

Special Care

We want you to know that Good Samaritan staff are available to you and your loved one to address any of your concerns, questions or needs. We know that this is a special time that requires special care. End of Life Carts or Baskets are available at most GSS care homes. They provide support in terms of reading material, music, videos, blankets and spiritual resources. Please do not hesitate to ask staff for this if you feel it would be beneficial.

Following The Death Of Your Loved One

Take as much time as you need to be with your loved one, and as family and friends, support each other knowing that they have ended their life's journey and are now at peace. The funeral home or other arrangements that have been made will take care of the body. Each care home has a ceremony in which staff come together as your loved one leaves to honour them and say their final goodbyes.

Find Support In Your Grief

You may find yourself experiencing a variety of feelings in your grieving process. This is normal. Find support and comfort in your family and friends. Savour your memories. If you find your grief becomes abnormal or complicated, please do not hesitate to reach out to your Chaplain or your physician for help.

**Just as one's life
is unique, so is
one's death.**



www.gss.org

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At the End of Life's Journey

What to expect when a
loved one is dying.





We are born, we live and we die. Dying is the end of our earthly journey. This can be a difficult time for your loved one and yourself as you say your last goodbye. This brochure is to help guide you through this important, yet difficult passage in time.

Need Of Our Loved One

People that are dying want to know that they have value and are loved; will not be left alone to face death, and that they can attain peace. They may have a need to express different feelings about their situation. Some people have regrets that they would like to talk about. Sometimes there are people to forgive. They may have a longing to express love, or receive forgiveness.

What Can You Offer

Just being with your loved one and willing to listen to their feelings, shows that you care. Touch, such as holding your loved ones hand, giving a hug, or providing a gentle massage to the hands/feet can be an especially welcome way to express love. You don't always need to say something. Sometimes silence can be a powerful way of communicating when words can't be found. While we may want to protect and shield them from talking about death, it's an important need for them. In the end, remember that although your loved one may not respond any longer, their ability to hear may still exist. Reading to your loved one, playing soft familiar music, or just talking about ordinary things going on in your life may bring comfort.

Who Can Help

As your loved one nears the end, fear of the unknown can be overwhelming for both of you. If you find that you or your loved one are struggling with ways to communicate, how to handle feelings, and/or have questions with what is happening, know that there is spiritual and emotional support that is available through the professionally trained Pastoral Care Services and/or the interdisciplinary care team at your care home.

Letting Go

Over the past few weeks, you may have seen many changes in your loved one. They may sleep longer, have less energy, eat less, or sometimes withdraw from family and friends. This is a normal and necessary process in letting go of life.

What To Expect

At this point, comfort becomes the focus of care for the resident from the interdisciplinary team. The following information describes what your loved one may experience as they approach death. You may not see all of these events happening, nor is there necessarily a particular order, but it is important to be prepared.

Decreased Appetite/Refusing Food and Fluids

It is common to have reduced or absent hunger/thirst. It rarely causes distress as the body begins to shut down or slow its normal functions. The ability to swallow may also decrease. Do not force foods or fluids. If you have concerns about fluid intake, please feel free to discuss this with the nurse or physician. Your loved one's mouth can be kept moist with moistened swabs and lip balm.

Longer Sleeping Periods

Your loved one may sleep more and be difficult to awaken. A time may come when they become completely unresponsive. Allow your loved one to sleep when they desire. Try to plan your conversations when they have more alert times. A low intensity light such as a lamp may be more comforting. Speak softly and naturally.

Confusion/Restlessness

Some individuals experience confusion, restlessness, or agitation towards the end. Sometimes they may grab at things that aren't visible, have difficulty staying in their beds, and are confused as to the time or place. It may help to identify yourself when you come to the bedside. Offer calm and gentle reassurances that they are safe and cared for. Listen if your loved one wishes to resolve any issue. Though confusion could be a natural symptom of impending death, it could also be a sign that a medical intervention is needed. Do not hesitate to discuss your concerns with the nurse or physician.

Bowel and Bladder Changes

Loss of bowel and bladder control is common. The amount of urine produced may decrease or stop entirely. The nursing staff may still provide bowel care to prevent constipation and discomfort, even if your loved one is not eating.

Chest Congestion

As the heart and lung system is challenged, wet sounding breathing can be caused by secretions collecting in the chest or the back of the throat. Staff will regularly turn your loved one to help chest secretions from pooling. Slightly increasing the head of the bed may help. Medications can be given if congestion is quite distressing.

Muscle Twitching

As less oxygen becomes available to tissues, twitching of the muscles can be seen. Medications could also cause some twitching and may need some adjustment.

Temperature

An elevated temperature may be common. Nursing staff can give medications to help reduce fever and provide comfort. A fan may be turned on in the room by staff. Applying a cool cloth to the forehead may be helpful.

Eye and Skin Changes

Over time, a person's vision may fail to focus. Sit near the head of the bed where you can be seen and heard more clearly. Eyes near the end may become drier, remain open or develop a white film over them. Eye lubricants delivered by nursing staff, gentle cleansing and closure of the eye lids may help.

It's natural during this time for the body to direct most of its blood to the vital organs. Nearer to the end, the skin starts to take on a bluish grey and or mottled appearance. Arms and legs may become cool, but this does not cause discomfort.

Breathing Changes

Breathing patterns may change. In the absence of assessed pain, you may hear "moaning" and interpret it as discomfort, but often this is air passing over relaxed vocal cords. You may see rapid shallow breaths that fade away or stop for short periods 10-45 seconds at a time. You may see big breaths with increasingly longer pauses between breaths. This is a normal part of the dying process. It is not always necessary that your loved one will need to have oxygen given for these changes.