

NC Department of Health and Human Services  
**NC Nurse Aide I Curriculum**

**Module W**  
**End of Life Care**  
 July 2019

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**Objectives**

- Describe the nurse aide's role in end of life care
- Describe cultural differences in dealing with end of life
- Examine own feelings about the end of life

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**End of Life Care**

**Support and care provided during the time surrounding death**  
**May last days, weeks, or months**

- Terminal illness – illness or injury that the person will not likely recover; a terminal illness ends in death
- Dying – the near end of life and near cessation of bodily functions
- Death – the end of life and cessation of bodily functions
- Post mortem care – care of the body after death

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**Obituary**

**A description (typically placed in a local newspaper) of a resident's life written upon the death of the resident**



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**Death**

- **A natural conclusion to life**
- **May be sudden and unexpected or expected**
- **Resident's response to death based on personal, cultural and religious beliefs and experiences; affects motions and behavior**
- **Nurse aide's feelings about death affect care given**
  - **Is often the caregiver closest to the resident**
  - **Must understand the dying process and how to react and approach the resident with care, kindness, and respect**

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**Grief**

- **Deep distress or sorrow over a loss**
- **The dying resident and family may pass through 5 stages of grief – Dr. Elizabeth Kubler-Ross**
- **Each person experience stages differently**
- **May not even pass through stages if death is fast or unexpected**
- **Nurse aide's role – understand stages; do not take anger personal; listen and be ready to assist**

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**1<sup>st</sup> Stage – Denial**

- Begins when people are told of impending death
- May refuse to accept diagnosis or discuss situation
- May believe that a mistake was made
- May act like it is not really happening
- The “no, not me” stage



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**2<sup>nd</sup> Stage – Anger**

- Expressions of rage and resentment
- Often upset by smallest things; lashes out at anyone
- Begins to face possibility of upcoming death
- May be angry because of the healthy lifestyle maintained
- Nurse aide may be the target of anger, but must not take it personally
- The “why me” stage



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**3<sup>rd</sup> Stage – Bargaining**

- Tries to arrange for more time to live to take care of unfinished business
- Bargains with doctors or God
- Stage is usually private and spiritual;
- The “yes me, but....” stage



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### 4<sup>th</sup> Stage – Depression

- Begins the process of mourning
- Cries, withdraws from others
- May be becoming weaker with worsening signs
- May lack the strength to do simple things
- Will need additional assistance physical care and emotional support
- The “yes me” stage
- Nurse aide needs to demonstrate understanding and willingness to listen



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### 5<sup>th</sup> Stage – Acceptance



- Has worked through feelings and understands that death is imminent
- Calm, at peace, and accepts death
- May or may not make it to this stage before death
- Begins to get affairs in order
- May make plans for the care of others and pets
- May plan the funeral
- Reaching this stage does not mean death is imminent

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### Advance Care Planning



Choices about medical care the individual would want to receive if he/she suddenly became incapacitated and could not speak for his/herself

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### Advance Directive

- Patient Self-Determination Act (PSDA)
- Omnibus Budget Reconciliation Act of 1987 (OBRA)
- Advance directive – legal documents that allow people to decide what kind of medical health care to have in the event they cannot make those decisions themselves



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### Advance Directives Documents

- Living will – a document that outlines medical care a person wants or does not want in case the person cannot make decisions; must be written while resident is mentally competent or by resident's legal representative
- Durable Health Care Power of Attorney – a signed, dated, and witnessed legal document that appoints someone to make healthcare decisions for the person in the event he/she cannot do so



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### Do Not Resuscitate (DNR)

- A medical order instructs medical professionals **not to perform CPR** if the person no longer has a pulse and/or is not breathing
- Legally, the nurse aide **must honor** the resident's DNR order and not initiate CPR



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### Physician Orders for Life-sustaining Treatment

- Doctor's order stating what treatments are to be used when person is very sick
- Includes medical measures the resident wants to receive
- Based on conversations between the resident and the doctor; decisions become medical orders



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### Hospice Care

- Health care agency or program for people who are dying
- Purpose is to improve the quality of life for the person who is dying
- Provides comfort measures and pain management
- Preserves dignity, respect and choice
- Offers empathy and support for the resident and the family



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### Palliative Care



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**End of Life Care – Importance**

- Most people die in hospitals or long-term care facilities
- Nurse aide’s feelings about death affect care given
- A caring, kind, and respectful approach helps the resident and family



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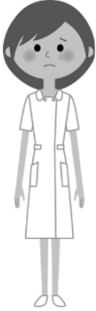
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**End of Life Care – Nurse Aide’s Feelings**

- Must recognize and deal with own feelings and attitudes toward death in order to support residents who are dying
- Many factors influence attitudes
- First encounters with death and dying can be frightening
- Can use co-workers as support system for dealing



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**Environmental Needs of the Resident**

- Keep environment as normal as possible
- Keep well lit and well ventilated
- Open drapes and door
- Play resident’s favorite music



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### Physical Needs of the Resident



- Positioning
- Cleanliness
- Mouth and Nose Care
- Nutrition
- Elimination

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### Emotional and Psychological Needs



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### End of Life Care – Culture and Religion

- Provide framework which personal experiences with death take on meaning
- Personal experiences, culture, religion, and age influence individual beliefs that may differ from nurse aide's
- Nurse aide must not impose beliefs upon the resident
- Important for team to provide respectful care to resident
- Individuals from different cultures appreciate being asked about practices

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**End of Life Care – Cultural Variations**

Some cultures believe dying at home is preferable while others fear death at home



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**Feelings and Responses**

- Staff and family may not be prepared for the actual moment of death
- Staff may be shocked or surprised
- Recognize variety of feelings/responses  
Listen empathetically
- Demonstrate caring, interested attitude
- Observe for changes in other residents  
report/record appropriate information

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**Impending Death**

- Psychological and physical withdrawal
- Decreased level of alertness, with increased periods of sleeping
- Body temperature rises
- Circulatory system fails
- Respiratory system fails
- Digestive system – slows down
- Urinary system – changes
- Muscle tone - diminishes
- Sensory – sensory perception decline

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**Death – What to Look for**

- No pulse/heartbeat
- No respirations
- No blood pressure
- Eyelids may remain opened; pupils are fixed and dilated
- No response when resident is talked to or touched
- Mouth may remain open
- May have bowel and bladder incontinence
- Notify the nurse immediately

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**Postmortem Care – Nurse Aide’s Role**

- Defined – care of the body after death; begins when resident is pronounced dead
- Consult with nurse
- Within 2 to 4 hours after death, rigor mortis develops
- Sounds may be heard
- Wash body and comb hair
- Put on gown and cover perineal area with a pad
- Position body in supine position, legs straight and arms folded across abdomen with one pillow under head

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**Nurse Aide’s Role – Care of the Family**

- Show family members to a private place to sit
- Inquire if there is anyone that they would like called
- Provide water or a beverage
- If family members would like to visit with the deceased, provided privacy and close door quietly
- Nurse aides respond differently to the death of a resident
- What to say? Key is to be sincere and to understand that a simple, “I’m sorry” is enough



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