Development of Bereavement Support Guidelines for Specialist Palliative Care Social Workers in Ireland

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Sub-Group Membership

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Background

- Hospice & Palliative Care Social Workers Group - Who are we?
- Why the need for this Guideline?
- ▶ Why now?



Development Process

- International Literature Review
- Analysis of Literature Review Findings
- National Clinical Programme for Palliative Care Palliative Care Competence Framework



CORU - Code of Professional Conduct & Ethics for Social Workers

Aim of the Guideline

- To provide evidence informed guidance to specialist palliative care social workers providing bereavement care to patients and their families
- To promote a level of standardised practice nationally for specialist palliative care social workers involved in the provision of bereavement care

Fundamental Principles

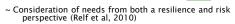
- Access
- Values and diversity
- Partnership
- Quality Assurance
- Governance

Guideline Structure

- Acknowledgement that Bereavement Care takes place along a Continuum:
- ~ Pre-death Support
- ~ Around the time of death
- ~ Bereavement Support after the death of a patient

Social Work Role in Pre- Death Support

- ▶ Continuous Assessment:
 - ~ MDT Assessment
 - ~ Family Systems Perspective



- ~ Assessing Preparedness for Death
- Supporting individuals and families to navigate the demands of life-limiting illness and to negotiate different coping mechanisms and communication styles within their family system, particularly where conflict arises

SW Role & Pre-Death...

- Providing information and guidance on communicating with children and vulnerable adults, to promote their inclusion and enhance their understanding of the nature of their relative's condition
- Advocating for a patient's prognosis to be communicated appropriately and in a timely manner, acknowledging its impact on a patient's ability to plan ahead, and on the bereavement process

SW Role & Pre-Death

- Facilitating discussion around, and supporting the MDT with, the exploration of patients' and families' preferences around place of care and place of death
- Undertaking direct work with children and vulnerable adults where indicated
- Supporting patients and families in managing the practical and financial stresses associated with illness and death

Social Work Role Around the Time of Death

- Supporting families where strained relationships are causing distress
- Facilitating conversations around patient and family members' wishes around how they will engage with the dying process and time of death
- Guidance on communicating the news of the death to family members perceived to be vulnerable
- > Support with practical and financial issues

Social Work Role Post Death

- Assessment:
- ~ Review the individual's grief experience
- ~ How they are coping with the death
- ~ Level of perceived support
- ~ Capacity to access that support
- Ethical responsibility to only offer support where it is indicated and to work in a way that enhances an individual's own resilience and capacity to cope with the loss (Relf et al, 2010; Machin, 2014)
- → Opt- in model of service delivery

SW Role Post Death

- Provision of Bereavement Support across 4 Levels
- Level 1:
- ~ Provision of information Eg: Leaflets, booklets, signposting to online resources
- ~ A letter to patient's main contact person within 3 months of the death
- ~ Invitation to psycho-education information event on bereavement within 3-6 months
- ~ Opportunities for services of remembrance

SW Role Post Death

- Level 2:
- ~ One-off opportunity to meet a SW to review their unique experience of the loss and to normalise their grief reaction
- ~ Invitation to attend peer support group
- ~ Invitation to meet with a bereavement support volunteer, where available
- Opportunity to meet with medical or nursing staff to address any questions relating to the patient's illness or death

SW Role Post Death

- Level 3:
- ~ Invitation to attend bereavement support group facilitated by SW team
- Invitation to engage in 4-6 sessions of bereavement counselling, after which a review will occur
- Individual is made aware that they can avail of bereavement support and counselling at any time in the future

SW Role Post Death

- Level 4: When complications arise within grief, individuals may need referral on to other agencies such as mental health, psychology, psychotherapy or specialist counselling services
- Any referral involving an individual who is deemed to be significantly vulnerable should receive contact within 10 working days of receipt of the referral

Key Learning

- Importance of defining the Social Work Role
- Bereavement and the role of the MDT
- Challenge of developing a guideline for national practice given such variations in social work resourcing and structure at a national level

Where to from here?

- > Final Draft Preparation
- Stakeholder Consultation
- Identification of Experts for wider consultation
- Dissemination Plan



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- Wider Hospice & Palliative Care Social Workers Group
- Dr. Audrey Roulston

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