

CareCertify LLC

Hospice & End-of-Life Training Series

HOS-08

The Dying Process & Care at the Time of Death

Participant Guide

Hospice & End-of-Life Training Series · Audience: Hospice Aides · Nurses · Volunteers · Social Workers · Chaplains · CE Hours: 1.0

Accompanying a Person to the End

The final days, hours, and moments of life are a natural process, and knowing its signs helps the team provide comfort, prepare families, and respond with calm and dignity instead of alarm. This is some of the most sacred and skilled work in hospice — accompanying a person gently all the way to the end.

This guide covers recognizing the signs of approaching death, providing comfort in the final stages, what happens at the time of death, and how to care for the patient, the body, and the family with dignity. Calm, informed presence is the gift you bring.

Learning Objectives — by the end of this module you will be able to:

- Recognize the signs of approaching death
- Provide comfort in the final stages
- Describe what to do and not do when death occurs
- Provide immediate, dignified care of the body
- Support the family at the time of death

Section 1: Signs of Approaching Death

As death approaches, the body shows natural changes. In the final weeks: more sleep, decreasing appetite and intake, and withdrawal. In the final days: less responsiveness, very little eating or drinking, and sometimes restlessness or a settling calm. In the final hours: changes in breathing (irregular, with long pauses), cool and mottled (blotchy) skin in the hands and feet, unresponsiveness, and noisy breathing from secretions. These are normal parts of dying, not emergencies, and recognizing them helps you comfort the patient and prepare the family.

Section 2: Comfort in the Final Stages

Comfort care continues gently to the end. Position the patient for comfort, provide mouth and skin care (a dry mouth is common), keep them warm, clean, and dry, and don't force food or fluids — the body no longer needs them, and forcing can cause discomfort. Create a calm, quiet, dignified environment. Keep observing for and reporting symptoms like pain or restlessness so they can be relieved. Your gentle care comforts the patient and reassures the family.

Section 3: What to Expect at the Time of Death

For most people, death is a gradual, quiet fading rather than a dramatic event — breathing slows, becomes irregular, and stops, and the heart stops. It's often peaceful. Hearing is thought to be one of the last senses to go, so speak gently and reassuringly to the end. Sometimes a patient dies in a brief moment a family member steps away; reassure families that this is common and not their failing. Knowing what to expect helps everyone meet the moment with calm.

Section 4: What to Do (and Not Do) When Death Occurs

When an expected death occurs, stay calm and present — the moment is sacred. Importantly, do not call 911 or attempt resuscitation for an anticipated hospice death; the plan of care and any do-not-resuscitate order direct that comfort, not rescue, is the goal, and calling 911 can lead to unwanted interventions. Instead, notify the hospice nurse per your agency's procedure. The nurse (or appropriate professional) handles pronouncement and guides next steps. Support the family and follow the plan of care.

Don't call 911 for an expected death

For an anticipated hospice death, follow the plan: notify the hospice nurse, not 911. Calling 911 can trigger unwanted resuscitation contrary to the patient's wishes.

Section 5: Immediate, Dignified Care of the Body

After death, care for the body gently and respectfully, honoring the person's and family's cultural and religious wishes (covered in HOS-07). Follow the nurse's guidance and your agency's procedures, and accommodate the family's traditions about who touches the body and what rituals occur. Allow family time with their loved one as they wish; there's usually no need to rush. Treat the body with the same dignity you gave the living person — this care matters deeply to families.

Section 6: Supporting the Family in the Moment

At the time of death, families need a calm, gentle presence. Follow their lead — some want company, some want privacy. Give them time and space with their loved one, acknowledge the loss simply and sincerely (avoiding clichés), and don't rush them. Connect them to the team and to bereavement support. Your steady, compassionate presence in this moment is something families remember for the rest of their lives.

Section 7: The Team's Role at and After Death

A death is a coordinated team response. The nurse typically leads pronouncement and arranges next steps (such as contacting the funeral home), while the whole team supports the family. Follow your agency's procedures and your role, communicate, and document per policy. The interdisciplinary team's care continues after death through bereavement support for the family. Knowing your role lets you contribute calmly to a dignified, well-supported death.

Section 8: Your Own Response

Being present at a person's death is profound and can stir deep emotions, even for experienced staff. It's okay to be moved — honoring your own response is human, not unprofessional. Use debriefing, any team rituals for

honoring patients, and support resources. Caring for your own heart is what sustains you in this sacred work of accompanying people to the end of life.

This is sacred work

Accompanying someone to death is one of the most meaningful things a person can do. Honor it — and care for yourself so you can keep doing it.

Key Terms

Term	What it means
Signs of approaching death	Natural body changes in the final weeks, days, and hours.
Mottling	Blotchy, cool skin in the hands and feet near death.
Secretions	Noisy breathing from fluids the patient can't clear.
DNR	Do-not-resuscitate order; for expected deaths, comfort is the goal.
Pronouncement	Formal confirmation of death, typically by a nurse or physician.
Care of the body	Gentle, dignified care after death, honoring family wishes.

Check Your Understanding

1. Name common signs of the final hours of life.
2. Why don't you force food or fluids in the final stage?
3. What should you do — and not do — when an expected death occurs?
4. How do you care for the body with dignity?
5. How do you support the family at the moment of death?

What's Next

Looking ahead

Next, HOS-09: Supporting Families & Caregivers covers caring for the family throughout the hospice journey.