

## Transcript

### Consultant, Ash Ward:

*"If somebody's dying, and are clearly dying, and they're just dying, well, they need to die somewhere with dignity.*

*And if, if there is a side room available, you go into a side room and you stay there. What you don't want is to be wheeled round the hospital and die on a corridor."*

### Consultant, Oak Ward:

*"The side room issue is, I think, if there's a lot of family who are going to be around, then a side room gives some privacy. But if there aren't, if I haven't got family with me, then I want to be on the ward, so that people can see me."*

### Staff nurse, Fir Ward:

*"That's the problem. It's not nice dying in hospital. And some people aren't even lucky enough to have a side room to die in, they're dying on open ward if we haven't got one, that's bad. It's horrible, isn't it? Somebody's died and relatives come and they're having to grieve next to five other people watching. I mean, we pull curtains round but they're not soundproof.*

*.... Maybe more side rooms. But I must admit, I'm not a fan of nursing people in side rooms because I feel like, you can't always get in there to see to them, and they're not easily observable."*

### Staff nurse, Oak Ward:

*"The family wanted her to stay in the bay so we could keep an eye on her, if the family couldn't get to her, and that way ....someone could be with her if the family couldn't. I think, also, that the patient gets quite fearful on her own and things like that, gets quite anxious. And we don't want that to happen. If she's dying anyway, quite fearful as it is, we don't want to make that worse."*