

## Nursing Care

Nursing staff will provide 24-hour care in a caring and quiet atmosphere, keeping the individual needs of the resident as priority. In order to promote comfort, your loved one will be turned frequently, adequately medicated and given personal care such as mouth care, back rubs, etc. as needed.

Your loved one's privacy and dignity will be respected and cultural as well as personal preferences considered whenever possible.

The registered staff will identify themselves to the family each shift and check regularly on the status of the resident. Nursing staff will be available to address family concerns and to walk with the family through the palliative process.

Nursing staff will listen, offer support and provide information on the progression of care.



## Pain and Symptom Management

Your loved one's comfort during these last days of life is of utmost concern to all persons who are giving care. Control of pain and alleviation of any uncomfortable symptoms are important aspects of palliative care. There are resources available to assist the physician and staff in making decisions whenever needed.

Leamington Mennonite Home staff have immediate access to the Pain and Symptom Management Team of Essex County. Members of this team meet on a regular basis with the Palliative Care Team at our Home. Both teams work together to ensure that your loved one will have quality in the remaining days of his/her life.

The Registered Staff will keep the family informed of the progression of care which is part of the Palliative Care Program.

## Family Care

Family members are encouraged to spend time with their loved one whenever you wish, both day and night. It is best if only 2 or 3 family members are sitting with the resident at one time. Other family members are welcome to use the family room. Meals are provided at no cost for at least one family member. A family room is available for your use 24 hours a day and you are welcome to stay overnight if so desired.

Please feel free to phone and inquire about your loved one. It is best to choose one family member to be the spokesperson who will call Leamington Mennonite Home and convey updates to other family members.

## Spiritual Care

During this time, a member of the clergy or spiritual advisor can provide support and comfort to both the resident and family. The Home Chaplain will visit regularly and provide support and the parish pastor will be encouraged to be supportive as well if the resident and family desire.

People vary greatly in their religious beliefs and needs. If there are any rites or sacraments that are desired by your loved one, please speak to the Home Chaplain and/or Registered staff so that these can be arranged and available when needed.

## When Death Occurs

Even though death is expected, you may not be prepared for the actual moment it occurs. Remember that this is an expected death and there are no emergency measures needed. The staff will be available to help at this time.

After death has occurred:

- A physician will need to be called by the charge nurse so that death can be certified.
- You may spend as much time as needed with your deceased loved one.
- The funeral home that you have chosen will be notified and the body will be released to them.



For more information about our Palliative Care Program or our Long Term Care Home, please call the Front Office or email Marilyn Miller, Director of Nursing & Personal Care.

## Leamington Mennonite Home & Apartments



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**Leamington Mennonite Home  
& Apartments**

# Palliative Care



*For everything there is a season,  
a time for every activity under heaven.  
A time to be born and a time to die.  
A time to plant and a time to harvest.  
A time to cry and a time to laugh.  
A time to grieve and a time to dance.  
Ecclesiastes 3:1-2, 4*

**Palliative Care Support is for persons and families facing death or bereavement.**

We believe that all life and creation are a gift from God. We believe that each resident is uniquely created in the image of God, with a mind and spirit, endowed with individual characteristics, personalities and capacities, and the right to enjoy quality of life and care while at our Home.

We further believe that death is a natural process within the life cycle. As residents pass through this last phase of the life cycle, our palliative care program provides holistic resident care, comfort and support, respecting the dignity, rights and wishes of each resident.

Specifically, the palliative care program includes personal, medical and emotional care, pain and symptom management, and spiritual and bereavement support and assistance. It is the desire of our Home to support the individual decisions of care and treatment which respect the life and wishes of each resident, based on mutual and timely sharing of information by the Home, resident and resident families.

As a faith centered charitable Home, the Leamington Mennonite Home strives to ensure that the Palliative Care Program is responsive to the individual needs and personal wishes of each resident and is reflective of our biblical mandate to:

*Share each other's burdens, and in this way obey the law of Christ.*

**Galatians 6:2**



**WHAT CAN I DO?**

- Identify yourself by name and speak softly and clearly when you wish to talk with your loved one
- Sit with dying person and hold their hand if they wish.
- A light blanket might provide comfort for someone with cool skin.
- Consult with the nurses about comfort measures that you can do for your loved one such as back rubs, mouth care, etc.
- Include your loved one in conversations and take into consideration that hearing remains until the moment of death.
- Family members are encouraged to be involved, in consultation with the staff, in the care of their loved one. We suggest that only 2 or 3 family members be present at the bedside at one time.
- A calming effect may be achieved by sitting quietly at the bedside, playing soothing music or reading something comforting. Perhaps playing a favourite tape or CD would be appreciated. Be sensitive to the desires of your loved one. Our Registered Staff would be happy to help you if needed.
- Be supportive by listening to your loved one. He/she may be going through different emotional states such as guilt, anger, frustration, helplessness, or sadness and need someone to listen to their concerns.

Good-byes are appropriate. Give your loved one permission to die. Both you and your loved one may find comfort in this process of "letting go."

**WHAT CAN I EXPECT?**

**What Can I Expect of Myself?**

- Feelings such as guilt, anger, frustration, sadness, uncertainty, and helplessness are common and a normal response to the events you are experiencing.
- Tears are a natural expression of one's feelings and may occur in both yourself and your loved one. This is a time to share tears together.
- Emotional and physical exhaustion may cause you to wish that this experience would end soon.
- Normal family routines will be disrupted, and you may feel that you have lost the ability to concentrate on anything.
- Caring for your loved one can cause a great deal of stress. Consult your family physician if you are experiencing any unusual symptoms such as a headache, nausea, heart palpitations, chest pain, disorientation, and memory loss.

**What Can I Expect of my Loved One?**

- This information is to help you to understand what your loved one is going through and to help prepare you for what happens during the final stages of life. Each situation is different, and these signs and symptoms will not always occur for everyone.
- Loss of appetite and decrease in thirst may occur. Since the body is shutting down, the need for nourishment decreases. Do not give fluids if your loved one is unable to swallow. When swallowing is no longer possible, mouth care provides moisture and comfort.
- Disorientation is common. Family members and close friends may not be recognized.
- Restlessness may occur and your loved one may reach out to unseen objects, pull at bedclothes, or try to get out of bed. This occurs for many

reasons such as a decrease in oxygen to the brain or medications.

- Sleeping an increased amount of time is common and it may become more difficult to waken your loved one. As death nears, the person may slip into a coma and become unresponsive.
- Breathing patterns may change and breathing may become noisy. There may be shallow breathing with periods of no breathing. Be assured that these changes in breathing patterns do not indicate pain or discomfort.
- The skin may begin to change colour and be cooler to touch. Hands and feet may feel cool to touch because the circulation of blood is slowing down. Although the skin is cool to touch, your loved one will usually be comfortable.
- Urine output and bowel function will decrease as the food and fluid intake decrease. Your loved one may lose control of bowel and bladder function as the muscles begin to relax.
- Your loved one will become quieter and less interested in his/her surroundings, withdrawn and less sociable.
- Vision-like experiences may occur. Your loved one may see or speak to people and places not visible to you.
- A person who is dying will occasionally rally for a brief period of time.

**A multidisciplinary approach to care is used at our Home. Palliative Care will be carried out by staff working in cooperation with our Home Physician, registered staff, chaplain, and resident families.**