End of Life Care in English Care Homes: Governance, Care Work and The Good Death

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End of Life Care in English Care Homes: Governance, Care Work and The Good Death

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Governance

- Custody
- Keeping alive
  - Reducing costs (to the NHS and care providers)
  - Senior staff’s *prediction work*
  - *Anticipatory prescribing* of EOL medication by the GP
    - workload increase & understaffing
- Death in the care home vs in hospital
  - (1) prioritization of bodily care, (2) extension of residents’ dying, (3) construction of death as natural (intervention & non-intervention vs accidents & neglect)
- The good death is the regulations-complying death
  > Coroner’s + CQC

[120x278]Governance
[518x473]• Custody
[753x471]• Keeping alive
[644x399]• Reducing costs (to the NHS and care providers)
[472x50]• The good death is the regulations-complying death
  > Coroner’s + CQC
The three typical end-of-life trajectories (Teggi, 2018)
Care Work

• Carers wanted to improve residents’ lives, but the care home system (governance) was not geared towards this.

• Bed and body work

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• Emotional work instrumental vs non-instrumental

• ‘Being with’ residents at the end of life (EOL) countered social death.

• The predicament of care work in care homes was compounded at the EOL.
### The Good Death

<table>
<thead>
<tr>
<th>MEDICAL</th>
<th>DOMINANT GOVERNANCE-MANDATED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death is <strong>predicted</strong> and managed by senior staff, GPs and DNs: death occurs <strong>in the care home</strong> and is pain-free.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATURAL</th>
<th>AUXILIARY STAFF-IMPLEMENTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death from illness or deterioration (causes internal to residents’ bodies) as opposed to accidents (falls, injuries, choking on food/drink) or a resident’s decision to self-dehydrate/starve (causes external to residents’ bodies). Natural death is both the product of intervention and non-intervention. Sudden natural deaths are problematic because unpredicted.</td>
<td></td>
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<tr>
<th>SACRED</th>
<th></th>
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<tbody>
<tr>
<td>Death is <strong>expected</strong> by the relatives/close companions of the dying resident.</td>
<td></td>
</tr>
</tbody>
</table>

Death is **accompanied** by the carers (and/or relatives) of the dying resident.
REFERENCES

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