

Bereavement Program for the Perinatal Loss Patient and Family

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Background

- Parents and families who have a perinatal loss report significant grief
- Nurses report it is challenging to care for parents and families who have experienced a perinatal loss
- Management and education personnel identified the need for bereavement education
- Bereavement training can help nurses become more comfortable and effective in providing care to parents and families who experience perinatal loss
- Resolve Through Sharing (RTS) offers training to provide care to bereaving patients and families

Purpose

To examine the impact of a standardized bereavement training program on staff nurses' perception of their ability to provide effective care for patients experiencing perinatal loss

Participants

- Pilot Project:** (N = 18)
 - Staff Nurses: n = 15
 - Interdisciplinary: n = 3
 - Female: n = 17
 - Male: n = 1
- Project:** (N = 22)
 - Staff nurses: n = 22
 - Female: n = 22

Method/Measures

- Women's Services registered nurses (n = 3)
 - Enrolled in two day bereavement class training and certification
- Completed Resolve Through Sharing (RTS) Bereavement Coordinator training
- 3 Coordinators:
 - Initiated internal RST classes with staff members
- Conducted a quasi-experimental study
 - Pre-test/post-test
 - Intervention: RTS bereavement training
- Investigator developed survey
 - Piloted survey prior to investigation
 - Revised survey based on pilot data/feedback
- Developed interdisciplinary bereavement committee to improve collaboration when parents and families experience perinatal loss
- Obtained competency based pay after completion of education classes

Data Collection/Analysis

- Participants completed pre-intervention survey
- Participants took Resolve Through Sharing classes
- RST Bereavement Coordinator(s) provided training intervention
- Participants completed post-intervention survey
- Frequencies of responses calculated on:
 - Pre-survey
 - Post-survey

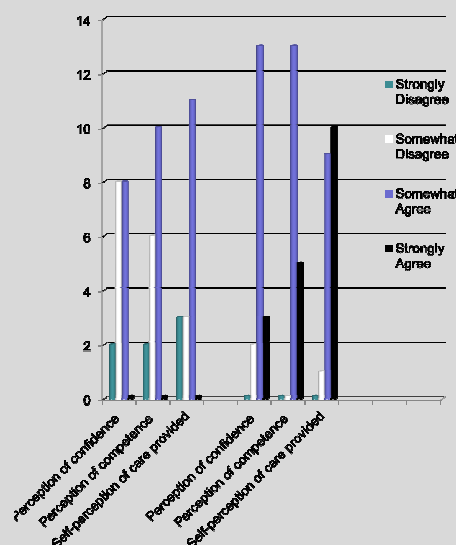
Results

Participants perceptions of effective care with perinatal loss, including competence, confidence, and care gain was measured by pre and post intervention surveys

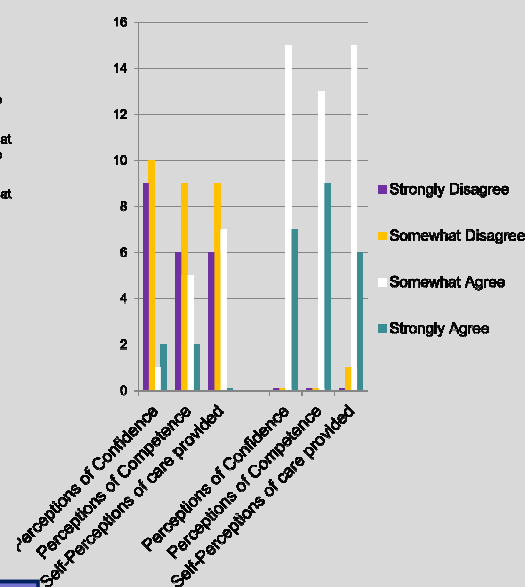
"Thank you so much for the best care, support, and help that we could imagine"

"This has to be the best staff in the world!"

Pilot Pre/Post-Test
(N = 18)



Project Pre/Post -Test
(N = 22)

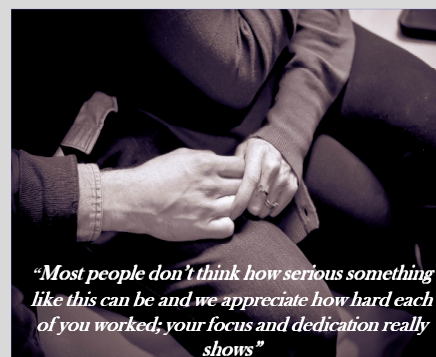


Project Outcomes

- Improved nursing confidence and competence when caring for patients experiencing perinatal loss
 - Nursing staff confidence: Pre: 46%; Post: 83%
 - Nursing staff competence: Pre: 53%; Post: 85%
- Evidence based policy and standard of care for all employees to provide consistent care for perinatal loss (n = 94)
- Competency based pay increase for staff nurses (n = 40)
- Anecdotally, staff reported increased comfort with their own emotions and reactions to perinatal loss, enabling them to provide more effective care

Discussion

- During this project, staff nurses were able to work with 20 families who experienced a perinatal loss
- After care was provided, many patients shared positive feedback regarding their appreciation
- By implementing this project, the following conditions were established:
 - RTS Trained Bereavement Coordinators (n = 3)
 - Evidence Based Standardized Bereavement Care
 - Creation of Bereavement Committee



"Most people don't think how serious something like this can be and we appreciate how hard each of you worked; your focus and dedication really shows"

Leadership Journey

Model the Way

- Initiating bereavement project through STTI
- Completed bereavement 3 day instructor course
- Training on debriefing sessions and follow-up phone calls

Inspire a Shared Vision

- Created interdisciplinary bereavement committee to improve collaboration

Challenge the Process

- Obtained funding and time for staff nurses to attend training
- Expanded enrollment option to encompass all facility departments

Enable Others to Act

- Provided bereavement training to staff nurses and interdisciplinary professionals
- Implemented new evidence based bereavement policy and procedure
- Expanding training to bereavement committee members on debriefing sessions

Encourage the Heart

- Personal thank you cards to all bereavement committee members
- In-person expression of gratitude to bereavement commitment

Fellow's Perspective: "I honestly did not know what all to expect when I applied to the MCH Leadership Academy, but what an opportunity I have been given! It has truly been an honor to work with such great nurses! I have stretched and grown more than I thought possible as a leader in my profession and also in my personal life. It would have taken me two decades or more to become the leader I am today after completing the MCH Leadership Academy."

Next Steps

- Implement the bereavement program throughout the hospital at every potential patient entry point:
 - Emergency Department
 - Women's Center Clinics
 - Same Day Surgery
 - Operating Room Staff
 - Pediatrics/Gynecology
- Monitor sustainability by having bereavement trained nursing staff complete surveys prior to and after caring for patients experiencing a perinatal loss

Bereavement Committee Members

- Charlie Brown, Chaplain
- Brandy Stewart RN, RTS Bereavement Coordinator
- Mary Loftus MSN, RNC, RTS Bereavement Coordinator
- Breanne Gilchrist LMSN, Social Worker
- Melissa Wilhite RNCCM, Case Management
- Milton Teal RN, BSN, Director of Patient Access
- Bayley Baker RN, BSN, NICU
- Erin Reed RN, BSN, NICU
- Erika Kieklak RN, BSN, LDRP
- Linda Huffmaster RN, LDRP