

END OF LIFE CROSSROAD

[Back To Navigating The Caregiver CrossRoads \(main page\)](#)

Definition

This CrossRoad will discuss the physical, emotional and financial aspects of the dying process. It will talk about the importance of engaging in discussions regarding the older adult's choices for end of life medical care and final wishes.

Glossary of Terms

A list of terms you may come across while researching this topic.

Search Our Database

On the Navigating the CrossRoads main page you will find a drop down menu of pre-populated search terms that will bring you to a list of Central Massachusetts agencies and programs that relate to this topic. You may also [CLICK HERE](#) to go to our Guide to Elder Services, an online searchable database, to do more extensive searches or for results in a specific zip code, city/town or Central Massachusetts geographic region. ***If you are unable to find a keyword on the pre-populated list and it consists of two terms, transpose the order of the terms i.e. to search for Family Counseling use the keyword Counseling, Family.*

Helpful Links

A list of outside websites to visit for further information.

Table of Contents

[Introduction](#)

[Starting The Conversation](#)

[Physical](#)

- [Hospice Care](#)
- [Palliative Care](#)
- [Pain Management](#)

[Emotional](#)

[Spiritual](#)

[Legal](#)

- [Power Of Attorney \(POA\)](#)
- [Advance Care Directives](#)
 - [Living Will](#)
 - [Health Care Proxy](#)
 - [Do Not Resuscitate \(DNR\)/Do Not Intubate \(DNI\) Order](#)
 - [Medical Orders For Life-Sustaining Treatment \(MOLST\)](#)
 - [Organ & Tissue Donation](#)
 - [Donation To Medical Science](#)
- [Last Will And Testament](#)

[Financial](#)

[Funeral Arrangements](#)

- [Disposition Options](#)
 - [Cremation](#)
 - [Direct Cremation](#)
 - [Ground Burial](#)

- [Direct Burial](#)
- [Mausoleum Crypt](#)
- [Burial At Sea](#)
- [Service Options](#)

[Caregiver Support/Bereavement](#)

This information was written with older adults in mind and is meant to provide a general overview of end of life care and options. The information provided does not discuss every aspect of this topic. This information does not constitute legal nor medical advice. We encourage you to consult with competent professional and/or legal representatives for advice.

[Back To Top](#)

Introduction

A dignified and meaningful death - is this not that what we all want? None of us are immune to the fact that accidents and serious illnesses can unexpectedly occur. Even with all of the medical advances that science has made at this point in time, death is a reality for everyone. You, as the caregiver, can help the older adult by opening up the end of life topic for discussion *before* you are put in a position that forces you to make decisions about the older adult's care without being aware of his/her wishes. As a caregiver, proper end of life planning will involve open and ongoing conversations between you and the older adult who you are caring for regarding his/her preferences for care throughout the dying process. Both of you should focus on planning the end of life journey that the older adult desires. This topic might send a chill up your spine. However, we strongly encourage you to be brave and open this line of communication. Hopefully, by clarifying expectations both of you will gain some sense of comfort.

If the older adult is generally healthy, planning ahead may involve only the immediate family members and the older adult. This will be very different if you find yourself in a position where you have never had this discussion and the older adult receives a terminal diagnosis or suddenly encounters a critical emergency situation. In these instances you will be planning for the older adult's more immediate end of life. If you have already established a CareTeam it will be to your advantage to involve these individuals in the end of life discussions. The older adult will need to decide, to the best of his/her ability, who to include in the planning. Extra and unnecessary grief can be avoided if honest, specific discussions and documentation about an older adult's wishes for end of life are upheld. Be aware that the planning suggestions that we have outlined below remain the same in both situations except that the number of individuals may vary.

Starting The Conversation

Discussions about end of life preferences are best held when the older adult in your life is mentally capable of fully participating in these conversations. It is very important that you listen to the older adult's needs, concerns, fears, wants and hopes. We recommend that you start the conversation by saying that you want to ensure that the older adult's end of life wishes are honored and that you would like to talk about some important things. Explain that you do not want to question whether you are making the right decisions on his/her behalf in any future crisis or end of life situations. Emphasize that you want to be confident that you are supporting the choices for end of life that the older adult *has already made*.

