Thinking about end of life
Finding support and getting your affairs in order
Information and advice you need to help you love later life.

We’re Age UK and our goal is to enable older people to love later life.

We are passionate about affirming that your later years can be fulfilling years. Whether you’re enjoying your later life or going through tough times, we’re here to help you make the best of your life.

Our network includes Age Cymru, Age NI, Age Scotland, Age International and more than 130 local partners.

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What this guide is about

Thinking about the end of life can be difficult, but being well informed can help you consider all your options at a time that’s right for you. Taking steps now can give you confidence that your wishes are documented so that people close to you know what you would want if the time came when you could no longer make your own decisions. Making plans now can make things easier for those close to you down the line. And remember, you can always change your plans.

If you know you have a life-limiting illness, this guide also explains what options and services could be available as your illness progresses. If this applies to you it will help to know the questions to ask so you can make the best choices for you. It explains how to make your wishes and treatment preferences known, and helps you consider where you would like to be looked after towards the end of your life.

You may have already put some plans in place, and there may be some things that you don’t feel ready to plan for yet. Planning for the end of your life is a very sensitive and personal experience so pick out the sections in this guide that are relevant to you.

The information in this guide is applicable across England, Wales and Northern Ireland. In Scotland, contact Age Scotland for more information.

Age UK produces LifeBook, a handy book where you can keep useful information in one place. For your free copy, please call 0845 685 1061.

Key

This symbol indicates where information differs for Wales and Northern Ireland.
Thinking about the end of life can be difficult, but being well informed can help you consider all your options at a time that’s right for you.
Conversations with family and friends

Whether you’re simply thinking ahead to the future, or have been diagnosed with a life-limiting illness, it can help to talk to your family and friends so they know your wishes and preferences as you reach the end of your life.

Talking to those close to you can make it easier for them to make decisions in future and help you all prepare for what may lie ahead. It can also provide an opportunity to tell people what they mean to you and may bring resolutions to difficult relationships.

These conversations can be hard and the following suggestions may help:

• Choose a time and place where you won’t be disturbed or rushed.

• Give your family advance notice so the conversation doesn’t take them by surprise.

• Don’t worry about covering everything in one conversation. It can take time to fully discuss all your wishes and you shouldn’t try to rush this process.

• Consider writing notes beforehand about what you want to discuss. This will help you stay focused and make sure you cover everything you want to.

• Don’t be embarrassed if you get emotional. Be honest and talk about all your feelings, not just the positive ones.
Sometimes family and friends are reluctant to have these conversations. Perhaps they don’t want to think about your death, or they’re worried about saying the wrong thing. It might reassure them if you say it would help you to talk. If they’re still reluctant, try telling them that they don’t have to talk about it now, but it is something you would like to discuss at some point.

There is no right or wrong way to start planning for the end of your life. Choose the people you want to talk to, and only share as much information as you feel able to. If you don’t feel ready to talk, that’s OK too. Don’t feel the need to do anything you don’t want to.

**To do next**
Visit Dying Matters’ Find Me Help website – an online directory of local services, information and support for individuals as well as their families, carers and friends (page 38).

**For more information**
For leaflets on how to start conversations about dying, death and bereavement, contact Dying Matters (page 38) or visit the end of life pages on the NHS Choices website (page 39).
Conversations with your GP and medical team

If you’ve been diagnosed with a life-limiting illness, talk to your GP and medical team about any questions, worries or fears you and your family or friends might have.

Your doctor should explain your condition and treatment options in a way that you understand, and answer any questions about your condition or life expectancy. If your GP or medical team use phrases you’re not familiar with, make sure you ask them to clarify what they mean. We’ve included an explanation of some terms you may hear on pages 8-9.

You can decide how much or how little information you want – it’s OK if you don’t want all the information at once. Write down any questions beforehand. It may help to ask questions over several appointments so that you can talk about your options at your own pace.

It might be useful to discuss the following topics:
• what to expect as your illness progresses
• the pros and cons of your treatment options
• any treatment you don’t want to receive
• your life expectancy
• where you would like to die
• the different methods of pain relief available
• the practical and emotional support available
• the physical and emotional changes you could experience
These are not easy conversations to have so don’t worry if you get upset. It can be hard for GPs and medical teams to know how best to start a conversation about end-of-life care, but don’t be afraid or embarrassed to ask them any questions.

