Grief, Loss, and Compassion Fatigue



Hear From Your Peer Webinar September 26, 2017



Pre-test

Grief is:

- A. Diagnosed by a mental health professional
- B. A normal reaction to losing a loved one, but people mourn their loss in different ways
- C. A disorder that a person experiences following a loss

Compassion fatigue or vicarious trauma is:

- A. Fixed by switching jobs
- B. Interchangeable with burnout
- C. Normal displays of chronic stress resulting from all of the care giving performed

Symptoms of compassion fatigue may include:

- A. Isolation from others
- B. Excessive complaining from and about others
- C. Mentally and physically exhausted
- D. All of the above



Your Presenters



Sandy Lloyd



Rosemary Fournier



Nancy Maruyama



Shawnee Benton Gibson



Natalie Berbick



Infant Mortality Awareness Month





Objectives

- Share information and resources on grief, loss and compassion fatigue.
- Discuss examples of programs that support those working with families that have experienced an infant death
- Share training resources for increasing staff's ability to provide bereavement services



Grief, Loss and Compassion Fatigue

Webinar for Healthy Start 9/26/17



"Pregnancy is a time of great excitement and changes.

There is so much to look forward to when anticipating a new life. For this reason the loss of a pregnancy is often one of the most heartbreaking experiences for the infant's parents"

https://foreverfamilies.byu.edu



Types of pregnancy loss

- Ectopic Pregnancy: a pregnancy that is not in the uterus. The fertilized egg settles and grows in a location other than the inner lining of the uterus
- Miscarriage: the spontaneous loss of a pregnancy from conception to 20 weeks gestation
- Stillbirth: an infant born without signs of life, generally after 20 weeks of gestation



Types of pregnancy loss

- Infant death: the death of any live born infant prior to his/her first birthday
 - Neonatal deaths an infant death within the first 27 days of life
 - Post neonatal deaths an infant death occurring from 28 –
 364 days

"The most sensitive index we possess of social welfare"

Julia Lathrop, Children's Bureau, 1913



Four tasks of mourning (William Worden)

- Understand and accept the reality of the loss
- Work through the pain and grief
- Adjust to a life without the baby
- Reinvest emotional energy

http://www.whatsyourgrief.com/wordens-four-tasks-of-mourning/



Understanding the grief experience

- Factors affecting the grief experience
- Health care provider responses at time of death
- Expressions of grief



Factors affecting the grief experience

- Cultural Influences
 - Practices and beliefs that explain the meaning of life
 - Rituals and ceremonies for processing loss
- Family system
 - Roles of family members
 - Pre-existing difficulties
- Manner and cause of death
 - Natural, accidental, sudden versus anticipated
- Hopes for the future
 - Extent of parents' emotional investment in child



Factors affecting the grief experience

- Child's Age
 - Siblings
 - Impact of death on family developmental issues
- History of loss
 - First experience versus repeated losses
 - Multiple losses can overwhelm the parent
- Medical and legal issues
- Professional and social networks
 - Influence of friends, caregivers
 - Health care professionals



Health care provider's response

The family is deeply affected by the response of health care providers at the time of a child's death. Many health care providers are very supportive. The willingness of health care providers to listen to painful expressions of loss is an important element in facilitating the grief process. Although family members might not remember exactly what health care providers said at the time of the death, they would certainly recall whether they displayed a caring attitude and offered comfort.

Fetal & Infant Mortality Review: A Guide for Home Interviewers http://www.nfimr.org/publications and resources



Parents experiences with health providers

- Offer emotional support
 - Stay with family, spend extra time with them if possible
 - Talk about baby by name
 - Allow parents to cry
 - Be sensitive to comments that could be perceived as trite of minimizing grief





Parents experiences with health providers

- Attend to physical needs of parents and baby
 - Continue routine post-partum nursing and medical care for mother
 - Treat infant's body respectfully
 - Consider dressing, bathing and wrapping infant
 - Help parents create tangible memories of their infant



Parents experiences with health providers

Educate parents

- Communicate loss to all staff to help avoid inappropriate comments or actions
- Help parents anticipate what grieving will be like
- Provide straightforward information about the cause of death if knows. Us lay language
- Take time to sit down with parents when discussing information

http://www.nature.com/jp/journal/v27/n4/full/7211676a.html



Expressions of grief

- Feelings
 - Sadness
 - Anger
 - Guilt and self reproach
 - Anxiety
 - Fatigue
 - Helplessness
 - Shock and numbness
 - Yearning

- Physical symptoms
 - Headache
 - loss of appetite
 - difficulty sleeping
 - weakness
 - feelings of heaviness, aches, hollow feeling
 - tightness in chest or throat

