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

Module W End-of-Life Care and Death

July 2024

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Objectives

- 1. Define death and end-of-life care
- 2. Describe stages of grief
- 3. Explore cultural differences in dealing with death and dying
- 4. Examine own feelings about end of life
- 5. Describe the nurse aide's role in end-of-life care

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Advance Care Planning



- Planning for future decisions about one's medical care
- The plans typically are determined if one becomes incapacitated or cannot speak for themselves
- Based on personal values, preferences, and discussions with loved ones

Advance Directives

- Omnibus Budget Reconciliation Act of 1987 (OBRA)
- Patient Self-Determination Act (PSDA)
- · Legal documents
 - Living will
 - Durable Health Care Powers of Attorney



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Advance Directive - Do Not Resuscitate

- A medical order
- Healthcare professionals directed <u>not to perform</u> <u>CPR</u> if the person has no 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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Palliative Care

- Type of care given to resident 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
- Hospice care offers empathy and support for the resident and the family



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Nurse Aide's Response to Death

- Recognize and manage own feelings and attitudes toward death to support residents who are dying
- Various factors influence attitudes toward dying
- First encounters with death and dying can be frightening
- Seek support from coworkers when caring for residents who are terminally ill

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Environmental Needs of the Resident End-of-Life Care

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



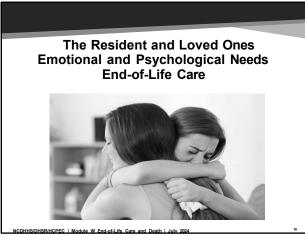
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Physical Needs of the Resident End-of-Life Care

- Positioning
- Cleanliness
- · Mouth and nose care
- Nutrition
- Elimination





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End-of-Life Care - Culture

- Some cultures believe dying at home is preferable while others fear death at home
- Individuals from different cultures appreciate being asked about practices
- Nurse aide must not impose beliefs upon the resident



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End-of-Life Care - The Healthcare Team

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

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Signs of Impending Death

- Psychological and physical withdrawal
- · Decreased level of alertness with increased periods of sleeping
- · Body temperature rises
- Circulatory system shows changes in pulse and blood pressure
- Muscle tone diminishes

- · Respiratory system shows signs of erratic breathing patterns
- · Digestive system symptoms of nausea, vomiting, and incontinence
- · Urinary system produces small amount of dark urine
- · Sensory decline

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Signs of Death

- · No pulse or 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

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Exploring Responses to Death

- Death may be sudden and unexpected or expected
- · An individual's reaction to death is based on personal, cultural, religious beliefs and experiences
- The nurse aide's feelings about death may affect the care given to the resident
- In long term care facilities, the nurse aide is often the caregiver closest to the resident
- · A nurse aide's understanding of the dying process enables a care approach based on dignity and respect

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Stages of Grief

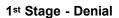
Dr. Elizabeth Kubler-Ross identified The Five Stages of Grief

- · Each person experiences stages differently
- May not even pass through stages if death is fast or unexpected

A nurse aide's understanding of the stages allows for appropriate support, care, and assistance

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



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2nd Stage - Anger

- The "why me" stage
- · 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. Should not take expressions of anger personally

3rd Stage - Bargaining

- The "yes me, but" stage
- Tries to arrange for more time to live to take care of unfinished business
- · Bargains with doctors or a higher power
- · Stage is usually private and spiritual



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4th Stage - Depression

- The "yes me" stage
- Begins the process of mourning; cries, withdraws from others
- · May become weaker with worsening signs
- May lack the strength to do simple things
- May need additional assistance with physical care and emotional support
- Nurse aide needs to demonstrate understanding and willingness to listen

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5th Stage - Acceptance

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

6th Stage - Meaning



In 2019, Dr. Kubler-Ross' family granted David Kessler, a grief specialist, permission to add a sixth stage to her model of The Five Stages of Grief

The Sixth Stage is "Meaning"

- Relative and personal
- · Takes time
- · Does not require understanding

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Dealing with Grief - An Obituary

A notice of a death, in a newspaper or other media outlets, typically including a brief biography of the deceased person



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Postmortem Care

- · Consult with nurse
- Provide privacy throughout the process
- · Obtain a postmortem kit
- Wash hands and put on gloves
- · Close the eyes
- Give a complete bed bath
- Dress the resident in a clean gown
- Place a pad in the perineal area
- · Position body in supine position

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Role of the Nurse Aide Care of the Family

- Provide a private place for family members
- Inquire if any specific person should be contacted
- Provide water or a beverage
- If family members visit with the deceased, provide privacy, and quietly close the door
- Show sincerity and compassion

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