





**What it is:** Talking about death and dying is not easy for everyone.

Why it matters: It can be hard to tell someone that care will be about comfort, not cure. But these conversations can help the person and their family to make decisions about future care and to improve the care that the person receives.

Acknowledging the role of family and talking with them can improve the care of the person, their family and carers. Careworkers can support the person and their family and let nursing/supervisory staff know when they have questions.

## **What I need to know:** Effective communication or talking:

- allows staff to identify a person's needs and to provide care for that person
- may reduce agitated behaviour in older people with impaired cognition (poor understanding).

When a resident or older person dies, other residents or older people may be sad, fear that they will be next, become angry or withdrawn. Listening to their concerns can help them feel comfortable again.

Developing effective communication skills requires training, reflective learning, practice and a supportive working environment.

Note

When talking with people, remember to:

- be aware of sensory impairment and make sure the person is wearing their glasses and/or hearing aid if needed
- make appropriate eye contact
- keep your face in view
- speak slowly or as loudly as needed.

Do

Take the time to listen to people. This helps people feel that they are valued and treated as an individual.

Do

Report to nursing/supervisory staff a person's likes, dislikes, behaviours and responses to care. Their preferences can then be respected when they can no longer communicate.

Do

Consider a person's culture before talking about dying. Not all cultures talk about dying and death in the same way.

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## **My reflections:**

Before talking about dying with a person what should I consider?

What can I do to help people feel more comfortable when talking about death?

Who can I call on to help me with difficult discussions about death and dying or if people in my care have questions that I cannot answer?

## My notes:

See related palliAGED Practice
Tip Sheets:
Advance Care Planning
Palliative Care
Spiritual Care