Expressions of grief

- Cognition
 - Disbelief
 - Confusion
 - Inability to concentrate
 - Difficulty making decisions
 - Pre-occupation
 - Sense of "presence"
 - Hallucinations

- Behaviors
 - Crying
 - Sighing
 - Restlesshyperactivity
 - Absent mindedness
 - Social withdrawal
 - Dreams
 - Visiting places or carrying reminders
 of the deceased

Saving Lives Together

Recognize complicated grief reactions

- Focus on little else
- Numbness or detachment
- Bitterness
- Feeling that life holds no meaning or purpose
- Lack of trust in others
- Inability to enjoy life

- Have trouble carrying out normal routines
- Withdrawal from all social activities
- Persistent guilt and self blame
- Extreme irritability or agitation



Essential steps to counseling bereaved parents

- Assess the factors affecting the parent's grief experience
- Anticipate parental behavior and expressions of grief
- Portray grief as a lifelong process that is unique to each individual (not an episode)
- Assess parent's emotional state and ability to care for self and others (functional and emotional capacity)

Saving Lives Together

Determine family's multiple needs and sources of support

The importance of rituals

- Naming baby
- Baby memory box
- Religious rites and practices
- Cultural and family traditions
- See, hold, and touch infant
- Take photographs
- Collect mementos
- Keep a journal or blog





Helpful responses to convey support and active listening

- "I'm sad for you."
- "How are you doing with all of this?"
- "This must be hard for you."
- "What can I do for you?"
- "I'm here and I want to listen."





"Remember, when you are journeying with people in pain, you step off your road and onto their road when you are supporting them. When you are complete for the moment, it is important to step back onto your road and claim the backpack of your life, with all its frustrations, joys and love.

Center for Living with Dying

http://www.billwilsoncenter.org/services/all/living.html



Questions?







Caring for the Caregiver Self Care and Coping

Nancy Maruyama, RN, BSN
SIDS of Illinois, Inc.
September 26, 2017





What is Caring for the Caregiver?

Caring for yourself is one of the most important - and one of the most often forgotten – things you can do as a caregiver. When your needs are taken care of, the person you care for will benefit too.

www.caregiver.org

SUDDEN INFANT DEATH SERVICES

Of Illinois, Inc.



Impact on Healthcare Professionals who work with the Bereaved

Self Knowledge and Personal Experience with Death and Loss

- Willingness to seek personal insight and gain objectivity about your motivation to do this work
- To become more effective, the healthcare professional should take time to explore their personal loss experiences.

What is Compassion Fatigue?

- Normal displays of chronic stress resulting from all of the care giving
- Can have a negative effect on your life
- Symptoms Include but are not limited to:
 - Bottled up emotions
 - Isolation from others
 - Significant increase in irritability
 - Substance abuse
 - Poor physical and emotional self care
 - Diminished Energy and/or diminished motivation

Going through Compassion Fatigue can also lead to positive change and resiliency when you come out on the other side.

Excerpted from www.compassionafatigue.org

The Healthcare Professional and Compassion Fatigue

Responsible to a fault...

Overdeveloped sense of responsibility...

The perfect set-up



Signs & Symptoms of Burnout

- Anxiety, depression, irritability
- Feeling tired or run down
- Difficulty falling asleep and/or staying asleep
- Reacting excessively to ordinary annoyances

- Health problems that are new or worsening
- Neglecting responsibilities
- Trouble relaxing
- Feeling helpless & hopeless
- Less energy



Let's Talk About Stress



SIDDEN INFANT DEATH SERVICES

Of Illinois, Inc.



Early Warning Signs of Stress Overload

- Changes in appetite
- Difficulty sleeping
- Increased use of drugs, ETOH, smoking or food
- Frequent mood swings
- Becoming accident prone
- Panic attacks
- Expansion of obsessive thoughts



Helping Yourself Through Stress

- Get moving
- Talk it out
- Prioritize and make lists.
- Cry if it helps
- Get involved with life!



Some Strategies to Reduce Stress

Meditate. A few minutes of practice per day can help ease anxiety. ...

Breathe Deeply. Take a 5-minute break and focus on your breathing.

Be Present. Slow down. ...

Reach Out. ...

Tune In to Your Body.

Take a break.

Learn/practice yoga.

Laugh, Laugh!

Take care of yourself. Eat healthy, well-balanced meals, drink plenty of water...

Talk to others. Share your problems and how you are feeling and coping with a parent, friend, counselor, doctor, or pastor.

Avoid drugs and alcohol. Drugs and alcohol may seem to help with the stress...

Acknowledge your feelings: you have a right to all of them.





SIDDEN INFANT DEATH SERVICES

Of Illinois, Inc.



