

PREPARING COMMUNITIES FOR END OF LIFE JOURNEY IN COMMUNITY

This fact sheet helps Health Directors, Emergency Planners and other community leadership think about practical matters if community members are at risk of dying from a serious illness and do not want to leave community, including if they have COVID-19.

Local Health Authority Referral	People living on reserve are able to receive care from their local health authorities as well as band/community staff.
	Refer each person who wishes to remain at home to the local Health Authority Home and Community Care. Home Care Nursing Support and other health care workers can supplement the care provided by the band-employed Home Care staff.
	Health authorities will help register the person for <u>After Hours Palliative</u> <u>Nursing telephone support</u> . (9:00pm-8:00am, 7 days/week) Palliative Teams work with the Health Authority Home and Community Care staff.
Medicine for Comfort	Rural and remote locations: plan ahead for getting the person's medicine. Early is better!
	People in their last days of life cannot swallow, so they will need other ways to take medicine.
	Nurses will work with the person's family doctor or nurse practitioner to get the necessary medicine from a community pharmacy. See BC Palliative Care Benefits information in Equipment section.
Family Caregivers	Nurses have limited capacity to be in homes.
	The person will need a few people who are able to provide hands on care for practical matters: bathing, feeding, toileting, and more as the person loses the ability to do for themselves.
	Family members must be willing and able to give medicines, supported by the nurses.
	Resource: A Caregiver's Guide, A Handbook About End-of-life Care https://www.stlazarus.ca/acaregiversguide/
	There is also good information on <u>Virtual Hospice</u> including videos about how to do hands on care.
Equipment	As the person gets weaker, they will likely need more equipment and supplies.



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	 People in the last months of life are eligible for <u>BC Palliative Care Benefits</u>; it is up to their local doctor to sign them up. It covers the cost of equipment through the local health authority and medicine for comfort. Nurses will work with the person and the health authority to get the equipment in a timely manner. Rural and remote locations: plan ahead for getting equipment that the person needs. Early is better!
Other Community Supports	Elders, Knowledge Keepers, or healers may offer guidance about the journey to the spirit world. Indigenous End of Life Guides or others in your community may help support the person and family. The visits may need to be by phone or video calls for everyone's safety.
After Death	Your community may have specific practices on care of body after death; however, if the person has suspected or confirmed COVID-19, it is important to send your loved one to the Spirit World safely. The family is responsible for the body of the deceased. For more information see: <u>Fact Sheet: Care of the Deceased Body</u> which outlines safety precautions for persons with suspected or confirmed COVID-19.

References and Further Reading:

Canadian Virtual Hospice: https://www.virtualhospice.ca

Conversations about care, culture and spirituality, when living with serious illness: <u>https://livingmyculture.ca/culture/</u>

BC Centre for Disease Control (BCCDC): <u>Safe Handling of Bodies of Deceased Persons with Suspected or</u> <u>Confirmed COVID-19</u>