In the course of these conversations, you may find that the older adult has wishes or plans that you do not agree with or are unable or unwilling to carry out. Everyone should get to choose where they die and what medical treatment or pain management they wish, or do not wish, to receive. Each individual should also get to decide as to how their own final remains will be treated. Talking, planning, and putting wishes in writing, provides you and the older adult with the opportunity to identify who on the CareTeam (that may include family, friends, spiritual leaders, medical personnel, legal experts, volunteers and a host of others) is able and willing to step in and carry out those wishes. Having the conversation now will allow everyone to know, and agree to, their individual roles and duties and allow the older adult's values, beliefs and choices for end of life care to be respected. It also allows you to share the responsibilities with others.

You don't have to go it alone!

Also keep in mind that these are not one time discussions. Changing circumstances and/or capabilities may cause the older adult to alter some of the decisions previously made. This is to be expected. Successful planning for the older adult's end of life requires ongoing discussions amongst you, the older adult and members of the CareTeam so that everyone is always up to date. A simple,

[Back To Top](#)

direct conversation now could prevent a great deal of unnecessary confusion, guilt, stress, and burden for you during the older adult's end of life journey. Communication is the key.

Physical

The older adult may choose to receive services from any of the following programs during the final days, weeks, months and years of their life.

Hospice Care

Hospice is a concept of care designed to provide support for terminally ill patients and their loved ones. Typically when an older adult chooses hospice care they have decided to no longer pursue life sustaining medical treatment. Staff and volunteers for hospice programs provide palliative care for their patients. Palliative care is an area of health care that focuses on pain management, relief from symptoms, patient comfort, and improvement in quality of life. This supportive care is based on the philosophy that everyone deserves to live the rest of their life with dignity and overall comfort. Hospice services are provided by a team of specially trained individuals including physicians, nurses, social workers, clergy, and grief counselors. If you choose hospice care this component of your CareTeam will focus on the body, mind, and spirit of both the older adult, who is the patient, and their loved ones. Hospice care is provided to patients wherever they call home, whether that is in their own house, a long-term care facility, or a residential hospice facility. Hospice coverage is a benefit under Medicare, MassHealth (Medicaid), TRICARE, and many private insurance policies. Hospice care can only be brought in for patients who have a prognosis of six months or less to live. Be aware that patients can remain on hospice beyond the six months as long as they continue to remain eligible.

Palliative Care

The older adult may choose palliative care which is a specialized form of medical treatment for individuals with serious medical diagnoses. The primary goal of palliative care is to relieve patients of the physical and mental symptoms, pain, and stress that accompany their condition. Palliative treatments are specifically designed to improve the overall quality of life of both the patient and their loved ones. This type of care is not meant to cure a medical condition. While this comfort care provides relief from symptoms and suffering, it will not cause the disappearance of a medical diagnosis. Palliative care is not limited to individuals who are terminally ill. It is available for anyone who is seriously ill and in need of relief from the discomfort associated with a medical condition. Such care is provided by physicians, nurses, and social workers who consult with the patient's own primary care physician and specialists to determine the best methods of treatment. Other professionals such as massage therapists, nutritionists, psychiatrists, and pharmacists may get involved in palliative treatment. Because palliative care is designed to make patients as comfortable as possible, it is also very important that the older adult's family and friends remain an integral part of the caregiving process.

Pain Management

There may come a time when the older adult seeks assistance in alleviating their pain. Pain management is a branch of medicine that focuses on easing the suffering and improving the quality of life of those living with pain. A typical pain management team includes physicians, nurses, clinical psychologists, physiotherapists, occupational therapists and pharmacists. As pain is very complex, there are many different treatment options to deal with it, including medications, therapies, and mind-body techniques. When a medical condition is resistant to treatment, pain persists after the condition has healed, or medical science cannot identify the cause of pain, the goal of medical treatment becomes the relief of suffering. These kinds of long-term, chronic pain are treated with both a physical and mental approach. Various narcotic medications are utilized in the treatment of pain and when properly administered have almost zero chance of addiction and usually few side effects. Other forms of pain management treatment include physical therapy and exercise programs. In addition to

[Back To Top](#)

the physical side, pain is treated with a psychological approach that includes therapies such as biofeedback, cognitive behavioral therapy and antidepressants.

