



# **Developing a practice guideline for bereavement care for older people**

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# Background

- Literature review and consultation
- Little provision:
  - ◆ bereavement care for older people
  - ◆ statutory care services
- Follow up and communication?

# Project Aims

- Explore current service provision
- Develop a guideline for practice
- Test guideline

# Data Collection

## Semi structured interviews

*Current bereavement care*

*Communication about bereaved older people*

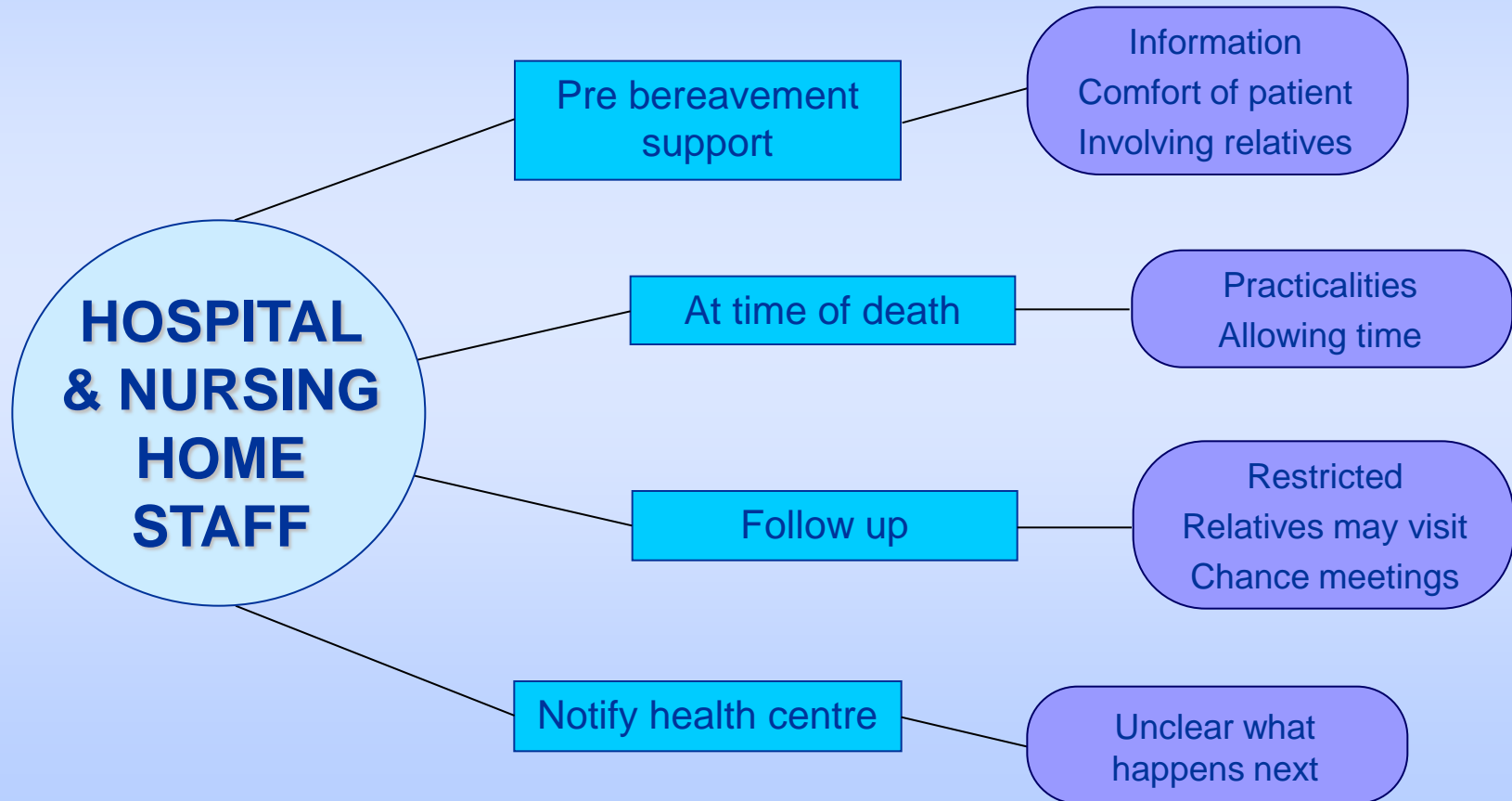
*Gaps in services*

*Suggestions for enhancement*

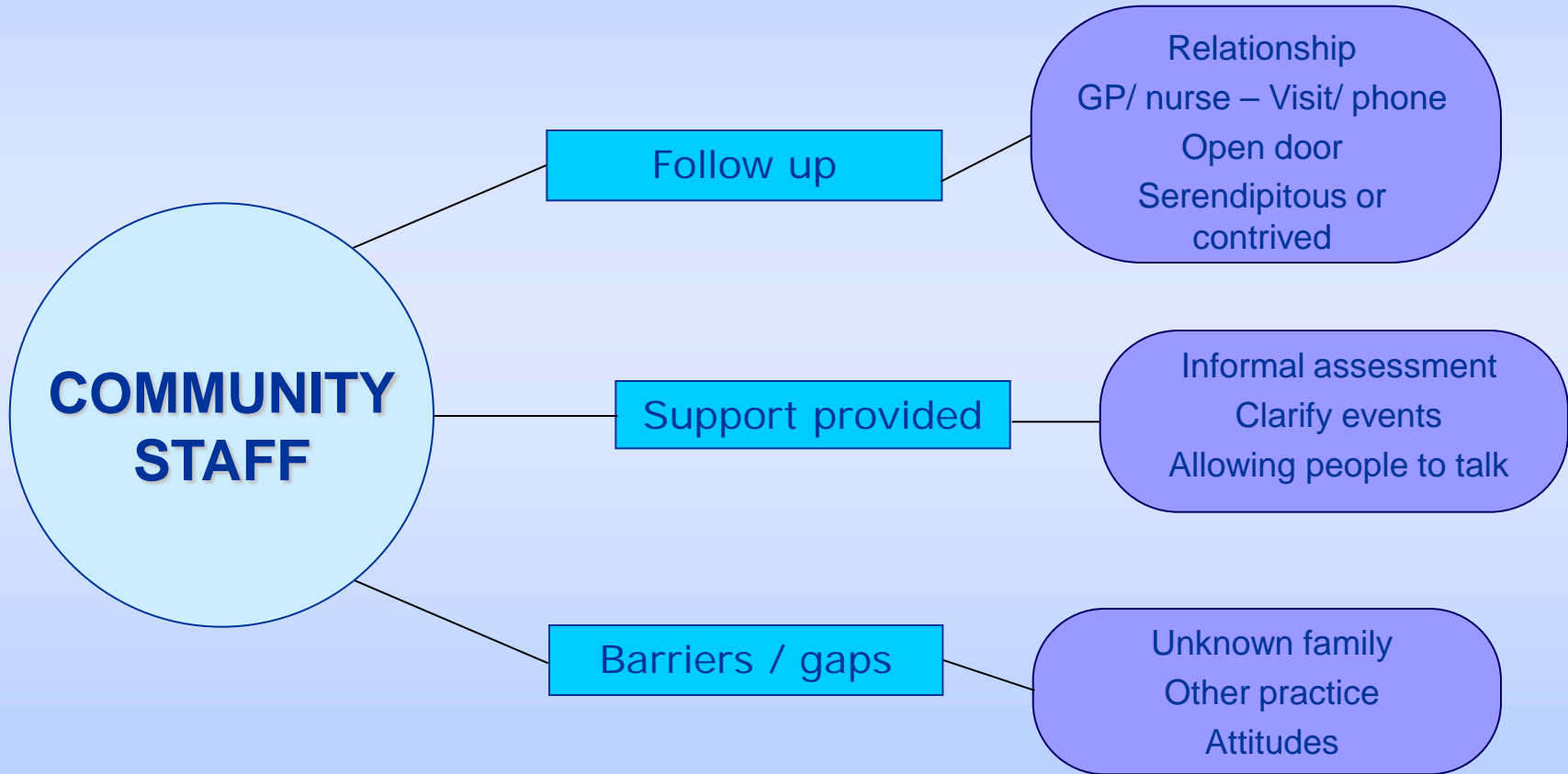
# Recruitment

- 11 Sites recruited
  - 4 hospital wards (2 rural, 2 city)*
  - 3 GP practices (1 rural, 2 city)*
  - 4 nursing homes (2 rural, 2 city)*
- 39 interviews completed
  - 12 hospital staff*
  - 9 community staff*
  - 10 care home staff*
  - 6 bereaved older people*
  - 2 others (chaplain, voluntary sector counsellor)*