All this can be hard to take in so ask the staff to repeat any information, at any point. You may find it useful to take notes and ask if there is anything helpful you can read or websites you can visit. Also consider inviting a close family member or friend to attend appointments with you to help you remember the information and offer emotional support.

Your doctor and healthcare team should be able to tell you about local support groups where you can discuss your thoughts and feelings freely.

**Who can I contact?**

Depending on your condition, there may be a helpline staffed by specialist nurses and advisers who can offer you practical advice and emotional support. For example, Macmillan Cancer Support (page 38) has a cancer support helpline and Alzheimer’s Society and Dementia UK (pages 36 and 37) both have helplines for those affected by dementia.
Terms you may hear

If you have a serious illness, you may hear your medical team using various terms. The terminology can be confusing but the following definitions should help.

**Terminal** refers to an illness that cannot be cured. Such illnesses may also be referred to as life-limiting, but are not necessarily imminently life-threatening.

**End of life** refers to what is likely to be the last 12 months of a person's life.

**End of life care** focuses on the quality of a person’s life and death, rather than the length of life. It includes support for family and carers.

**End of life care planning** involves looking at issues across areas of life that are particularly significant as people reach the end of life. It includes:

- having conversations with your medical team and family and friends about your options and choices
- sorting out legal and financial issues, such as making sure you have an up-to-date will and are receiving all the financial support you’re entitled to
- exploring the options to decide where you would like to die
- planning your funeral
- thinking of practicalities, such as what will happen to your pets
**Advance care planning** is a specific form of end-of-life care planning. It involves thinking about how you would like to be cared for in the future should you lose the ability to make decisions for yourself. Advance care planning can include:

- talking to your medical team about your condition and how you would like to be cared for if you have an illness that will steadily get worse
- making an advance statement of wishes, which tells those involved in your care how you would like to be cared for but is not legally binding
- if you wish, making an advance decision to refuse certain treatment in specific circumstances, which is legally binding and must be followed by all those involved in your care
- setting up a lasting power of attorney (page 12), which give someone you trust the legal authority to make decisions on your behalf

**Palliative care support** aims to help people achieve the best quality of life following a diagnosis of a life-limiting illness. It is designed to make life more comfortable as a condition progresses. A range of health professionals can be involved in palliative care and it should be available wherever someone is looked after. It may be appropriate at any stage of an illness, to support you and your family.

**Hospices** focus on providing palliative care, seeking to improve the quality of life of people with a terminal illness from diagnosis onwards. They take care of people’s physical needs as well as their emotional, spiritual and social needs. They provide support for carers, family members and friends, both during a person’s illness and in bereavement. Hospice care is free for everyone and can be offered in a range of settings, including hospices, care homes, people’s own homes and through day services run at a hospice.
If you’ve already made a will, take time to review it to ensure it still reflects your wishes.
Making a will

Having a will is important for everyone; it means there are clear instructions about what you want to happen to your money, property, possessions (known as your estate) and online accounts after you die. If you’ve already made a will, take time to review it to ensure it still reflects your wishes.

If you die having not made a will, it can take much longer to deal with your estate and the people who inherit your money and possessions may not necessarily be the people you would have chosen.

It’s best to use a solicitor when making a will. The relevant Law Society in your nation (page 38) can provide you with a list of local solicitors.

For more information
Read our guide *Wills and estate planning*. Visit the Digital Legacy Association’s website, digitallegacyassociation.org/for-the-public, for more information on online accounts and digital legacies (page 37).
Lasting powers of attorney

A lasting power of attorney (LPA) is a way of giving someone you trust, known as your attorney, the legal authority to make decisions on your behalf if, at some point in the future, you no longer wish to make decisions for yourself or you lose the ability to make or communicate your decisions, known as losing ‘mental capacity’.

There are two types of LPA.