Emotional

There are a very wide variety of emotions you and the older adult may experience throughout the dying process: grief, sadness, anger, and even relief. However, two feelings that may be diminished through proper end of life preparation are stress and confusion. When you are aware of the older adult's wishes ahead of time and work to create a suitable end of life plan, you will be able to focus more on the emotional relationship you share with one another. While everyone approaches death differently, we all share the goal of obtaining closure before a life comes to an end. If circumstances provide you with the opportunity to do so, there are a lot of simple yet powerful things you can do and say to provide comfort for yourself and the older adult who is dying. Resolving any possible issues you two may have had in the past and offering your forgiveness to each other are very healthy ways to bring closure to a relationship. Also, exchanging your love and/or respect for one another and saying thank you for the impact you have had on each other's lives are important steps to take towards moving on. Finally, making sure you both say your proper goodbyes adds closure and some comfort to a very difficult time. As a caregiver, it is important that you do everything in your power to bring both you and the older adult peace during your final moments together. One way or another, you will need to find some sort of emotional release during this time, whether it is through meditation, prayer, music, or simply just reminiscing and laughing. To help the older adult through this process, it is important that you give him/her "permission" to let go and leave you. Knowing that you are ready for them to leave when it is their time can eliminate their guilt and put the older adult at ease as they take their final step.

Upon the death of the older adult, grief will be an extremely normal reaction, and there is no one correct way to grieve. Your mourning experience will reflect your own culture, spiritual beliefs, and personality. As you adjust to life without the older adult, it is always helpful to focus on the memories and relationship you two shared to accompany you through the five stages of grief. These five stages, denial, anger, bargaining, depression, and acceptance, are very common emotions to feel during the bereavement process. Taking care of yourself, both mentally and physically, is essential when coping with your loss and eventually feeling ready enough to move forward.

Spiritual

Spirituality can be defined as the deepest values and beliefs by which people live as they try to understand the meaning behind their own existence. Spiritual beliefs are especially important during the dying process, whether you are someone who is dying or someone who is being left behind. All individuals attempt to come to terms with whatever lies ahead for them after death, and no two people share the same exact spiritual beliefs. The older adult may believe that there is nothing beyond our life here on Earth, or he/she may welcome death as a liberating passage into an infinite afterlife. You, as the caregiver, must respect the older adult's beliefs and provide the proper resources to meet his/her specific spiritual needs. Good two-way communication is essential when assessing what, if any, spiritual issues the older adult wishes to address. Initiating open-ended topics of discussion is a great way to explore spiritual elements and actively listen for any needs the older adult expresses. Finding out the older adult's spiritual goal(s) for the end of life is important so that you can do whatever is possible to assist in achieving them. This could mean conducting a life review with the older adult, taking steps to preserve his/her dignity, or connecting the older adult to loved ones and community. For older adults with religious affiliations, bringing in clergy members is often desirable and helps facilitate deep spiritual discussion. As the older adult has spiritual concerns addressed and questions answered, the individual may begin to feel more prepared for death. Also important during this time is for you, the caregiver, to prepare yourself spiritually for losing the older adult. If you personally follow a specific spiritual practice you may find it beneficial to seek out leaders of that

[Back To Top](#)

community or other like-minded individuals to talk about what you are experiencing. It is beneficial to participate in these deep discussions and get in touch with your own level of spirituality. You must be careful to not impose your own culture, values, and beliefs on the older adult. Addressing the spiritual needs of both yourself and the older adult is a valuable way for you both to cope with the dying process and for you to cope with the grief that is to come.

Legal

There are many different legal resources available to help you and the older adult as you plan for the end of his/her life as well as after their death. These tools help the older adult specify personal, financial, and medical end of life choices. The extent to which the older adult wants to receive medical treatment, including whether they want resuscitation, are important topics. When these are discussed ahead of time, stress and conflict may be prevented. Each of these legal resources is a way to help get the end of life conversation started and to begin planning for legal situations.

