



Terminal care planning checklist for nurses in the community

Purpose

This document provides a checklist to assist nurses providing care to a person at home in their final hours, days, or week. It aligns with the terminal care management clinical process as described in the [Prompts for End-of-Life Planning \(PELP\) Framework](#)

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Actions	Yes	N/A
Advance care planning (ACP) and medical goals of treatment		
ACP documents reviewed		
Substitute decision maker/s identified		
Medical goals of treatment plan reviewed		
Preferred place of care and current preferred place of death documented		
Documentation		
Not for resuscitation (NFR) order available in the home		
Expected death at home documentation for police/ambulance available in the home		
Person/organisation to complete verification of death documentation identified		
Person/organisation to complete Medical Certificate of Cause of Death identified		
Body or tissue donation information recorded		
Symptom management		
Comprehensive symptom and comfort assessments completed		
Ongoing symptom assessment and management plan in place		
Urinary and bowel management considered (including order for IDC)		
Implantable cardioverter-defibrillator (ICD) deactivated		
Medicines		
Medicines available in the home with written orders		
Catastrophic order completed and plan in place		
Person/organisation to write continuing scripts and orders documented		
Pharmacy identified and process to obtain medicines in place		
Spiritual/cultural/emotional		
Spiritual needs considered		
Cultural needs considered		
Emotional support/counselling referral completed		
Practical considerations		
Formal supports organised and informal supports identified		
Equipment including consumables organised		
Family/carers		
Suitability/willingness of family/carers to support person at home at end-of-life assessed		
Family/carers' education provided:		
<ul style="list-style-type: none"> • Process for support including out-of-hours • Swallowing difficulties and poor appetite at end-of-life • Symptom management • Palliative medicines • Subcutaneous medicine administration • Practical cares • Recognising death and dying • Immediate after-death care 		
Need for funeral director discussed		
Cultural needs of family/carers considered		
Spiritual needs of family/carers considered		
Bereavement risk for family members assessed		
Collection of equipment organised after death		