

LAST DAYS OF LIFE TOOLKIT

March 2021

INFORMATION FOR THE MULTIDISCIPLINARY TEAM



Last Days of Life

The Last Days of Life Toolkit

To improve and support the care of the dying patient the Clinical Excellence Commission (CEC) End of Life (EOL) program, in collaboration with clinicians and consumer advisors, developed a last days of life (LDOL) toolkit which focuses on:

- recognition of the dying patient and management planning;
- standardised medication prescribing for the dying patient; and
- transition to die at home planning; and
- tools to prompt and support communication.

The toolkit provides clinicians caring for dying patients in general in-patient hospital settings with the tools and support to ensure all dying patients are recognised early, receive optimal symptom control, have social, spiritual and cultural needs addressed, and bereavement support occurs.

The resources are not intended to replace either local Specialist Palliative Care guidelines or consult advice given by Specialist Palliative Care clinicians.

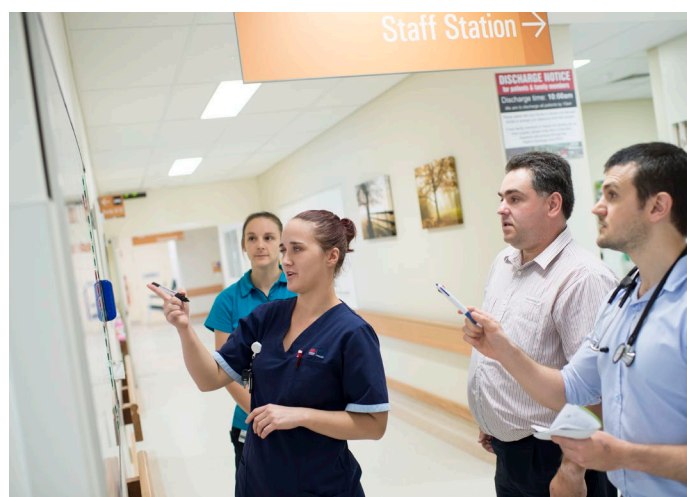
For further Information:

CEC-EOL@health.nsw.gov.au

<https://www.cec.health.nsw.gov.au/improve-quality/teamwork-culture-pcc/person-centred-care/end-of-life>

What are the benefits of using the toolkit?

- ♦ Toolkits provide a compilation of related information, resources, or tools that together can guide users to develop a plan or organize efforts to conform to evidence-based recommendations or meet evidence-based specific practice standards.
- ♦ One of the main findings of the toolkit pilot (Sept-Dec 2016) was that patients who were cared for using a standardized approach had a higher percent of their care being more structured i.e. symptoms and comfort were assessed routinely and they received medications within a best practice model. This also saw a decrease in the harm to patients.
- ♦ Patients who are dying often have complex needs and the multi-disciplinary approach to the management of these needs can benefit the patient and their family/carers and provide greater clarity around preferences and goals of care in the last days of life.
- ♦ Because there are a variety of tools for a variety of circumstances you only need to use what is appropriate for caring for your patient at that time.
- ♦ The tools can support and/or compliment the procedures you already have in place for caring for the dying patient.



LAST DAYS OF LIFE TOOLKIT

March 2021

INFORMATION FOR THE MULTIDISCIPLINARY TEAM



Recognising dying, management planning and care after death

Initiating Last Days of Life Management Plan – ADULT

The decision that a patient is likely to die within hours to days should be made after a thorough physical examination and discussion between the multidisciplinary team caring for the patient.

Comfort Observation and Symptom Assessment (COSA) Chart – ADULT

Provides tailored individual symptom and comfort assessment and management for dying patients as well as support their families/carers in managing those symptoms.

Care after Death in Hospital – ADULT

There are aspects of care of a patient and their family still to be undertaken when the patient dies, such as last offices or tissue donation, and the immediate and sometimes longer term support of the family.

Accelerated transfer to die at home

Accelerated Transfer to die at home plan - ADULT

This is a form of integrated discharge planning that begins when a patient expresses the wish to die in their home environment. *'Home' can refer to the patient's home, the home of the patient's family/carer or Residential Aged Care (RACF) facilities.*

Paramedic Transfer letter

Nursing transfer letter

Medication prescribing for symptom management

Anticipatory Prescribing Guide

Guide on prescribing anticipatory medications for the symptoms in the last days of life.

Symptom Management flowcharts

Flowcharts to guide assessment and management of the five symptoms commonly experienced by patients in the last days of life:

- Pain (includes a guide to switch to subcutaneous opioids)
- Breathlessness
- Nausea and / or vomiting
- Restlessness and / or agitation
- Respiratory tract secretions

Communication in the last days of life

These tools do **NOT** replace clinical staff's responsibility to commence and continue communicating with the patient and/or their family/carers at this time.

Name of tool	When appropriate
Asking questions can help: an aid for patients when approaching the last days of life	Questions a patient may ask when they deteriorate or a decision is made that there are no reversible causes for deterioration
Asking questions can help: an aid for family/friends when someone you know is approaching the last days of life	Questions the family / carer may want to ask when their relative or friend's condition deteriorates or a decision is made to initiate a palliative approach to care
Family / carer information regarding care in the last days of life	Provides information on: common symptoms including delirium; changes to body during last days/hours; saying goodbye; and what happens to the person's body after death
What to consider when your family member or friend has expressed a wish to go home from hospital to die at home	Provides information on what is required to transfer the patient home safely for both the patient and the family/carer
When a person dies in hospital: what to expect and what to do next	Provides information about the dying process and some of the tasks that may need to be completed by the family once the person has died.
When a person dies at home: what now?	Provides guidance and reassurance around the process of having the patient certified or verified and contacting funeral directors after death at home
Information for family/carer: Medication management for patients who go home to die	Provides information about what drugs are being given to maximise comfort and relieve suffering. It also includes information on what to do with/dispose of medications when no longer needed
Understanding grief and some suggestions that may help	Provides a summary of the services available to help families/carers before and after their loved one dies.