Power Of Attorney (POA)

A power of attorney is an authorization for someone to act on another person's behalf regarding private affairs, business, and/or other legal matters. A power of attorney may be specialized, limited to one specific act, type of act, or time frame, or general. Whatever the power of attorney defines as its scope is what a court will enforce. A power of attorney may be granted both orally and in writing, but many laws and institutions require a written power of attorney in order for it to be honored.

Advance Care Directives

Advance care directives are specific instructions that the older adult prepares to specify personal preferences regarding medical treatment if the older adult should develop an illness or injury that restricts him/her from expressing these wishes. These instructions are only enacted if the older adult becomes physically and/or mentally unable to make decisions for him/herself. Through an advance care directive, the older adult may also designate another person that he/she trusts to make medical care decisions for them. Advance care directives can help alleviate personal, financial, and legal concerns for everyone involved. Some examples of Advance Care Directives include:

- **Living Will**

A living will is a written legal document that expresses the older adult's wishes if he/she should become seriously ill or injured. A living will speaks for an individual who is no longer able to communicate. In this document, the older adult may indicate specific care or treatment that he/she does or does not want under specific circumstances. Certain care, procedures, and treatments the older adult may wish to discuss in his/her living will may include: Cardiopulmonary Resuscitation (CPR), artificial feeding (through intravenous or a tube), prolonged life on a respirator, or blood transfusions. Please be aware that laws regarding living wills vary from state to state. Currently, living wills are not recognized by Massachusetts state law as legally binding documents. This means that hospitals and physicians in Massachusetts are not required to adhere to the wishes expressed in a living will.

- **Health Care Proxy**

Everyone over the age of 18 in Massachusetts should have a completed Health Care Proxy form. This form is a legal document that allows the older adult to appoint someone else, known as the Health Care Agent, to make medical or health care decisions for him/her if he/she becomes incapable of doing it on their own. Some states may refer to this as a Special Medical Power of Attorney. [CLICK HERE](#) to visit UMass Memorial Health Care's Better Ending page and obtain a copy of a Massachusetts Health Care Proxy form. Be sure to read the instructions carefully. This form is available in many different languages and in Massachusetts, does not need to be notarized in order for it to be legally binding. However, Health Care Proxy laws and forms vary from state to state and many states require a

[Back To Top](#)

notarization of this form for it to be valid. Therefore, it is always a good idea to get a Health Care Proxy form notarized to improve the chances of it being legally upheld anywhere in the country. As opposed to living wills, Health Care Proxy forms are legally binding in Massachusetts and are a way for the older adult to ensure that his/her wishes are enforced. When the older adult is choosing someone to be his/her Health Care Agent the best individuals may actually not be the individuals closest to the older adult if for whatever reason they are unable or unwilling to carry through the older adult's wishes. If it is known that an individual is not good under pressure or in times of emotional stress then even if they are the significant other, the only child, or the best friend it may not be wise to assign them the role. Communication is extremely important in the health care proxy process and it is essential that the older adult makes his/her wishes very clear to the person chosen to be the Health Care Agent and the person possibly chosen to be an alternate Health Care Agent.

