



# **Enhancing the Person Perspective: How the place we live can support how we die**

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“It takes  
a village  
to raise  
a child”

**What does it  
take for that  
same child to  
die well  
when they  
become  
frail?**

Neighbours  
comfortable to  
offer help

**Confident clinicians**

Shopkeepers who  
understand and  
listen

A choice over where

Clear communication  
across settings and  
professionals

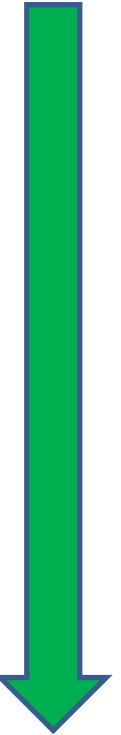
Friends who  
stay close  
before, during  
and after

**The right  
drugs at the  
right time**

**Family who know  
what to ask (and  
what to answer)**

# Enhancing the Person Perspective

1. People and communities to be more **comfortable** talking about death and dying.
2. People to be **better informed** about the realities of death.
3. People to have considered, discussed and recorded their **preferences and plans** ahead of time.



# Knead 2 Know: What is it?

- Gloucestershire CCG pilot project
  - Can we increase the number and quality of community conversations about end of life and improve recording of later life preferences?
  - Can voluntary sector bring creative approaches to encourage more natural discussions about end of life planning?
- Age UK Gloucestershire and The Wiggly Worm
- Community-based sessions combining a baking activity and facilitated discussion.



# Knead 2 Know Session

- Film clips (1000 days; Dying Matters; Malnutrition TaskForce/Age UK)
- Recent news articles
- Bread making
- Group discussion
- Individual feedback
- Bread eating

# What are we finding so far?

There is great variety in how ready people are to have these discussions.

It is not unusual for those with frailty to report that they are keen to have discussions and make plans – but their (adult) children are resistant.

Being comfortable talking about these issues does not necessarily correlate to having a clear, articulated plan in place.

# Frailty the Forgotten Voice

## Thoughts for the day

- How are people and communities informed about and involved in the development of 'best practice'?
- Are appropriate decisions and responsibilities being devolved from the clinical to the community?
- Are we thinking about the person within their whole 'village' when planning their end of life?