

# What is a good death?

# A good death...

‘Is the best death that can be achieved in the context of an individual's clinical diagnosis and symptoms , as well as the specific social, cultural and spiritual circumstances , taking into consideration patient and carer wishes and professional expertise.’

# A good death...

‘..Is defined as a death free from avoidable suffering and distress, consistent with a persons wishes, and in accordance with their spiritual, cultural, and ethical values.’

Ref: ‘AI’

# Group Work

- What makes a good or what makes a bad death?
- Speculate on what shaped your own personal views and how as nurses this may differ from friends & families.
- Reflect upon people living in communities or countries different to yours

# Dying Matters

- Knowing when death is coming & what can be expected
- Retaining control of what happens
- Dying with dignity & privacy
- Having pain & other symptoms managed
- Choosing & controlling where death occurs
- Having access to information and expertise of whatever kind is necessary
- Having access to spiritual and emotional support
- Having access to hospice care in any location
- Dying when ready and not having life prolonged pointlessly
- Having time to say goodbye and control over other aspects of timing
- Having a legal document in place to ensure wishes are respected

# " My Mother's Death "

**About:** Glasgow Royal Infirmary / General Medicine

Posted by *CMH* (as a relative), less than an hour ago

My mother was admitted to Ward 53, Glasgow Royal Infirmary. I received a call explaining she was unlikely to recover from the infection she had. From that moment I felt she was in very caring hands. I don't live near Glasgow and at the time of the first call I was at the opposite end of the UK. Family members got to the GRI over the next few days, as did I. I booked into a hotel and stayed with my Mum during the day. All the staff were kind, attentive and professional to Mum and to us as a family - I felt they were wrapping us in a blanket of care and support which made this emotional time a little easier to bear. The whole focus was on Mum's comfort; nothing was too much trouble - she was turned regularly and kept pain free and we were able to spend the precious last days by her side knowing she was getting the best care. After a few days my daughter and I were going to call it a day and return to the hotel (as we'd done previously) when the staff suggested we may wish to eat dinner in the city centre and return to the hospital for the night - they knew the time was near for Mum to slip away. We were made as comfortable as it's possible to be and had the privilege to be by Mum's side as she left us. I let the nursing staff know and again, the care shown to us gave us comfort at the saddest time - we were not rushed and nurses were anxious I was fit to drive away.



All the staff, day and night shifts, were superb - I've never met a palliative care nurse before - what a great job she did in taking time to chat and explain things to me. The time I spent with Mum on Ward 53 is largely a blur but a very warm memory is with me and I'm only sorry I can't list the names of the nursing staff. I do recall Eilidh sang the Skye Boat Song to Mum one night but that does not lessen the feelings I have towards the whole team on the Ward. My father died in 2008 in another hospital outside Glasgow and it was not a good experience; I'm so thankful and grateful my Mum was in the GRI and on Ward 53; you will have a special place in my heart always.

# A good death ...

- Awareness & acceptance of dying
- Preparedness
- Comfort
- Closure
- Peacefulness and dignity
- Presence of family and being in familiar like setting
- Personhood
- Timeliness

'Dying isn't as bad as you think' Kathryn Mannix



# Never underestimate the power of the smallest intervention at the end of life...