Identifying Personal Barriers Or Stop SHOULDING All Over Yourself



Know Your Limitations

- Do your best
- Make your mistakes
- Learn the lesson
 This is the path of Wisdom

Grant me the serenity to accept the things I cannot changes, the courage to change the things I can, and the wisdom to know the difference.

NIEBUHR

Seeking Closure

- Pull back into a more balanced space
- REACH OUT
- Share your feelings
- Closure does not mean you forget; you learn to adapt

SIDDEN INFANT DEATH SERVICES

Of Illinois, Inc.



"There is within each of us a potential for goodness beyond our imagining; for giving which seeks no reward; for listening without judgment; for loving unconditionally."

Elisabeth Kubler-Ross, MD





sids
SUDDEN INFANT DEATH SERVICES
Of Illinois, Inc.



Questions?

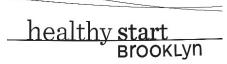




Remembering You, Remembering Us

Bereavement Services from Healthy Start Brooklyn

Shawnee Benton-Gibson September 26, 2017





The Mother Wit Conference

For women, men, families, and communities navigating infertility, pregnancy and infant loss, and maternal depression



- Communal rituals
- Workshops
- Panel discussions
- Healing circles
- Dramatic presentations
- Healing arts
- Vendors
- Nourishing food



Remembering You Remembering Us

RYRU Purpose and Mission

- Live and virtual healing spaces for parents who have lost a pregnancy and/or a child under the age of one
- Provides resources, support, and safe and confidential spaces to share their stories and mental, spiritual, and emotional experiences
- Welcomes family members and other supporters who have been affected by a loss to participate in the healing experience





Raising Awareness





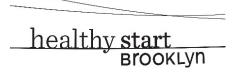
A Healing Circle





Virtual Support







Candle-Lighting Ceremony







For more information:

healthystartbrooklyn@health.nyc.gov

Resources:

www.rememberingyourememberingus.org
www.facebook.com/rememberingyourememberingus
www.themotherwitconference.com





Questions?





CONTRA COSTA COUNTY FETAL INFANT MORTALITY REVIEW PROGRAM

Perinatal Bereavement Training: A Community Action Team Project

WHAT IS FIMR?

The Fetal Infant Mortality Review (FIMR) Program is a community-based, action-oriented program designed to enhance the health and well being of women, infants, and families through the review of individual cases of fetal and infant death. The purpose of the FIMR Program is to understand how a wide array of social, economic, health, educational, environmental and safety issues relate to infant loss on a local level and in turn utilize that information to improve community resources and systems of care to reduce fetal and infant mortality.

FIMR has been operating in Contra Costa County since 1991 and is implemented by the Family, Maternal and Child Health Programs of Contra Costa Health Services.

THE FIMR PROCESS

How FIMR Works

The FIMR process consists of five components: grief and bereavement support, maternal interview, records review, case review and community action. The process begins when the program is notified that a fetal or infant death has occurred. The FIMR Program receives referrals from hospitals, clinics, the Office of Vital Registry, case management programs and other perinatal providers. The five components are described below:

Family Support

FIMR staff contact parents through phone calls and home visits soon after the pregnancy loss or infant death. Staff provides emotional support, information, and referrals to other services that assist parents and families.

Maternal Interview

After family support has been initiated, the mother may participate in an interview. The maternal interview is the heart of the FIMR Program and makes FIMR unique among other case review processes. The interview allows the mother's voice to be heard and provides her with the opportunity to share her experiences before, during and after pregnancy.

Records Review

The FIMR Program reviews information from a variety of sources, including medical records, birth and death certificates, coroner's reports, and records from health and social service agencies.

FIMR PROCESS (CONTINUED)

Case Review

A case summary is prepared using information from the maternal interview and records review. The summary is de-identified to assure the confidentiality of patients, providers and health care facilities. The case summary is then presented to the Case Review Team (CRT) for review. This team represents a range of professional organizations and public and private agencies that provide services and resources for women, infants and families. The CRT reviews the summaries, examines the circumstances related to each case and identifies social, economic, health, educational, environmental, and safety factors associated with those deaths. The CRT then identifies problems with the health care system that require change and makes recommendations for how to improve policies and services that affect families.

Community Action

The next step in the FIMR process is to turn CRT recommendations into action. Issue-specific task force groups are assembled to implement interventions designed to address the problems identified by the CRT. Task force members include those who are in a position to direct change at the community level.

PERINATAL BEREAVEMENT TASK FORCE: A FIMR COMMUNITY ACTION TEAM

Background

In 2016, The Contra Costa Fetal Infant Mortality Review (FIMR) program recognized a need to provide consistent and seamless care to families who experienced a fetal or infant loss at Contra Costa Regional Medical Center and health clinics. An interdisciplinary perinatal bereavment task force was established to improve the quality of care for patients and their families facing problems associated with perinatal illness and loss. The task force seeks to mitigate suffering by incorporating best practice guidelines such as the use of early assessments and treatment plans for physical and psychosocial problems associated with the loss of a baby.

