Bereavement Care:

One Children's Hospital's Compassionate Plan for Parents and Families

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hat exactly is your role as the emergency nurse caring for the family of an infant or child who has died in the emergency department? What resources do you have to help support the parents? Before examining those questions, it is helpful to examine some characteristics of parental bereavement, keeping in mind that each case of bereavement is unique because of the complexity of the relationship between the parent and deceased child.

Characteristics of parental bereavement

- Untimeliness. When a child dies before a parent dies, the parent is robbed of all of his or her future hopes and dreams for the child. The parent experiences sadness each time a "would be" event occurs. 1
- Self-loss. Despite the child's death, he or she continues to be the offspring of the parent and part of that parent. The severing of this bond is so devastating that an analogy to amputation has been made.²
- Isolation. Another unique aspect of parental bereavement is society's reaction to the bereaved parent following the child's death. Other parents often avoid bereaved parents because the bereaved parents can embody their worst fears. Bereaved parents also often lack support from their closest friend—their spouse—because he or she is dealing with the very same devastating loss and is ill equipped to help. 1
- Guilt. When a child dies, the parent often feels incompetent because he or she was unable to fulfill his or her job to keep the child safe.²

Cause of child's death

When the death of a child is sudden, as might occur with trauma, the parents' reactions are more severe, exaggerated, and complicated, because there is no time to prepare for the loss.³ Accidental death can lead parents to feel self-reproach and to blame themselves or others.⁴ As a result, the bereavement process is likely to be longer lasting and more intense.⁵ Parents' unanswered questions or misconceptions regarding medical procedures performed or omitted, organ donation, as well as the circumstances of their child's last few minutes of life, can be devastating.⁶ Therefore, parents in this situation are helped when staff clarify the events of their child's death.

Bereavement program

Our pediatric hospital has established a program to facilitate support for bereaved parents as they move through their stages of grief.

BACKGROUND

The bereavement team at our institution was formed 6 years ago and consists of staff members from inpatient units, home care, social services, pastoral care, child life, respiratory therapy, surgical services, and, more recently, the emergency department. We also have a bereaved parent who serves as a team member. The chair of the committee is a pediatric clinical nurse specialist.

POLICIES AND PACKETS

We developed our bereavement program to provide compassionate care for parents and their families and to provide the staff with clear guidelines to care for dying/ deceased patients and their families. The team initially developed hospital-wide policies to guide staff when caring for grieving families. These policies include "Care of the Dying Patient," "Care of the Deceased Patient," and "Coroner's Notification Process." The team then developed 2 packets to simplify the process of completing forms related to the death because staff members often were uncertain about required paperwork. This step was very important because of the small numbers of deaths that occur at our hospital annually (approximately 55 deaths per year).

The Death Packet consists of the following:

- A deceased patient checklist to aid the staff in notifying the appropriate people and filling out all necessary paperwork.
- A patient information form that provides valuable information for follow-up.
- A resource brochure for families is included to provide guidance for the first few days after the death.
 This resource brochure was developed at the request of our parent member.

The Organ Donation Packet contains organ donation and autopsy information for the family and staff.

INTERVENTIONS FOR FAMILIES

As part of our program, all bereaved families receive the following:

- Flowers from the hospital immediately following the death.
- A packet of information 4 to 6 weeks after the death.
 The packet includes a condolence note, general information on parental bereavement, and more specific information for the family, depending on the circumstances of the child's death and family member involvement.
- An invitation to a hospital-based support group.
- An invitation to an annual memorial service in December.

In addition, a Bereavement Basket is sent to some of our long-term families. It is designed with the individual family in mind and includes such items as candles, a journal, a book on grief, bath salts, and food coupons.

Each patient unit (eg, NICU, emergency department) has a representative on the Committee who is responsible for coordinating the specific bereavement care for the families of the children who have died on their unit. The PICU and general pediatric units provide molds of the child's hands and/or feet, follow-up phone calls, and cards for anniversaries of the deceased child's birth date.

Bereavement care in the emergency department is complex because of the laws regarding these deaths and the limited amount of time that the families have spent with the staff. In our emergency department, almost all deaths are coroner's cases, and thus great care must be taken to

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