**LPA for financial decisions**
This can be used when you no longer wish to make decisions regarding your property and finances, or if you lose the capacity to make and communicate your decisions. It allows the person you nominate to make decisions about:

- buying or selling property
- paying the mortgage
- investing money
- paying bills
- arranging repairs to your property

**LPA for health and care decisions**
This allows you to give someone the authority to make decisions about your healthcare and personal welfare if there comes a time when you can’t make decisions yourself. The person you nominate can make decisions about:

- your care
- your daily routine
- your medication and medical treatment
- your living arrangements

You can also give special permission for your attorney to make decisions about life-saving treatment.
Enduring powers of attorney
LPAs have replaced Enduring Powers of Attorney (EPA).

Existing EPAs remain valid but they only cover decisions about property and financial affairs. You might also want to set up an LPA for health and care.

Applying for deputyship
If you lose the ability to make or communicate decisions and you don’t have an LPA, your family, friends or carer will have to apply to the Court of Protection for the ability to make decision on your behalf. The Court can either make decisions on your behalf or appoint someone else (called a deputy) to do so.

This is an expensive and often lengthy process so it’s best to get an LPA in place while you can.

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<td>The Office of the Public Guardian provides information and guidance on making an LPA or applying to the Court of Protection (page 39).</td>
<td>Read our guide Powers of attorney. Powers of attorney are different in Northern Ireland, contact Age NI for more information.</td>
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My story

‘While I don’t know what the future will bring, I’m glad I’ve done what I can to plan for it.’

Josephine, made plans for the future when she noticed her health deteriorating.

‘I was diagnosed with a lung condition several years ago. I’ve been looking after myself well enough at home, taking my medication, doing a bit of exercise and eating well, but I’m starting to notice there are some things I can’t do as well as I used to.

‘I had a couple of bad flare-ups recently and they’ve really taken it out of me, so I went back to see my GP. He explained that my symptoms would gradually get worse. I knew that deep down but I needed to hear it to start thinking about the future.

‘I already had a will but I set up a lasting power of attorney for health and care so my close friend can make medical decisions if necessary about my treatment and care in the future. We had a conversation about things like whether I’d want to go on life support and where I’d like to be looked after. It was hard for both of us and there were tears, but it was reassuring for us both. I made a lasting power of attorney for my finances too. It takes the pressure off my friend and means I can focus on getting on with my life, knowing she’ll do what’s right for me.

‘While I don’t know what the future will bring, I’m glad I’ve done what I can to plan for it.’
‘I’m starting to notice there are some things I can’t do as well as I used to.’
Managing your documents and accounts

It can be helpful to gather key documents like your birth certificate, passport, driving licence, bank account details, pension plans, insurance policies and will. Keeping these in a safe place and telling a family member or the executor of your will where they are makes things easier for them later on.

If you rely on the internet to pay bills, shop online or keep in touch with friends, it’s sensible to think about what will happen to your digital legacy after you die. The Law Society (page 38) recommend creating a personal assets log (an up-to-date list of all your online accounts), along with clear instructions about what you want to happen to each account after you die. For example, you may want some social media accounts to be deactivated, or you may want close friends or family to be able to recover sentimental items you have stored online, such as photographs.

If you have an online bank account, your executors can arrange for it to be closed down and claim the money on behalf of your estate. Don’t leave details of your passwords or PIN numbers as someone using them after your death could be committing a criminal offence.

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<td>Call Age UK on 0845 685 1061 and order your free LifeBook, a handy book where you can keep useful information in one place.</td>
<td>Visit the Digital Legacy Association’s website for further information about dealing with your digital legacy – online accounts such as email, social media and banking (page 37).</td>
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Financial help

If you’re unwell or have a disability, costs can quickly mount up. You might find you’re spending more on fuel bills or care costs, for instance. But you may well qualify for financial help.

Many people who need help with care qualify for a disability benefit, either Personal Independence Payment or Attendance Allowance, depending on their age. Anyone who isn’t expected to live longer than six months can claim them quickly and receive the benefit at the highest rate available.

Getting help towards paying the bills can be a huge relief. If you have a carer, make sure they check whether they’re entitled to Carer’s Allowance.

You may also be able to get financial help in the form of a one-off grant from charities that specialise in your health condition, or from unions or professional organisations that you belong to (or used to belong to). Turn2us can help you search and apply for grants (page 40). If you have cancer, contact Macmillan Cancer Support free or download the booklet Help with the cost of cancer to find out what support they can offer (page 38).