- **Do Not Resuscitate (DNR)/Do Not Intubate (DNI) Order**
As a caregiver you should have a good understanding of the older adult's choices with regards to medical interventions. The older adult may want every possible medical intervention done to them during medical crises. On the other hand they may not want any medical intervention to artificially prolong their life. Either decision is very personal and must be honored. A Do Not Resuscitate/Do Not Intubate order is a legal order in which the older adult indicates that he/she does not wish to undergo Cardiopulmonary Resuscitation (CPR) or Advanced Cardiac Life Support (ACLS) if he/she stops breathing or his/her heart stops beating. However, it does not affect the continuation of any other appropriate medical treatments. A DNR/DNI request can be made by the older adult or his/her Health Care Agent. The older adult should always inform his/her family, physicians, and Health Care Agent of any wishes to refuse resuscitation. DNR/DNI orders are legally binding and physicians must adhere to the noted wishes of the older adult.
- **Medical Orders For Life-Sustaining Treatment (MOLST)**
MOLST forms are written instructions from a physician, nurse practitioner, or physician assistant that contain orders for end of life medical treatment based on the patient's specific wishes. These orders are written to other health care professionals and contain the older adult's preferences about life-sustaining treatments. A life-sustaining treatment is any medical treatment that attempts to keep a person alive including, but not limited to, resuscitation treatments. Unlike a DNR/DNI order, MOLST forms can be used to request as well as refuse treatments. Some states may not honor a MOLST form but in the state of Massachusetts, MOLST forms are legally binding and physicians must adhere to the expressed end of life treatment wishes of the older adult. [CLICK HERE](#) to visit the MOLST website for more information. [CLICK HERE](#) for a sample MOLST form provided by the Massachusetts MOLST program. In other states this form is called Physician Orders for Life-Sustaining Treatment (POLST).
- **Organ & Tissue Donations**
The older adult might be interested in donating his/her organs at the time of death. In Massachusetts, there are various ways that someone can register to be an organ and tissue donor. The simplest and quickest way to do this is to indicate that you wish to be an organ and tissue donor when applying for or renewing your driver's license or ID card at the Massachusetts Registry of Motor Vehicles (RMV). Doing this includes you in Massachusetts' Donor Registry and is legal consent for organ and tissue donation. Another way to become an organ and tissue donor is to request an organ donor card from the New England Organ Bank, which is Massachusetts' federally designated organ donation organization. As opposed to registering with the RMV, filling out an organ donor card allows you to indicate which specific organs and tissues you would like to donate if you have a preference. [CLICK HERE](#) to visit the Donate Life New England if you want to register online to become an organ and tissue

[Back To Top](#)

donor. The older adult should always inform his/her family, physicians, and Health Care Agent of his/her decision to be an organ donor and it should be recorded in his/her medical records.

- [Donation To Medical Science](#)

At the time of death the older adult may chose to donate his/her body to medical science. Donation of one's body to medical science differs from organ donation in that the entire body is given as a gift to a teaching hospital or medical/dental school. This is usually the least expensive funeral option available because the program receiving the body will almost always pay for the embalming and transportation of the body, as well as a cremation of the body following their research. If this is the option that best suits the older adult, you should contact your nearest medical/dental school or teaching hospital for more details about the donation process. Please be aware that at certain times some programs may not be able to accept bodies due to them already having a sufficient number. Therefore you should always discuss and create an alternative plan. Also, certain bodies such as overly obese ones and ones that are unusable due to the circumstances of death might not be accepted.

Last Will And Testament

A Last Will and Testament (will) is a legal document in which the older adult names one or more persons to manage his/her estate and provides for the transfer of assets upon death. The older adult's assets may include his/her real and/or personal property. The older adult may also name an executor of his/her will. Under the new Massachusetts Uniform Probate Code, the executor is now referred to as the "personal representative". The personal representative is the person who the older adult chooses to grant legal authority to see to it that all provisions of the will are carried out according to the older adult's wishes. After the older adult has died, a probate proceeding may be initiated by the probate court of his/her state to determine the validity of the will. The personal representative is responsible for assisting in the probate court process. It is a good idea for the older adult to notify everyone involved ahead of time as to what is in his/her will so that the legal process after his/her death can go much smoother. [CLICK HERE](#) to visit our Legal & Financial CrossRoad for further information.

Financial

As soon as you experience the death of the older adult, there are various financial matters that will demand your attention. During an extremely emotionally difficult time, these issues may seem like much more than you can handle. However, proper planning for these financial concerns can relieve the stress of having to deal with them and allow you to focus on mourning and honoring the life of the older adult. It is important for you to become aware of every financial matter the older adult is handling so that you may resolve these issues before and after his/her death. These matters may include utility bills, mortgage payments, and credit cards. It is recommended that you and the older adult compile all items relating to his/her finances in advance so that you can get a clear picture and develop a plan to handle all financial matters effectively. You and the older adult should look at and discuss bank accounts, Social Security benefits, investment statements (mutual funds, 401(k), brokerage), credit card statements, possible business ownership interests, where any cash may be stored, credit reports, deeds and titles to property, insurance policies (including Medicare and/or MassHealth(Medicaid)), pensions, and safe deposit boxes. It might be wise for the older adult to choose a person or persons ahead of time that he/she wishes to grant joint authority over all these financial holdings so that his/her estate is not frozen and kept off limits following the older adult's death. In order for anyone to act financially on the older adult's behalf, they must be granted a power of attorney.

