms and feet may become cool to touch and look blotchy or mottled. This is because there is now less blood circulating to these parts of the body; it does not cause any pain or discomfort.
- **Withdrawing from the world:** This is a gradual process. More time is spent sleeping and the person will often be drowsy when awake. Often, the person will lapse into unconsciousness and may remain like this for a period of time, in some cases, many days. We believe people are still able to hear, so do touch and talk to them if you feel able to.
- **Care plan:** At this time medical treatments or investigations that are thought to be unhelpful are stopped, e.g. antibiotics or blood tests. Taking tablets and other medications usually becomes difficult as it becomes harder to swallow safely so these are stopped if not needed. The main focus of care is to keep the person comfortable. Sometimes, a care plan is used which can help to guide ward staff in the provision of care; this includes guidance on managing symptoms, spiritual and religious considerations and identifying things which may be important to the person or family at this time.

- **Managing symptoms:** People sometimes experience discomfort, agitation or restlessness when they are dying. Medication will be prescribed to help this and the staff on the ward will do all they can to help keep the person comfortable. These medications are usually very effective and if required frequently, can be given by means of a small infusion, which runs slowly over 24 hours; called a syringe pump.
- **Comfort:** We will offer help with personal care regularly; however, we recognise that it is important for you to have time and space just to be together. This is sometimes a difficult balance to achieve so please let us know if we need to do things differently. If you wish, you can hold the dying person's hand, and you can continue to talk to the person even when they can no longer respond to you. The dying person may sense your presence and hear your voice, which they may find comforting.
- **Facilities:** The ward welcomes 24-hour open visiting for those wishing to be with their loved one at this time. However, please consider that you may become exhausted over time and resting at home may help you cope both physically and emotionally. We can offer meal vouchers for the hospital restaurant. Alternatively, there are various shops in the hospital to obtain food, drink and provisions.