

Dare to discuss death

Ahead of Hospice UK's 'Dying Matters Awareness Week' in May, Stow Healthcare operations director **Ruth French** says talking openly about death and dying has never been more important.

The way we approach death and dying in social care will fundamentally affect those we care for, their loved ones and our staff. So, talking openly about death and dying has never been more important.

From 8-14 May, Hospice UK will be running its annual 'Dying Matters Awareness Week', this year focusing on death, dying and grief in the workplace. After three years in which our staff have had to face so much trauma, this isn't a week any of us can afford to let pass us by.

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At Stow Healthcare, this will be the third year that we have fully embraced this critical date in the diary. For the past two years, we have hosted a fantastic series of learning events to engage staff, residents, families and the local community with a series of standout talks including: organ donation, wills and power of attorney, the role of 'death doulas', humanist funerals and even the death rituals of ancient Egyptians. Feedback has been outstanding – staff even held informal 'debrief' sessions in their homes to talk about bitesize takeaways they can apply in their practice. This year we are moving to a mixture of in-person and virtual talks, hoping to reach an even wider group of people.

Sometimes it can feel hard to know where to start and how to talk about death in a way that is not distressing. This will vary in every care setting, and the bottom line is about listening to what people feel they need. Our colourful Mexican 'Day of the Dead' theme didn't hit the mark with



Dying Matters

residents in year one, so we adopted a more sedate tone the next year. Feedback from one family member has led to her joining one of our forthcoming sessions in May to speak about her experience being with her mum at the end of her life, so other relatives can feel better prepared. This is amazing and makes sure we can really deliver what people need,

and what they might be afraid to ask about.

Getting conversations at the end of life right truly means we can deliver the very best experience for those we care for and those they love. An honest and tender conversation at one home last year led to a resident receiving end of life care being able to get her first tattoo – a wish she thought she would never fulfil – a dainty pink freesia on her hand completed only hours before her death, and with her family present to support her. When told by the tattooist it might hurt, the resident simply replied: "Oh please, I've broken my femur before. I can handle a tattoo, especially if there's a Jack Daniels waiting for me at the end!"

With a wealth of excellent resources available, from the Hospice UK website, to powerful reads such as 'With the end in mind' by Kathryn Mannix as inspiration, talk to your team now to see if you dare to discuss death and dying in a different way this year. **ct**