

Priorities for Care of the Dying Person

Recognise

The possibility that a person may die within the next few days or hours is recognised and communicated clearly, decisions made and actions taken in accordance with the person's needs and wishes, and these are regularly reviewed and decisions revised accordingly.

Always consider reversible causes, e.g. infection, dehydration, hypercalcaemia, etc.

Plan & Do

An individual plan of care, which includes food and drink, symptom control and psychological, social and spiritual support, is agreed, co-ordinated and delivered with compassion.

Support

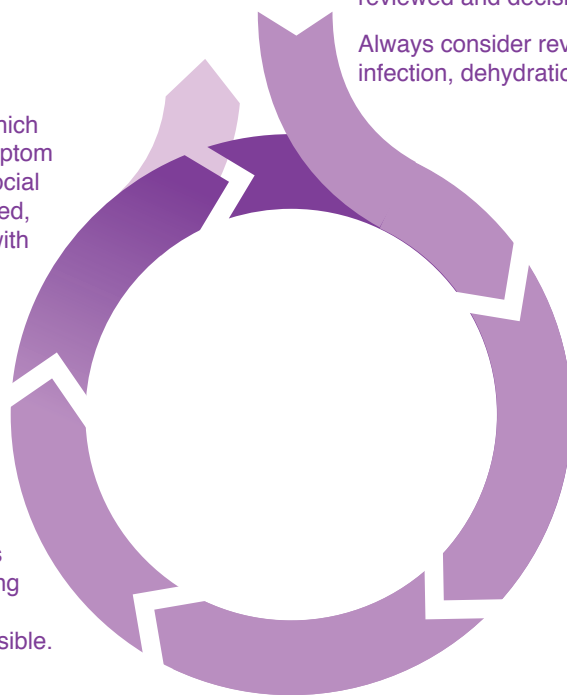
The needs of families and others identified as important to the dying person are actively explored, respected and met as far as possible.

Communicate

Sensitive communication takes place between staff and the dying person, and those identified as important to them.

Involve

The dying person, and those identified as important to them, are involved in decisions about treatment and care to the extent that the dying person wants.



If unsure, or the dying person or those important to them raise concerns, a senior clinician must review the person and the goals and plan of care.

Local palliative care contact:



scan on a smartphone to access to website guidance

For further guidance www.nhs.uk/endoflifecare