Being aware of the older adult's financial situation and making sure someone else has the proper means to handle his/her financial issues is also important when it comes to the costs associated with end of life. Depending on where the older adult decides to spend the end of his/her life and how

[Back To Top](#)

much medical care is chosen to be received, the dying process could result in varying amounts of financial burden. In addition, funeral costs can vary significantly depending on what services have been chosen. Some older adults may choose to prepay for their funeral and burial arrangements. This is a topic that should be discussed with a legal professional because it MAY affect eligibility for various programs. Medical and after death costs may be covered or partly covered by some insurance policies, but this depends on the older adult's specific policy and the state he/she lives in. Insurance policies to look into include Medicare, MassHealth (Medicaid), disability insurance, life insurance, and long-term care insurance. Social Security benefits may also be able to assist with these costs and should be looked into as well.

Upon the older adult's death, his/her financial matters are then usually handled primarily by the named personal representative of his/her will. The personal representative is a person named by the older adult who becomes responsible for carrying out the directions of his/her will. The personal representative's duties include arranging for the payment of all debts of the estate, distributing all assets according to the will, and filing estate tax forms and payments. Also, it is essential that the older adult names beneficiaries to his/her insurance policies, pensions, and/or Individual Retirement Accounts (IRA's) because it is those individuals who will receive the remaining benefits from these assets following the older adult's death. In many after death situations, the state probate court will assist with the execution of the older adult's will. If the older adult has named a personal representative of his/her will, this individual will work with the probate court, whose purpose is to approve the will, supervise the administration of the older adult's estate, and make sure his/her will is executed properly. The probate process can take anywhere from months to years and the court fees and taxes associated with it can range anywhere from hundreds to thousands of dollars.

To understand and handle the many financial challenges that the dying process can present, it is always a good idea to consult with legal and financial professionals, especially those who deal specifically with elder law. Professional guidance can help you and the older adult create the best possible end of life plan in order to safeguard the older adult's assets and ensure the payment of all his/her incoming bills.

Funeral Arrangements

There are many different options available upon the death of the older adult regarding what can be done with the individual's body and what services can be provided. Care for the body and tasks like completing a Death Certificate and obtaining a burial permit are usually handled through a funeral director, but you may also choose to handle these matters on your own. [CLICK HERE](#) for Massachusetts' guidelines on handling this process without a funeral director. Funeral options range greatly in price and can cost anywhere from nothing to thousands of dollars. Certain factors such as religious affiliation, culture, and available budget may come into play when choosing between the various options. However, the most important factor that should determine funeral arrangements is the wishes of the older adult. It is important that the older adult communicates these wishes to his/her family ahead of time. This will allow everyone involved to feel a sense of relief in knowing that decisions they are making after the older adult dies are aligned with the older adult's expressed wishes.

Disposition Options

- **Cremation**
The older adult may choose to have his/her body cremated. Cremation of the older adult's body may be done following a formal viewing and funeral service. If a viewing of the body is to be done, this will require an embalming of the body. The older adult may choose to have his/her body cremated without or prior to any type of funeral or memorial service. Cremation can be done in a casket or in a less expensive cremation container option such as a simple

[Back To Top](#)

canvas sheath, unfinished wooden box, or a cardboard container. If the older adult has his/her body donated to medical science, the program receiving the body will usually cremate it at no charge after conducting their research. Before cremation can occur, a certificate from the medical examiner stating that the body has been viewed and no further examination is necessary must be obtained.

