

ELNEC- For Veterans

END-OF-LIFE NURSING EDUCATION
CONSORTIUM

Palliative Care For Veterans

Module 6 Loss, Grief & Bereavement

PARTICIPANT OUTLINE

Module 6: Loss, Grief & Bereavement

Participant Outline

- I. INTRODUCTION
 - A. Veteran, family and nurse
 - B. Nurse's role
 - 1. Assess
 - 2. Assist
 - 3. Support
 - 4. Know Veteran's goals of care

- II. THE GRIEF PROCESS: ASSESSMENT
 - A. The process/ basic principles
 - B. Loss, grief, mourning, and bereavement
 - 1. Loss
 - 2. Grief
 - 3. Mourning
 - 4. Bereavement
 - 5. Cultural considerations
 - C. Influence of the military on bereavement care for Veterans
 - 1. Stoicism
 - 2. For “cry babies” or “pity party”
 - 3. Death of a loved one can trigger PTSD or activate grief
 - 4. Brotherhood
 - 5. Estrangement, forgiveness/reconciliation issues
 - 6. Isolation
 - 7. Past experience with death
 - 8. No time to mourn of comrades
 - 9. Anger/bitterness toward how they have been treated
 - 10. Burial
 - D. Influence of the military on bereavement care for family members
 - 1. Stoicism
 - 2. Validate influence
 - 3. Frequent relocation
 - 4. Validate influence of PTSD
 - 5. Identifying PTSD for the first time
 - 6. Anger and bitterness for the way their loved one was treated
 - 7. Secondary gain
 - E. Losses experienced by Veterans
 - 1. Comrades
 - 2. Body parts
 - 3. Health
 - 4. Financial security
 - 5. Dreams
 - 6. Profession

- 7. Sexuality
- F. Types of grief
 - 1. Anticipatory grief
 - 2. Normal grief
 - 3. Complicated grief
 - 4. Disenfranchised grief
 - 5. Traumatic grief/events
 - 6. Assessment and treatment of acute grief
 - 7. Vulnerable veteran's grief
 - 8. Children's grief
 - a. Based on age & developmental level
 - b. Symptoms of grief in younger children
 - c. Symptoms of grief in older children
- G. Stages and tasks of grief
 - 1. Notification/shock
 - 2. Experience the loss
 - 3. Reintegration
- H. Factors affecting the grief process

III. BEREAVEMENT INTERVENTIONS

- A. Plan of care
- B. Attitude
- C. Cultural practices
- D. What to say
- E. Anticipatory grief
 - 1. Provide emotional support
 - 2. Encourage verbalization
 - 3. Assist with role changes, education and/or resources
 - 4. Encourage life review
 - 5. Educate the Veteran/family about dying process
 - 6. Encourage Veteran/family to complete unfinished business
 - 7. Provide presence, active listening, touch and reassurance
- F. Grief interventions
 - 1. Presence, active listening, touch, silence
 - 2. Identify support systems
 - 3. Use bereavement specialists, bereavement resources
 - 4. Normalize grief process and individual differences
 - 5. Individualize the grief process
 - 6. Actualize the loss and facilitating living without the deceased
 - 7. Identify and express feelings
 - 8. Disenfranchised grief - acknowledgment
 - 9. Public funerals, memorial services, rites, rituals and traditions; private rituals
 - 10. Spiritual care
 - 11. Recognize grief of children
 - 12. Identify need for additional assistance and making referrals
 - 13. Refer to support group(s)

IV. THE NURSE: GRIEF, LOSS, BEREAVEMENT

- A. Witness to medical futility
- B. Experience moral distress
- C. Compassion fatigue
- D. Cumulative loss
- E. Factors influencing the nurse's adaptation process
 - 1. Professional education
 - 2. Personal death history
 - 3. Life changes
 - 4. Support systems
- F. System of support for healthcare provider
 - 1. Balance
 - 2. Assessing support systems
 - 3. Spiritual support
- F. Self care strategies
 - 1. Develop self-awareness
 - 2. Practice self-care

V. CONCLUSION

- A. Bereavement care continues after death
- B. Assessment with ongoing intervention
- C. Recognize own grief
- D. Bereavement care is interdisciplinary