



Loss, Grief and Bereavement.

Special Recognition to:

End of Life Nursing Education
Consortium

Robert Pope Foundation

Grief

- Individualized response to the loss
- Loss can be real, perceived, or anticipated
- Experienced by residents, families, staff
- The bereaved is forever changed



LOSS

- ❑ Nursing home residents and losses
 - Loss of control
 - Loss of own home
 - Loss of private space
 - Loss of preferred schedule and routine



Bereavement

- ❑ The state of having experienced the death of a loved one
- ❑ Includes grief and mourning
- ❑ Suggests both responsibilities and special privileges



Mourning

- Outward, social expression of the loss
- Influenced by culture, religion, personality, life experience
- Religion and culture often dictate how long the bereaved mourn and how they “should” act

Normal Grief Response

Physical

- Tightness in chest
- Headaches
- Insomnia
- Weakness

Emotional

- Sadness
- Anxiety
- Shame, guilt
- Anger
- Relief, sense of peace

Cognitive

- Confusion
- Inability to concentrate
- Sense that deceased is present
- Search for meaning

Behavioral

- Crying
- Withdrawal
- Impaired work performance
- Over-reactivity

Staff Interventions with Grieving People

- ❑ Support of grieving as normal
- ❑ Use of nonverbal communication
 - Smile
 - Nod
 - Touch
 - Hug
 - Quiet listening



Interventions with Grieving People

- ❑ Provide physical space for grieving
- ❑ Give emotional support
- ❑ If you offer to help, make your offer specific
- ❑ Encourage expression of feelings



Interventions with Grieving People

- ❑ Encourage reminiscing and life review
- ❑ Spiritual support
- ❑ Let the person know about community bereavement services
- ❑ Ensure that cultural and religious practices are honored





My Story

Please call me by

Things I'd like you to know about me

My loved ones include

My pet(s) include

My job/career

My favorite food is

My favorite music/tv show is

Date

What NOT to Say:

- ❑ "I know how you feel."
- ❑ "God needed [your loved one] in heaven."
- ❑ "This was God's plan."
- ❑ "You shouldn't feel that way."
- ❑ "You'll get over it."

Possible Things TO Say:

- ❑ “I’m so sorry.”
- ❑ “What is this like for you?”
- ❑ “Tell me about [your loved one].”
- ❑ “What I remember most (or appreciated most) about [your loved one] is...”

Interventions with Grieving People



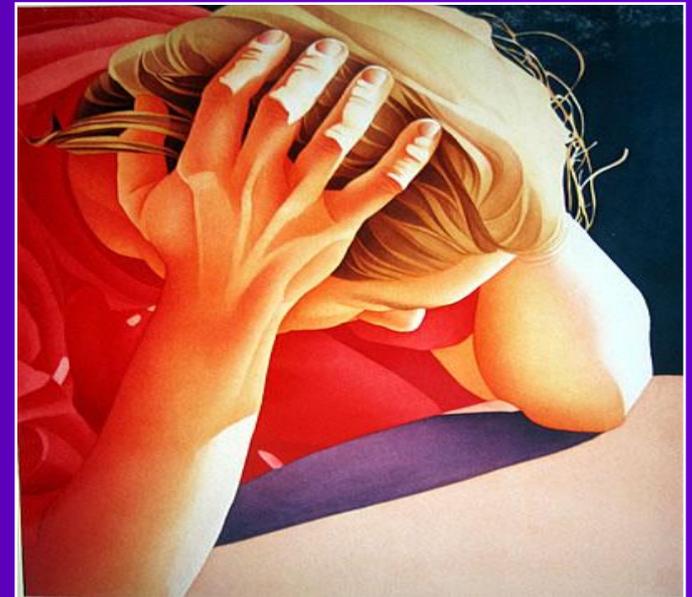
- ❑ Send a card or note to the bereaved
- ❑ Attend the funeral/ memorial service
- ❑ Give the bereaved a supportive phone call a month or two after the loss

Staff Grief

- ❑ Closeness between staff and residents; some staff members will be closer than others to a particular resident
- ❑ Presence or absence of family support for the resident
- ❑ Expressing emotion in the workplace – is it acceptable?

Staff Grief

- ❑ Shock/denial can still be present
- ❑ Each staff person's grief is unique
- ❑ Personal and cultural beliefs about death, care of the body, bereavement
- ❑ The special case of a co-worker's death



Cumulative Loss: Signs of Stress



- ❑ Acting defensively
- ❑ Focusing only on residents' physical needs
- ❑ Avoiding any talk of feelings
- ❑ Distancing from residents & families
- ❑ Increased absenteeism

Staff Bereavement Support



- ❑ Enable staff to attend memorial services
- ❑ Encourage staff to express their grief
- ❑ Review deaths and their effects on staff
- ❑ Create staff mourning rituals
- ❑ Encourage self-care

Ritual and Memorials

- “My Story”
- Photo Gallery
- Memory Box
- Sympathy Cards
- Quarterly “Celebration of Life”
- “Angel Mobile”