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<td>Find out what else you might be entitled to by contacting your local Age UK for a free benefits check, or use our online calculator at <a href="http://www.ageuk.org.uk/benefitscheck">www.ageuk.org.uk/benefitscheck</a>.</td>
<td>See our guide More money in your pocket for information about the financial help you might be entitled to. Age Cyrmu and Age NI have their own versions of this guide.</td>
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Planning your funeral

Your funeral allows friends and family to say goodbye and celebrate your life. Talking about what you would like, finding out about likely costs and putting some plans in place can reassure your family and friends, and will help them make sure that your funeral reflects your wishes.

Some of the things you might like to discuss and plan include:

• where you would like your funeral to be
• whether you want a burial or cremation
• whether you want a religious service or not
• who you would like to be invited
• what songs or readings you would like
• whether you want flowers
• what clothes you want to wear
• what you would like your guests to wear

You might want a humanist or family-led funeral, or you might have a special request, such as a woodland burial or a coffin made from materials like wicker or cardboard.

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<td>To find a funeral director contact the National Association of Funeral Directors (page 39).</td>
<td>If you would like to know more about ‘green’ funerals, contact the Natural Death Centre (page 39).</td>
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Paying for your funeral

Funerals can be very expensive so you may want to consider setting up a funeral pre-payment plan. You can find out more information about these from a funeral director or the National Association of Funeral Directors (page 39). Make sure that you know which services are included in the price as this can vary. Age Co also provides Funeral Plans, provided by Advance Planning Limited, a subsidiary of Dignity plc, in association with Age UK Enterprises Limited*.

Direct cremations are a less expensive option. The body is collected from a mortuary and taken to the crematorium where the cremation is carried out at a time that’s convenient to the crematorium. There’s no need for a hearse, no ceremony at the crematorium. A commemorative ceremony can then be held at a time and place that suits friends and family.

To do next

Dying Matters produces My funeral wishes, where you can create your personal funeral plan (page 38).

For more information

See our factsheet Planning for your funeral.

Looking after your pets

If you have pets, you will want to think about what will happen when you are no longer able to care for them, or after you die. You may know someone who is happy to help but may not be able to keep them permanently.

The Cinnamon Trust (page 36) is a charity for older people and their pets. Their volunteers can help you keep your pets at home for as long as possible, for example by walking your dog, or fostering your pet if you have a short stay in hospital. They also have a Pet Friendly Care Home Register where you can search for care homes that are happy to accept your pets. And you can arrange for the Cinnamon Trust to take on lifetime care of your pet when you die.

Dogs Trust (page 37) offers a free Canine Care Card Scheme. When you die, Dogs Trust staff will arrange for your dog to be taken to its nearest rehoming centre, where it will be looked after until they can find a suitable new owner.

Cats Protection (page 36) offers a free service called Cat Guardians. It will look after your cat until they find a suitable new owner.

If you have specific wishes about what you want to happen to your pets, mention this in your will (page 11). This will give you peace of mind that your pets will be cared for after you die.
If you have **specific wishes** about what you want to happen to your pets, **mention this in an advance statement** or your will.
Advance decisions to refuse treatment

If you feel strongly that there are some medical treatments you would not want to receive in certain circumstances, you can formalise your wishes in an advance decision. This will only be used if you lose the capacity to make or communicate decisions about your treatment, for example if you have advanced dementia or are unconscious.

To ensure your advance decision can be followed, people must know that you have made one. It’s a good idea to write it down and give a copy to your loved ones and all those involved in your care. Your GP and medical team must know about your advance decision so that they can include it in your medical notes. They can also help explain possible treatments you may be offered and what it might mean if you choose not to have them. You can change it at any time but make sure that you clearly communicate and record any changes you make.

An advance decision:

• is legally binding – those caring for you must follow your instructions
• allows you to refuse treatment, including refusing life-sustaining treatment
• must be clear about the circumstances under which you do not want to receive specified treatment
• can’t be used to request certain treatment
• can’t be used to refuse basic care that would keep you comfortable
• can’t be used to ask for your life to be ended
Discuss your advance decision with a healthcare professional who knows your medical history and the risks and benefits of treatments you may want to refuse. You may want to discuss it with your friends and family so that they understand your wishes.