Following a cremation, the ashes that are left are called cremains. Cremation can be done either through a funeral home or cremation society. A cremation society is a member-based organization that provides its members with resources to ensure their future cremation and helps them plan their memorial service. A memorial service is different from a funeral service only in the fact that the body is either not present at the service or is in the form of cremains. Cremation societies can also provide immediate cremation services to non-members. Dealing with a cremation society is a more cost effective option, but they are not available in all states. Massachusetts' cremation society is the Cremation Service of Massachusetts in Quincy, MA. There are many different options for what can be done with the older adult's cremains. His/her ashes can be kept in an urn or other container, buried/scattered at a favorite place, placed at a cemetery/memorial park, or buried/scattered at sea. However, be aware that many states have laws regarding what can be done with cremains. Massachusetts does not have any laws prohibiting the placement of cremains on land, but scattering ashes on private property, at a national park, or in inland waters may require permission. If you are burying the cremains at a cemetery, you must first provide a burial permit, which can be issued by your local board of health. Cremains can be scattered or buried at sea at any depth as long as you are at least 3 nautical miles from land. A burial/scattering at sea of cremains must be reported to the U.S. Environmental Protection Agency within 30 days after the burial. Other more costly options for cremains include having them strewn from an airplane, sent into outer space, and even compressed to form a diamond. There are also different options available for a "green" cremation, including biodegradable urns.

- Direct Cremation

The older adult may choose direct cremation which means that their body will be taken from the location of his/her death directly to the crematory. This means that if the older adult has chosen to have a memorial service it would be held after his/her body has been cremated. Often times, photographs of the departed will be on display in place of the body. Direct cremation can be done through either a funeral home or a cremation society.

- Ground Burial

Throughout the United States, ground burial is the most familiar disposition option but it is also often the most expensive. Burial can take place as soon as the cemetery is ready. Burial in Massachusetts usually takes place in a recognized municipal or private cemetery, but private-property burial can be permitted by a local health department. The older adult may choose to pick out and purchase a burial plot ahead of time. The older adult may also set aside funds in a trust that provides for the ongoing care of the chosen burial plot. A surviving spouse has the rights of a cemetery plot owned by a deceased spouse. If both spouses are deceased or there is no spouse then the ownership goes to the older adult's heirs. There are many costs associated with a traditional ground burial including the cost of the burial plot, burial vault (container to protect the casket), fees for opening and closing the grave, a monument, and sometimes a maintenance fee. One alternative option for ground burial is known as a Green Burial. A green burial is a practice that emphasizes simplicity and environmental sustainability. The body is not embalmed or cremated, but is simply placed in a biodegradable coffin and is buried without a burial vault. This allows the gravesite to return to nature. Currently, there is not a green cemetery in Massachusetts, but there are nine cemeteries in the state that will allow a green burial.

[Back To Top](#)

- **Direct Burial**
Direct burial means that the older adult's body is taken from the location of his/her death directly to the cemetery and buried in a very simple container. A memorial service may be held after if this is desired. Direct burial is a less expensive option and is offered by most funeral homes.
- **Mausoleum Crypt**
Many older adults wish to have their body placed in a mausoleum, which is a large building that houses one or more tombs. A crypt is a stone chamber that acts as the tomb and houses the coffin. Often mausoleums are thought to be an expensive option. However there are many cost effective factors to consider such as avoiding burial plot costs and grave opening-and-closing fees. There are also different options for a mausoleum crypt that vary in price. Crypts in the outer wall rather than inside the mausoleum building will be less expensive. Services for the older adult can be held in the mausoleum as well as in the chapels that many mausoleums have attached to them.
- **Burial At Sea**
If the older adult wishes to be buried at sea, there are specific regulations for this process that must be followed. The older adult's body must be prepared properly for burial at sea and buried in accordance with the accepted practices and requirements of the U.S. Navy, U.S. Coast Guard, or any civil authority responsible for making the burial arrangements. The burial must take place at least 3 nautical miles from land and in water that is at least 600 feet deep. All necessary measures must be taken to ensure that the body sinks to the bottom rapidly and permanently. Decomposable flowers and wreaths may be placed at the burial site. A burial at sea must be reported to the U.S. Environmental Protection Agency within 30 days after the burial.

Service Options

There are many options when it comes to the service, if any, that is held in honor of the older adult following his/her death. A very important decision that should be made is whether the service is going to be open to the public or kept private and reserved for close loved ones of the older adult only. Depending on the older adult's religious/spiritual affiliations, there may be a ceremonial service held before the body is brought to the cemetery or crematorium. If a cemetery or memorial park has been chosen, there are usually three options available for service at the gravesite. There may be a service at the gravesite without observation of the lowering of the casket into the grave, a service with observation of the lowering of the casket, or a service within a chapel or mausoleum located at the cemetery/memorial park.

