



Hospice
ISLE OF MAN
care for our community

Hospice Care

(Hospice Isle of Man)

Clinical Policy 31

Bereavement Service Operational Policy

Originator: L. Wilkinson, Bereavement Care Coordinator

Date of Issue: ~~1st November 2006~~; 2 April 2009

Date for Review: ~~1st November 2008~~; ~~1st November 2010~~; ~~November 2012~~; November 2014

Ratified: Clinical Governance Committee

1 Introduction

- 1.1 The Bereavement Service provides support to those family members who require it
- 1.2 Bereavement Support is indicated when people experience difficulty in managing daily life following the death of a loved one. This can occur days, weeks, months, or even years after the death

2 Purpose

- 2.1 To identify the role and responsibility of the Hospice Bereavement Service
- 2.2 To identify the process through which clients are referred to the Bereavement Service

3 Policy

- 3.1 This policy applies to the Psychological Support Team employed by Hospice Care, and the Bereavement Service volunteers
- 3.2 The Bereavement Service aims to:
 - 3.2.1 Provide bereavement support to patients' family members
 - 3.2.2 Ensure that confidential information is not disclosed to a third party unless there are clear grounds for disclosure including:
 - a) The consent of the individual
 - b) The public interest, particularly where there is a risk of harm
 - c) Accordance with an order of a court or other public body that has jurisdiction
 - 3.2.3 Work in a collaborative and cooperative manner with colleagues, and communicate effectively with them within the limits of confidentiality
 - 3.2.4 Keep documented records of clients sessions in a secure place
 - 3.2.5 Promote client autonomy and, in rare circumstances, to act as the client's advocate
 - 3.2.6 Respect the autonomy of the individual including the freedom to make decisions contrary to the beliefs, practices, and opinions of the Bereavement Service team
 - 3.2.7 Work alongside the Hospice Chaplaincy and Palliative Clinical Nurse Specialists in following up bereaved individuals
 - 3.2.8 Provide a number of volunteers to be present at the Annual Service of Thanksgiving and Remembrance
 - 3.2.9 Offer 1:1 sessions to clients in their own home or, when

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necessary, in the Counselling Room at Hospice.

- 3.2.10 Provide 1:1 play therapy support for children who have been bereaved
- 3.2.11 Provide initial training to Bereavement Service Volunteers of at least 36 hours. This training to encompass Basic Listening Skills, Bereavement Theories and Issues, and Personal Development
- 3.2.12 Provide monthly group supervision to the Bereavement Service Volunteers and 1:1 supervision as required
- 3.2.13 Provide ongoing training for volunteers
- 3.2.14 Encourage the further development of volunteers' skills through external training as appropriate
- 3.2.15 Provide opportunities for the newly bereaved to meet others in a similar situation to themselves through the provision of a monthly bereavement group in our Scholl Centre 5.00 p.m. to 7.00 p.m. on Wednesdays. This is open to bereaved people Island wide and is a joint initiative with Cruse.
- 3.2.16 To convene a Bereavement Forum annually to discuss and update the service and involve service users in this process
- 3.2.17 To send letters re support and as anniversary cards to all bereaved relatives who wish to receive them

3.3 Resources

- 3.3.1 In the rooms as stated
 - a) Books – Bereavement Counsellor's office
 - b) Toys

4 **Composition of the Team**

- 4.1 One full-time Hospice Counsellor assisted by the 8 Volunteer Bereavement Visitors
- 4.2 The Clinical Director manages the Hospice counsellor
- 4.3 The day to day operational management responsibility belongs to the Hospice Counsellor
- 4.4 Secretarial support is provided by a volunteer secretarial worker based at Hospice Care
- 4.5 The Bereavement Service works in conjunction with Hospice Care's

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multidisciplinary team

5 Location of the Team

5.1 Based at Hospice Care, Strang, Braddan - Telephone 647449 (430546)

6 Referrals

6.1 The Bereavement Service is accessed by referral through MDT via IPU/ Rebecca House (RH), CNS, GP or Consultant.

6.2 Bereaved individuals can self refer

6.3 Referrals should aim to be allocated within two working days

7 Evaluation and Service Development

7.1 The Hospice Counsellor will:

7.1.1 Undertake regular audits of service's work

7.1.2 Contribute to and attend In-house education sessions as appropriate

7.1.3 Attend all mandatory training

7.1.4 Access regular supervision through internal or external support

7.1.5 Identify any learning needs and undertake appropriate continuing professional development

7.1.6 Contribute to the education programme delivered by Hospice Care

7.1.7 Liaise with, and raise the awareness of Hospice Care, among other organisations such as CRUSE, The Counselling Service, Crossroads Care for Carers and Manx Cancer Help.

7.1.8 Contribute to the ethical decision-making and care of patients and families of Hospice Care

7.1.9 Assist in the facilitation of debrief sessions re: difficult cases occurring in IPU/RH

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