If you want to refuse potentially life-sustaining treatment your decision must be made in writing, signed, witnessed and include the statement ‘even if life is at risk as a result’.

In Northern Ireland an advance decision isn’t legally binding but should be taken into account in decisions made about treatment.

**How does an advance decision interact with an LPA?**

If an advance decision and an LPA for health and care deal with the same decision, whichever was made more recently takes priority. If you create an advance decision after creating an LPA for health and care, your attorney can’t consent to any treatment refused in the advance decision.

If you have made an advance decision and want to create an LPA for health and care decisions, you’ll need to send a copy of your advance decision with your LPA application form to identify any conflicts.

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<td>Alzheimer’s Society has a draft form you might like to use to help see up your advance decision (page 36).</td>
<td>Read our factsheet <em>Advance statements, advance decisions and living wills.</em></td>
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Advance statement of wishes

If you find you’re starting to need help with personal care, you may want to write an advance statement of wishes. This allows you to say how you would like to be cared for and should be considered by all those involved in providing your care if you ever lose the ability to make or communicate your decisions.

Advance statements can explain your likes and dislikes and include anything that is important for you to be comfortable. For example, you might include information on:

• where ideally you would like to be cared for: your home, a care home or a hospice (pages 26-29)
• your dietary requirements
• your religious or other beliefs and values
• who you want to be consulted about your care
• who you would like to visit you
• foods you do and don’t like

It’s a good idea to give a copy of your advance statement to all those involved in your care, especially your care staff, GP and medical team, so that they know your wishes.

For more information
Read our factsheet Advance decisions, advance statements and living wills.
Considering where you would like to be looked after

It can be helpful to think about where you would like to be cared for if you become unwell. Your choice may not be possible, depending on your health, but if they know your wishes, doctors and loved ones can do their best to follow them as closely as possible.

Your GP and medical team will be able to tell you what you can expect as your illness progresses, what options are available in your local area, and what support you can get. It’s important to involve your family or carer so that you can make a decision together. Wherever you are cared for, the most important thing is that you receive the support you need to spend your final days in the most peaceful and dignified way. Your medical team should develop a care plan tailored to your needs and preferences, and review and update it as necessary.

In some areas of England, there are local registers that hold key information about the preferences of people nearing the end of life. Your GP or medical team should tell you if there is a local register in your area and ask you if you want to be placed on it. The register can be accessed by authorised staff including your GP, specialist palliative care team staff, out-of-hours GP service staff and paramedics. It aims to ensure that everyone involved in your care is aware of your wishes.

See the following pages for more information about where you may be looked after. If you are a carer, see page 32 to find out what advice and support you could receive.
Care at home

You may wish to be cared for at home, where you are in familiar surroundings. Some people find this helps them feel more in control and makes it easier to say goodbye.

If you would like to be cared for at home, talk it over with your GP and the people you live with to see how they feel about it. Find out what support could be available to help you and your carers during the day and at night. If you live alone, speak to your healthcare team to see what support would be available around the clock.

Your GP has overall responsibility for your care at home. They should put you in touch with organisations that can support you, talk you through what might happen as your condition gets worse, prescribe medication or refer you to other doctors if necessary.

If you begin to find personal care and other tasks difficult, ask for a care needs assessment from social services. Everyone is entitled to an assessment. Depending on the outcome of your assessment, you might receive support, aids or adaptations to help you stay independent and safe.

Your GP can arrange for you to be supported by a district nurse who will organise and coordinate your care at home. The district nurse or an occupational therapist can assess how easily your home can accommodate additional equipment that you might need. For example, you may need a hoist or a pressure-relieving mattress. They can advise you on this and make necessary arrangements. You may also receive help from specialist nurses or hospice home care services if you need it.
Hospices and palliative care teams can work closely with GPs, community nurses and Marie Curie nurses to co-ordinate your care. They are often involved in supporting people who wish to remain at home through a mix of specialist services such as:

• short-term inpatient care to control symptoms
• hands-on care
• advice on controlling pain and symptoms
• emergency advice lines and information
• emotional support and respite services

For more information

Read our guide *Getting help at home*. Read Marie Curie’s guide *Being cared for at home* for further information on the support Marie Curie Nurses, and other professionals, can give you (page 39).
Care homes

If you live in a care home, you may wish to ask whether it can offer you the care and support your doctors say you need in the last few weeks and days of your life.