Caregiver Support/Bereavement

While grieving is in fact a distinctly individual process, there are certainly common elements to it that we all may experience. Two different "styles" of grieving are known as "intuitive grieving" and "instrumental grieving." Intuitive grieving consists of outbursts of emotion and the need to talk about your feelings. Instrumental grieving focuses more on doing things that help you cope. It is said that healthy grieving almost always encompasses some form of both of these styles. Another common way in which people characterize grief is by breaking it down into its five stages: denial, anger, bargaining, depression, and acceptance. You may experience one, all, or none of these stages as you move through bereavement. Some may spend more time with certain stages over others, and the order in which someone moves through them is unique to every individual. Grieving is more like a wheel of emotions rather than a straight path. Symptoms of grief, such as mood swings, anger, and crying, should gradually taper off with the help of healthy grieving behaviors and various support systems. Now that your caregiving duties for the older adult have come to an end you should have more time on your hands. Isolating yourself can only make grieving harder and although it may be

[Back To Top](#)

difficult, keeping up with the daily activities you enjoy, or perhaps even taking up new ones, can be a great way to help yourself cope with grief. It is important to not try and go through this difficult process alone and let yourself be overcome with grief. You must make sure that you continue to care for yourself physically, emotionally, and spiritually. We as humans are resilient in nature, and while it may seem daunting at first, you are not alone and you will find the strength to overcome your loss.

When adjusting to life after the death of the older adult, grief may hit you suddenly and in a very powerful way. As a caregiver, so much of your time and effort gets devoted towards supporting the older adult in every way. Even during the time directly following his/her death, you may be completely focused on tasks such as planning the funeral services and handling the older adult's estate. If you did not plan ahead for the end of the older adult's life, this process will be even more difficult and time consuming. Once everything having to do with the older adult and his/her death has passed, the challenge becomes adjusting to the void that is left. The death of the older adult may bring you a sense of emptiness. It is not uncommon for you to feel like you have been left with questions and wonder as to what you could have done differently throughout the older adult's life and especially during his/her dying process. You may have regrets about medical treatment(s) or about your personal relationship with the older adult. It is important to let go of these feelings of uncertainty and focus on the reality of the present situation. There is no benefit in spending time concerned about past issues or occurrences. You cannot change them. As throughout your caregiving journey you should be focused only on the present moment. Everyone deals with the bereavement process differently. Some may find it difficult to adjust to life without caregiving and feel as though their lives have lost some purpose. Others may feel less stress because the burdens of their caregiver role no longer exist. Many caregivers feel a sense of relief to no longer have to watch the older adult suffer. Your grieving process will be very individualized. There is no normal length of time it should take you to go through the stages of grief. More importantly you have the right to experience the emotions that you feel when you are feeling them. Regardless of your individual grief and expression of that grief, there are support systems that offer guidance through the bereavement process. Some people may feel more comfortable handling their feelings on their own, but others may benefit greatly from individual counseling or group support.

Depending on your individual bereavement situation and loss, there are a wide variety of support options available to help you through this very difficult time. Individual grief counseling may be the best choice for someone who is uncomfortable sharing his/her feelings in front of many other people. On the other hand, support groups offer bereavement assistance in reminding people that they are not alone in their grieving process. Many different kinds of bereavement support groups exist, including those for spouses, siblings, friends, and children left behind. Hospice services can provide bereavement support directly for at least a year to families they have served under the Medicare Hospice Benefit. They are also a great resource to use to locate a support group near you. [CLICK HERE](#) to visit the website of the Hospice and Palliative Care Federation of Massachusetts, who can direct you to a local support group. Some caregivers may decide to continue attending a support group that they were involved with while the older adult was alive. Some groups welcome existing members to continue attending meetings even after the death of the older adult. However any support group should be consulted to see if it would be appropriate for you to continue attending after the older adult has died.

Other resources that are available for those grieving the loss of someone in their life are online support groups. While some people might place a high value on face to face counseling, others may feel safer and more willing to open up about their emotions in an online setting. The resource(s) you choose to turn to will depend on your own individual need(s), but regardless of your personal situation, just knowing that there are plenty of support options available can be a source of strength during an extremely emotional period.

[Back To Top](#)