From the Derbyshire Handbook of Priorities for Care when a person is in the last days of life

 1st Edition July 2014

[www.dchs.nhs.uk/end-of-life-care](http://www.dchs.nhs.uk/end-of-life-care)

***“Recognising that a patient may be dying neither hastens nor postpones death”***

**5 Priorities:**

RECOGNISE, COMMUNICATE, INVOLVE, SUPPORT, PLAN and DO

**Communicate and complete Recognising Dying Document with senior doctor / GP**

Each individual must have an individual care plan according to their needs. The plan should be discussed openly with the person and those identified as important to them. This plan must be reviewed on a daily basis and should consider:

* Contact details of carers important to the dying person and how they may be informed of a patient’s death ( some carers may be elderly / working)
* Ensure all other professionals are aware that the patient is believed to be dying (e.g. Chaplain, District Nurses, GP, RIGHTCARE Plan, EMAS, Out Patients)
* Patients priorities for their care, Preferred place of care?
* DNA-CPR, Advanced care plan / statement?
* If patient lacks capacity, according with MCA: establish priorities for care that are in the patients best interests
* Discuss that observations, investigations, interventions or treatments which do not enhance comfort, dignity and peace may be stopped if they are no longer benefiting patient
* Assess medication - discontinue non-essential medication
* Ask if there are any spiritual, cultural or psychological issues that need addressing for the patient or loved ones
* The patient should be supported to take food and hydration by mouth for as long as it is tolerated and safe to do so
* Discuss possible burdens of oral or clinically assisted nutrition and hydration
* Ask if the patient has any physical symptoms to address, consider: pain, shortness of breath, nausea, vomiting, restlessness, confusion, urinary retention, dry mouth, respiratory secretions
* Consider reversible causes for these symptoms, seek advice from senior colleagues or the palliative care team if needed
* Care of carers after death