Talk to the manager about their experience of supporting residents at the end of their lives. Ask whether staff have had special training, and what GP and community nursing support is available to allow you to die in familiar surroundings, avoiding unnecessary hospital admission as your health deteriorates. Hospices provide support to care homes so speak to the manager or contact your local hospice.

If you currently live in a residential care home, you may need to move to a nursing home where nursing staff are on duty 24 hours a day. If you do need to move, ask your medical team if your needs mean the NHS should be responsible for funding your care.

If you need to move to a different care home, think about the practical considerations of such a move. Will you still be near your family and friends? Will your doctor and healthcare team stay the same? Discussing all these considerations with your medical team and family, friends and carers should mean that you are all comfortable with your future care.

To do next

In England, search for and read care home inspection reports on the Care Quality Commission (CQC) website (page 36). In Wales, visit the Care Inspectorate Wales (CIW) website (page 36). In Northern Ireland, visit the Regulation and Quality Improvement Authority (page 40).

Search for care homes that have been recognised as providing high quality end of life care on the Gold Standard Network website (page 38).
Care from a hospice

Hospices specialise in supporting people with terminal illnesses, often from the point of diagnosis. Hospices have medical, nursing and other experts to provide pain control, rehabilitation, emotional and bereavement support, as well as other supportive services such as complementary therapies for you and those close to you. Their care and support will be tailored to your needs. You may also hear this type of care referred to as palliative care.

You can go into a hospice for different reasons. It may be for a short time while your symptoms are controlled, or for a period of respite care to give your carer a break. People may be admitted to a hospice during the final stages of their illness. Visiting is flexible and your family can receive emotional and bereavement support. Hospice beds are rarely a long-term option for care.

Some hospices have day services, such as medical and complementary treatments, or provide social and emotional support while you live at home, and the chance to meet other people going through similar experiences.

Speak to your GP and medical team to find out more about local hospice services in your area. Hospice care is free for patients and their carers, family members and friends.

If you’re you want to find out more about what support is available from a local hospice, ask to visit the hospice or talk to staff before making a decision.

For more information

Visit Hospice UK’s website (page 38) for further information on hospices and type of services they offer. You can also read their booklet What is hospice care?
‘Now that I’ve planned I feel confident and reassured, and so do those around me.’

When Henry was diagnosed with prostate cancer, he felt reassured once he’d planned for his future care.

‘Recently though, I’ve started going to a hospice once a week to keep a check on how I’m doing. Last month, I was handed a copy of an advance care plan to read and think about. To be faced with a form that asks where you want to be looked after and whether there is any treatment you want to refuse was a shock, but my doctor and palliative care nurse both took me through it in a relaxed way. We considered each question individually and discussed the implications.

‘I made notes and then took a week to think everything over and talk to my wife and family before completing it.

‘Now that it’s done I feel like a weight has been lifted from my shoulders. I’ve made an advance decision which tells people what treatment I don’t want and it takes the pressure off my wife and family if they’re ever faced with the decision.

‘I’ve also written an advance statement that tells people all the things I do and don’t like, including how I take my tea and what I like to watch on TV. I’ve even specified who I want to preside over my funeral and the exact music I would like to be played.

‘It’s not easy to think about my last few days, but now that I’ve planned I feel confident and reassured, and so do those around me.’
‘Now that it’s done I feel like a weight has been lifted from my shoulders’
Advice and support for carers

If you look after your partner, a friend or relative who needs help because they are ill or disabled, then you are a carer, even if you’ve never thought about yourself in that way.

Caring for a friend or relative can be rewarding, but at times it may also feel overwhelming and demanding. Don’t overlook your needs and find out about available support.

Ask your local council for a carer’s assessment. In Northern Ireland, contact Age NI (page 35) to find out who to contact. You may be able to get support with caring, equipment to help you in your caring duties or respite care to give you rest. There are limits to the care you can provide and it’s important to make time for yourself.