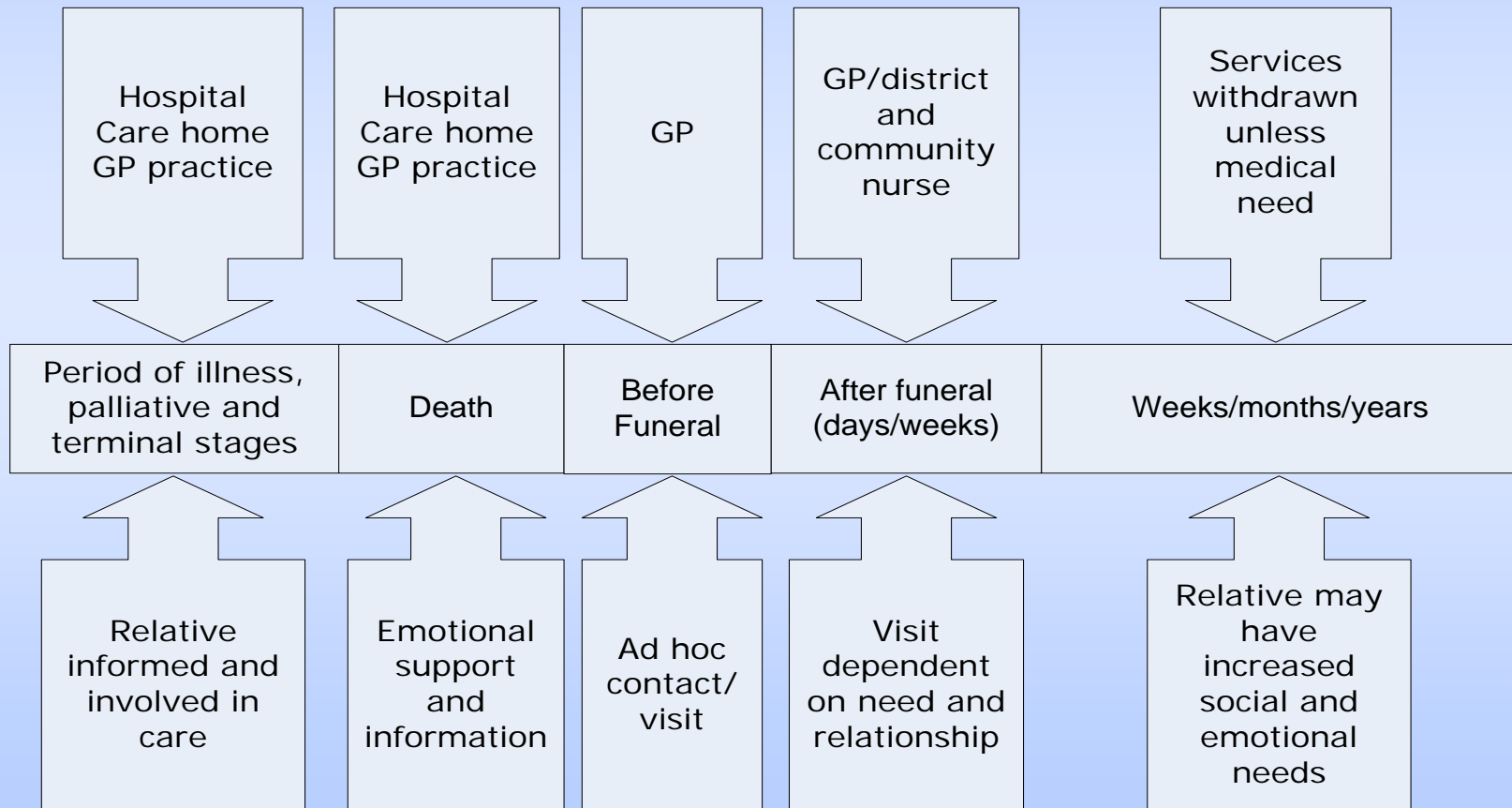
# What's done?



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# Timeline for bereavement care

