

Looking after you

You are the best thing that has happened to your patients/residents at this time. And, you are your own best resource.

- X Don't deny yourself time to share how hard it is. You could not have been prepared for the numbers of deaths, you were always ready to care.
- X Don't tell yourself that you should be coping - you probably are coping, and being stressed/upset may well be part of that some days.
- X Don't feel guilty about anything, you could not have done more. We could not have known that this was coming.
- X Don't think you should always know what to do or say – no one does, no one!

- ✓ Do allow yourself to feel whatever you feel, acknowledge it, cry if you want, you will be the first person to pick yourself up.
- ✓ Do talk to someone if you need to, you know who in your life helps you feel better.
- ✓ Do accept that you will need guidance, to ring around, to look things up; everyone is doing it, everything is changing. You are wonderful, DO remember that.
- ✓ Do feel that you are front line too, it's not all about hospital/ A&E, you know that, we know that and at Blythe House and Helen's Trust, we salute you.
- ✓ Do ring us for any talk time, support and guidance. We don't know everything but we know end of life care: 01289 815 388.
- ✓ Do remember how much we respect you, and that we will help you, we will help you to be there, and we would be proud to do it together.

For more information, visit:

www.blythehousehospice.org.uk/supporting-you-and-your-mental-well-being-throughout-the-coronavirus-situation



Thinking about you

As your colleagues and end of life care specialists, we have worked alongside you for long enough to know just how hard you work, and to appreciate the standard of care you provide.

You create homes, not just the building, the feeling of 'being' at home and that is so difficult to do. Now, as this virus invades, we wanted you to know how much we respect what you are doing out there and to offer some support if you feel it would help.

We know that you will be working to the high professional standards and guidance as you always do, you don't need us to teach you! And I haven't included them here.

We just wanted to share some useful phrases that we have learnt over the years of working with dying people and their families.

All the phrases are short, simple and clear. We know that filling silences and talking too much can stop people understanding the message. The dots are where you could add specific details that match your situation.

Take care and stay safe,

Janet Dunphy - CEO, Blythe House Hospicecare and Helen's Trust

Qualified as a nurse in 1980; 35 years spent as an end of life care specialist

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Limited Company Number: 765588

Pre-emptive questions can be better than waiting for the problem to arise or for them to ask you - Sometimes they don't know how to ask, or think we are too busy. It can help to start the conversation by saying:

- Often people in your position worry about.....
- What is your biggest worry?
- Tell me three things that would help you

Picking up cues - Sometimes people give away clues don't they, instead of saying it straight out? It can help to say:

- You mentioned there..... Is that something you worry about?
- I'm picking up that you are the kind of person who.....
- Is there something else I can help you with? (*Research shows that saying 'something' always works better than saying 'anything'*)

Planning care

- It's important that we plan to keep you here at home, we will need to..... It's my job to give you the best advice.....
- If they want to stay with you, and I'm sure most do, it's so helpful to have had that conversation and recorded it.
- Explaining the value of RESPECT, anticipatory medicines. (Remember anticipation of a problem, not emergency medicines, that can be scary) it is reassuring to explain that: I would rather put things in that you don't need, (e.g. anticipatory meds) than you have a problem and not have what you need.

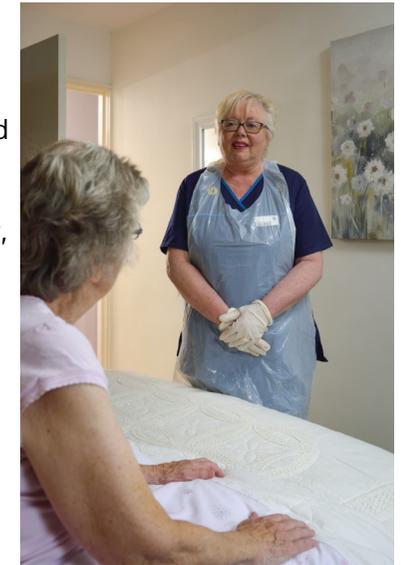
Answering 'How will I/ they die?' - People ask this a lot more nowadays than they did. This is a chance to reassure them that they have all the medicine they need to keep them comfortable. You could say:

- You/they will get weaker, what you/they could do before will be harder now
- Organs will slow down. It's a gradual process: you/they will sleep more, not get out of bed, eat and drink less, your/their breathing will change, you/they will become unconscious.
- We will keep you/them comfortable and explain what is happening every step of the way.
- At this awful time we will be there for you with them, we will try to be your hands and make sure that they know your love is with them. We know we cannot take away the pain of you not being there, nothing could, we are so sorry about that, but they will not be alone and they will know kindness and comfort until the end.

Please contact Blythe House Hospicecare for bereavement support, we are here to help you: 01298 815 388

Food and hydration issues - So often families feel that people die because we stop feeding them, rather than they are dying, so they can't manage food any longer. When they understand that food and fluids can make them worse they often relax, it really helps to explain:

- The organs are not working properly now, food and drink could make them feel really ill. Their body couldn't now cope with food. Fluid would go in the wrong places and cause discomfort. They may get a dry mouth, but this is not thirst, it is often due to mouth breathing and medicines. Our priority is to make sure their mouth is always moist and comfortable.



Explaining stopping treatment, medicines, hydration, food - Sometimes treatments/medicines have to stop because they become more of a burden than a benefit. Usually families haven't had to consider this. It can help to simply say: This treatment/food/fluids will do more harm than good now.

Death rattle - This can really scare people, they may see it as a sign of distress. It is a sign of the opposite, so it can help to explain to families/new staff that:

- That noise shows how relaxed and comfortable they are, their throat muscles are so relaxed now that they have stopped the little coughs they would normally do to clear their throats. They are not in distress, actually, this is a sign that they are really peaceful.

Do Not ATTEMPT Cardio Pulmonary Resuscitation (DNACPR) - For most people who watch TV, people get resuscitated and it usually works, we know that in real life it does not always work. We also know that elderly people cannot be successfully resuscitated. It would be a brutal and futile procedure. You know from your experience that it is a professional kindness to support a good death. But it can help to explain if you are asked that:

- Your died from a natural process. Natural processes cannot be reversed. She/he died a peaceful natural death surrounded by kindness, rather than in a clinical environment surrounded by strangers and having to endure procedures that couldn't help.