If you spend at least 35 hours a week caring, you may also be entitled to financial assistance, such as Carer’s Allowance.

Tell your GP that you’re a carer and discuss the impact this is having on your own health. They will be able to offer you advice and support, and you may be entitled to additional health services such as a free annual flu jab.

And don’t overlook your emotional health. Family and friends, carers’ groups, online forums, your GP or a counsellor can all provide you with space to share your feelings.

For more information

Read our guides Advice for carers, Carer’s Allowance and Caring for someone with dementia for more information about the help and support you can receive.
Thinking about your loved ones

Once you’ve made all your practical plans, you may find it useful to revisit our information on conversations with family and friends (page 4).

Perhaps there are things you would like to share with people before you die, or maybe you want to create something to leave behind. Some people find it helpful to write down their family history for the next generation or put together a memory box or scrapbook of their life.

It may help you to know that there are a number of charities and organisations that can offer support and information to your loved ones after you die.

The most important thing throughout is to do what feels right for you, when it feels right.

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<tr>
<th><strong>Who can I contact?</strong></th>
<th><strong>For more information</strong></th>
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<tr>
<td>Cruse Bereavement Care has a network of free confidential services across the UK that provide emotional support to those who have been bereaved (page 37).</td>
<td>Macmillan Cancer Support has information about memory boxes (page 38). Your loved ones may also find it useful to read our guides <em>Bereavement</em> and <em>When someone dies.</em></td>
</tr>
</tbody>
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Talking to children and young adults

If you have children or young adults in the family, you may want to talk to them about your situation. This can be difficult but it can help them make sense of what’s going to happen and allow you to answer their questions and address their fears and worries. Don’t be afraid of getting upset. Being honest about your emotions is a good way to let them know that it’s OK to show your feelings.

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<tr>
<td>The Childhood Bereavement Network and Winston’s Wish offer information and support for children and young adults affected by death (pages 36 and 40).</td>
<td>Dying Matters produces a leaflet called What should you tell children about death (page 38).</td>
</tr>
</tbody>
</table>
Useful organisations

**Age UK**
We provide advice and information for people in later life through our Age UK Advice line, publications and online.

**Age UK Advice:** 0800 169 65 65  
Lines are open seven days a week from 8am to 7pm.  
www.ageuk.org.uk

Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

In Wales, contact  
**Age Cymru:** 0800 022 3444  
www.agecymru.org.uk

In Northern Ireland, contact  
**Age NI:** 0808 808 7575  
www.ageni.org

In Scotland, contact  
**Age Scotland:** 0800 124 4222  
www.agescotland.org.uk

The evidence sources used to create this guide are available on request. Contact resources@ageuk.org.uk
**Alzheimer’s Society**
Offers advice, information and support in England and Wales to people with dementia, their families and carers through its helpline and local offices.

Tel: 0300 222 1122
www.alzheimers.org.uk

**Care Inspectorate Wales (CIW)**
National regulatory body of care and social services in Wales.

Tel: 0345 600 9527
www.careinspectorate.com

**Care Quality Commission (CQC)**
National, independent regulator of all health and social care services in England.

Tel: 03000 61 61 61
www.cqc.org.uk

**Cats Protection**
Will arrange for your cat to be looked after until they can find a suitable new owner through their Cat Guardians service.

Tel: 03000 12 12 12
www.cats.org.uk

**Childhood Bereavement Network**
Offers support and advice for bereaved children, young people and their families.

Tel: 020 7843 6309
www.childhoodbereavementnetwork.org.uk

**Cinnamon Trust**
Charity for older people and their pets.

Tel: 01736 757 900
www.cinnamon.org.uk
Cruse Bereavement Care
Offers information and support to bereaved people, both over the phone and face to face.

Tel: 0808 808 1677
www.cruse.org.uk

In Northern Ireland, contact Cruse Bereavement Care Northern Ireland

Tel: 0808 808 1677
www.cruse.org.uk/northern-ireland

Dementia UK
Provides information for those affected by dementia, their family, friends and carers. They have a helpline staffed by Admiral Nurses who can offer advice and support.

Tel: 020 7697 4160 or 0800 888 6678 (Admiral Nurse helpline)
www.dementiauk.org

Digital Legacy Association
Helps people manage their digital legacy, ensuring end of life wishes are met in both the real world and digital realm.