Training Description

Contra Costa Health Services is utilizing the Resolve Through Sharing (RTS) Bereavement Training: Perinatal Death model developed by Gunderson Health System in 1981. RTS is a comprehensive 2-day training known world-wide as the "Gold Standard" in perinatal bereavement education, and is referenced as the only educational offering available to help prepare for the Hospice & Palliative Credentialing Center's perinatal loss care certification exam (CPLC).

Training Focus

Attendance at this training will serve to enhance your knowledge, level of skill, and personal awareness when providing care to families whose baby dies. Focus is on perinatal death through miscarriage, ectopic pregnancy, stillbirth, and newborn death.

CCHS Perinatal Bereavement Training:

Best Practices for Providers & Healthcare Professionals

Preview

Earn CEUs and learn about:

Perinatal grief & self-care basics for families

Best practices for healthcare professionals

Perinatal grief resources

PERINATAL BEREAVEMENT TASK FORCE: A FIMR COMMUNITY ACTION TEAM

Activities and Process included:

- Recruited Stakeholders: MSWs, RNs, PHNs, MCAH Director, PH Director, CEO of Contra Costa Regional Medical Center, etc...
- Attended Resolve through Sharing Training and received Perinatal Bereavement Coordinator certification
- Applied for funding to administer the training for 60 employees
- Met routinely, started a team website within Contra Costa Health Services (CCHS)
- Adapted RTS Training to reflect the CCHS service spectrum for the bereaved perinatal population
- Identified local resources and partnerships
- Solicited parent panelists

ACTIVITIES AND PROCESS (CONTINUED)

- Every trainee received a comprehensive resource binder that included provider specific and patient information for staff who worked in different depts.: Hospital and clinic staff (MDs/RNs), Public Health Nurses, Public Health Home Visitors, and Behavioral Health
- Evaluations were disseminated, responses were reviewed and discussed in debrief meetings post training
- Reports to funder was submitted
- Another Perinatal Bereavement Training is scheduled for March 2018

OUTCOMES

- The FIMR Community Action Team created a training to strengthen the core competency of grief and bereavement support within CCHS. This was the first time a training of this nature was instituted in this health system. 60 employees received the 2 day training.
- Gave bereaved parents a platform to directly share their loss story with provider, and quality assurance measures were implemented to address missed opportunities for specific supports
- An annual "Day of Remembrance" is scheduled for Oct. 16th
- CCRMC has established a perinatal bereavement care team to support families who have experienced losses prior to discharge from the hospital, AND will follow-up with families at timed intervals when appropriate.
- Community Partnerships were established and maintained

FOR MORE INFORMATION, YOU MAY CONTACT:

Natalie V. Berbick, MSW
Infant Health Programs Manager
FIMR/SIDS/BIH Coordinator
Contra Costa Health Services
Public Health Division
Family, Maternal, and Child Health Program

Natalie.berbick@hsd.cccounty.us http://www.cchealth.org/fmch

Questions?





Takeaways

- Consider complex, multiple factors affecting the grief experience and ways to offer emotional support
- Recognize early warning signs of stress overload and use examples shared to reduce stress
- Explore Resolve Through Sharing as a potential training resource
- Consider application of examples (Healing Circles/Virtual Support) shared from Healthy Start Brooklyn



Post-test

Grief is:

- A. Diagnosed by a mental health professional
- B. A normal reaction to losing a loved one, but people mourn their loss in different ways
- C. A disorder that a person experiences following a loss

Compassion fatigue or vicarious trauma is:

- A. Fixed by switching jobs
- B. Interchangeable with burnout
- C. Normal displays of chronic stress resulting from all of the care giving performed

Symptoms of compassion fatigue may include:

- A. Isolation from others
- B. Excessive complaining from and about others
- C. Mentally and physically exhausted
- D. All of the above



Wrap Up and Reminders

Upcoming Events:

- September 28, 3:00 4:00 PM ET: The Essentials An Overview of the Healthy Start Project Director's Guide
- October 17, 3:00 4:30 PM ET: Supporting Healthy Eating Strategies for Healthy Start Programs
- ASTePP 2nd Round Discussion Groups:
 - Urban: October 19, 11:30am-1pm ET
 - Rural: October 24, 1pm -2:30p ET
 - Community Health Center: October 26, 2:30-4pm ET
 - Native/Tribal: November 1, 12-1:30pm ET
 - RSVP to <u>rmillock@jsi.com</u> if you are available to participate in this second discussion group.

EPIC Center website: http://www.healthystartepic.org

 Includes all recorded webinars, transcripts, slide presentations, evidence based practice inventory

