

Director of Public Health

Annual Report 2023/24: Inequalities in the experience of death and dying: What are the assets and opportunities within Kirklees communities?

PLAIN ENGLISH SUMMARY

Introduction from Rachel Spencer-Henshall, Director of Public Health

Even though death affects us all, we don't really like to talk about it or plan for it.

Most people die from an illness they have had for a while, which gets worse over time and may mean more trips to the doctor, hospital or hospice. Some groups of people get better care at the end of their lives than others. We wanted to know more about these differences, and the effect they had on people living and dying in Kirklees.

We spoke to people from organisations that work with groups of people who might not get the best care at the end of their lives. We used what they told us to find ways the health and care system could be made better. There is already lots of good work going on in Kirklees to help people at the end of their lives. This report also shines a light on some of this work.

I hope this report tells you something new about death and dying. By sharing what we know and changing how we do things, people in Kirklees will get more equal care and support at the end of their lives.

Thank you.



Who we spoke to

For this report, we spoke to people who worked with the following groups:

- People who are LGBTQ+;
- People who are homeless;
- People with learning disabilities;
- People with illnesses other than cancer;
- People with mental illness or problems with alcohol or drugs;
- People living in poverty (not having enough money for important things like food and heating their homes);
- People treated differently because of their race, ethnicity or faith;
- People who are unpaid carers.

What we found

Some topics talked about only applied to one of the above groups. You can find more details on these issues in the full report.

Many topics were the same across different groups, including:

- Staff not always trained to be able to help different types of people.
- Patients and carers not knowing how to get information about where and how they can be cared for.
- Finding it difficult to talk about death and dying.
- Not understanding what different people need, or thinking about what their situation is and the choices they can make.
- Problems dealing with or getting into services, and services not talking to each other.

What could help things work better?

- Help people to talk more about death and dying. This may be about how they want to be looked after, and what they want to do before they die. The right care and support for that person can then be put in place.
- Make sure staff, patients and carers know what help is out there, and train staff to use the best ways to talk about death with different people.
- Make sure people and services know about hospice care, and other care that is just for people who will die from their illness, as soon as this illness is found. This will help everyone in every place have a good death, and live a good life until this happens.
- Try to put support in place that can help make people's choices easier, so more people feel they are getting the care they want and need.

- Make use of all the good work that we already know about in Kirklees. Try to do more of this work, so more people can be helped. This is easier for people if it happens close to where they live.
- Ask people how services could be made better for others like them. This also means learning how better end-of-life care could make other parts of the health system better.
- Look at what other reports say about how to help people at the end of their lives.

Steps people can take

If you're able to, it can be good to plan ahead by making a will and funeral plan. Think about donating your organs and about what will happen to your online information. Let your loved ones know what your wishes are, and ask them to share their wishes with you.

Full report

Read the full report at:

www.kirklees.gov.uk/dying-well-matters