Tel: 01525 630 349
www.digitallegacyassociation.org

Dogs Trust
Arrange for your dog to be looked after until they can find a suitable owner through their free Canine Care Card Scheme.

Tel: 020 7837 0006
www.dogstrust.org.uk
**Dying Matters**  
Aims to help people talk more openly about dying, death and bereavement, and make plans for the end of life.

Tel: 08000 21 44 66  
www.dyingmatters.org

Includes an online directory of services at:  
www.help.dyingmatters.org

**Gold Standard Framework**  
Provides a database of care homes that provide high quality end of life care.

www.goldstandardsframework.org.uk/accredited-care-homes

**Hospice UK**  
The national charity for hospice care, supporting the work of more than 200 member organisations.

Tel: 020 7520 8200  
www.hospiceuk.org

**Law Society of England and Wales**  
Helps people find a solicitor, advises on what to expect when they visit one and produces guides to common legal problems.

Tel: 020 7320 5650  
www.lawsociety.org.uk

**Law Society of Northern Ireland**  
Tel: 028 9023 1614  
www.lawsoc-ni.org

**Macmillan Cancer Support**  
Provides practical, medical and financial support for people facing cancer, their carers and loved ones.

Tel: 0808 808 0000  
www.macmillan.org.uk
**Marie Curie**
Provides care and support to people with a life-limiting illness, their carers and families.

Tel: 0800 090 2309  
www.mariecurie.org.uk

**NHS Choices**
Find out about local NHS services in England and get information on end-of-life care.

www.nhs.uk

In Wales, contact **NHS Direct Wales**
Tel: 0845 4647  
www.nhsdirect.wales.nhs.uk

In Northern Ireland, contact **NI Direct**
www.nidirect.gov.uk

**National Association of Funeral Directors**
Offers support and information about funerals in the UK.

Tel: 0121 711 1343  
www.nafd.org.uk

**Natural Death Centre**
Provides information on all types of funerals.

Tel: 01962 712 690  
www.naturaldeath.org.uk

**Office of the Public Guardian**
Provides information and guidance on making a power of attorney or applying to the Court of Protection.

Tel: 0300 456 0300  
**Regulation and Quality Improvement Authority**
Independent regulator of health and social care in Northern Ireland.

Tel: 028 9051 7500
www.rqia.org.uk

**Turn2us**
Helps people access the money available to them through welfare benefits, grants and other help.

Tel: 0808 802 2000
www.turn2us.org.uk

**Winston’s Wish**
Offers support, information and guidance to bereaved children, young people and their families.

Tel: 08088 020 021
www.winstonswish.org.uk
Supporting the work of Age UK

Age UK aims to enable all older people to love later life. We provide vital services, support, information and advice to thousands of older people across the UK.

In order to offer free information guides like this one, Age UK relies on the generosity of its supporters. If you would like to help us, here are a few ways you could get involved:

1. **Make a donation**
   To make a donation to Age UK, simply complete the enclosed donation form, call us on **0800 169 8787** or visit [www.ageuk.org.uk/get-involved](http://www.ageuk.org.uk/get-involved)

2. **Donate items to our shops**
   By donating an unwanted item to one of our shops, you can help generate vital funds to support our work. To find your nearest Age UK shop, visit [www.ageuk.org.uk](http://www.ageuk.org.uk) and enter your postcode into the ‘What does Age UK do in your area?’ search function. Alternatively, call us on **0800 169 8787**

3. **Leave a gift in your will**
   Nearly half the money we receive from supporters come from gifts left in wills. To find out more about how you could help in this way, please call the Age UK legacy team on **020 3033 1421** or email legacies@ageuk.org.uk

Thank you!
What should I do now?

For more information on the issues covered in this guide, or to order any of our publications, please call Age UK Advice free on 0800 169 65 65 or visit www.ageuk.org.uk/moneymatters

Our publications are also available in large print and audio formats.

The Age UK Group offers a wide range of products and services specially designed for people in later life. For more information, please call 0800 169 18 19.

If contact details for your local Age UK are not in the box below, call Age UK Advice free on 0800 169 65 65.