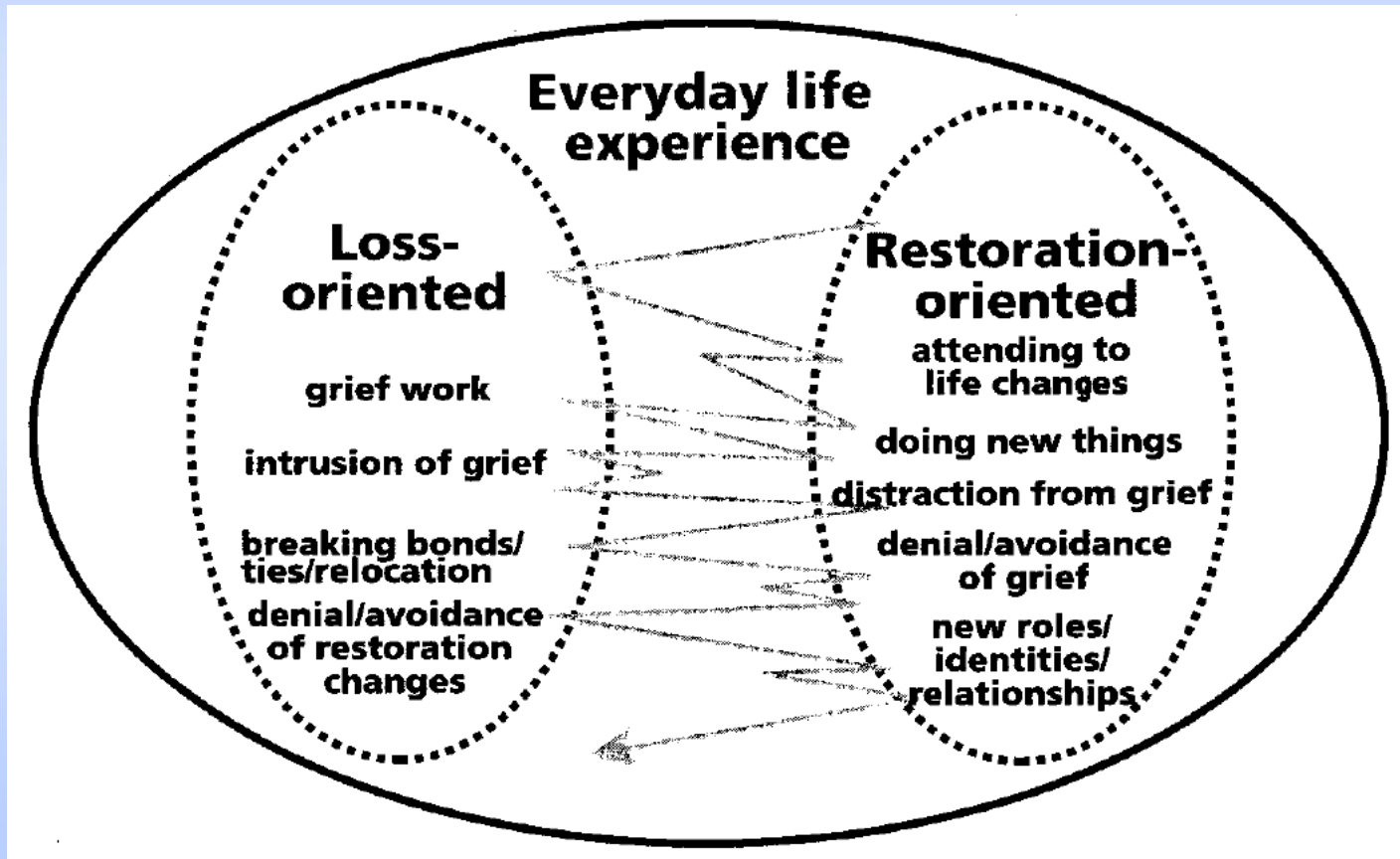


# Meaning of bereavement



# Dual Process Model for Coping with Bereavement

Stroebe & Schut (Death Studies, 1999)



# Guideline

- Designed to reflect LO/RO coping
- But, structured by timeline
- Data sources
- 3 sections
  - pre bereavement; time of death; follow up
- Recommendation statement, rationale, criteria

# Recommendations

## 1. Pre bereavement

1.1 Create a supportive environment

1.2 Prepare the older person for the loss

1.3 Assessment of possible needs post bereavement

# Assessment

Relationship to deceased

Circumstances of the death

Family/friends/ community support

Health status

Other bereavement in last 2 years

Perceived support needs (relative's stated needs)

# Recommendations

## 2. At the time of the death

2.1 Sensitively break the bad news

2.2 Respond to immediate support needs

2.3 Facilitate ongoing support

2.4 Information

# Recommendations

## 3. Follow up

3.1 Plan follow up for the bereaved older person

3.2 Bereavement visiting

3.3 Follow up from non community based staff

# Outcomes

- Consistent approach
- Flexible, respond to diverse needs
- Support independence
- Promote communication
- Staff can identify enhancements

# Acknowledgement

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**Chief Scientist Office:**  
*Research for a healthier  
Scotland*