

## **Implementation of the HSE National Standards for Bereavement Care following Pregnancy Loss and Perinatal Death (2016).**

### **Standard 4: The Staff**

#### **All hospital staff have access to education and training opportunities in the delivery of compassionate bereavement and end of life care in accordance with their roles and responsibilities (HSE 2016: 52)**

One of the core components of Standard 4 is 4.5 Staff Support “Staff Support services relating to bereavement care reflects the need for peer support and professional support systems” (HSE 2016: 55). In the Health Services Executive (2016) National Standards for Bereavement Care following Pregnancy Loss and Perinatal Death (from here on in written as NSBC), 4 Standards of Bereavement Care are presented namely, Standard 1 Bereavement care, Standard 2 The Hospital, Standard 3 The Baby and Parents, Standard 4 The Staff. The definition of Staff used within the NSCB document is “all people who work in maternity unit/hospital including all members of the multidisciplinary team, reception staff, security staff, kitchen staff, midwifery and nursing students, nurse assistants, laboratory staff, mortuary staff, cleaning staff, porters and all auxiliary staff in hospitals” (2016:11).

This document sets out key recommendations for the implementation of Standard 4 as it relates to 4.5 Staff Support within Irish Maternity Services in the Republic of Ireland. The wide remit of the implementation of the NSBC relating to Staff Support (4.5) comes with many challenges as it seeks to ensure that staff support processes are put in place for all staff working within the Irish maternity health care services. Most specifically, these recommendations to support the implementation of the NSBC need to address the needs of a diverse staff mix, with multiple backgrounds, experience, education and training who provide care to women and men and their families within a complex health care system. The implementation of the ten criteria described in the NSBC under Standard (4.5) will only be achieved through the adoption of a culture of support involving all staff which is backed by senior managers within the organisation and health care policy makers nationally. In the recommendations set out below the NSBC criteria are grouped together and presented with “What is Required?” “Action” “Responsibility” and “Time Line”, where possible reference is made to relevant national programmes already in place or due for roll out by the HSE Workplace Health and Wellbeing Unit in the coming months.

#### **NSBC Criterion**

- A formal policy on staff support for those working in maternity settings is devised and resourced. This policy defines and addresses the efficacy of a range of support options (supervision, individual debriefing, time-out, peer group support, the services of a professional counsellor.
- Hospital Management recognises the importance of providing debriefing for staff involved with trauma or sudden deaths and puts in

- place formal and informal systems to support staff who have been involved, directly or indirectly, in such events.
- Senior Management observe for signs of stress and difficulty in staff members and recognise the importance of support for staff involved in caring for bereaved parents.

What is required?	Action	Responsibility	Time Line
A formal policy and operational guideline is put in place by the Hospital management which recognises the normality of grief reactions in staff working in maternity settings and which outlines a range of support options that are available for staff within their organisation.	A formal policy on Staff Support in relation to Bereavement Care is developed under the National Framework on Workplace Health and Wellbeing Strategy <sup>1</sup>	Hospital Management	Within 12 months
The provision of information to staff on staff support and who is responsible for co-ordinating this within the hospital is provided as part of an induction/staff education/training day.	Provision of regular induction/training education days for ALL Staff.	Hospital Management/ HR	Within 6 months
All clinical managers (particularly in the labour ward and neonatal unit) are trained to support staff around bereavement and to provide immediate debriefing to staff and that this training is designated as mandatory for clinical managers	All clinical managers undertake mandatory training on debriefing support <sup>2</sup> to staff in the aftermath of a trauma or sudden death. Formal debriefing <sup>3</sup> for staff is organised if required.	Hospital Management/ HR Clinical Managers	Within 12 months
It is the responsibility of the Hospital Management Team to ensure that organisational structures and processes are in place for enabling peer to peer support for staff in the immediate aftermath of a trauma or sudden death.	The clinical manager or a named other senior member of staff should also act as a contact person for the staff member should they wish to talk to someone outside of working hours.	Hospital Management/ Clinical Managers Hospital Management/ Clinical Managers	Within 24 months

<sup>1</sup> National Framework on Workplace Health and Wellbeing Strategy (Standards for Wellbeing and Health in Doctors – to be introduced in April 2018 and will be followed by the Strategy for other Health Care Workers in 2019).

<sup>2</sup> The Health and Wellbeing Module for First Time Managers Programme is currently under discussion for inclusion in Leadership Academy Modules Sept 2018

<sup>3</sup> National Framework on Work Positive Critical Incident due for implementation at the end of 2018

<p>It is also essential that continued support is provided</p> <p>(i) Immediate aftermath. This may include someone to accompany staff members when they visit patients after the adverse event.</p> <p>(ii) When the coronial post-mortem becomes available. Support and expert explanation is needed at this time to explain the coronial process as well as the findings to staff involved.</p> <p>(iii) When the inquest/ court case is on. This is a particularly vulnerable time for staff members and a time when support is greatly needed.</p> <p>(iv) If there is media coverage</p>	<p>It is the responsibility of the Hospital Management to ensure that there are mechanisms in place for staff who may develop stress when providing services to the bereaved mother and her family.</p>	<p>Hospital Management/ HR</p>	<p>Within 12 months</p>
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<p><b>NSBC Criterion</b></p> <ul style="list-style-type: none"> <li>• Reliable information is provided to each staff member so that staff are also encouraged to take individual responsibility for well-being and self-care.</li> <li>• Each staff member takes personal responsibility for her/his selfcare and knows how to access structured debriefing services. She/he has access to the Employee Assistance Programme provided by Hospital Management.</li> <li>• Staff are accommodated to provide informal support to each other. Regular team meetings are important for peer support.</li> <li>• Issues and challenges for staff arising from the delivery of bereavement care form part of team discussions and are addressed in reviews of bereavement care.</li> </ul>
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- Staff who use support services to address issues that may arise during provision of bereavement care are facilitated to provide feedback on their appropriateness and value. These can be achieved through both formal and informal evaluations
- Private space is available to enable staff to discuss and address issues that may arise when providing bereavement care and dealing with death.

What is required?	Action	Who does this?	Time Line
<p>Induction days and education/training days are regularly used to encourage All Staff to support their own health and wellness.</p> <p>Onsite wellness workshops and information on normal grief reactions in maternity settings are developed and delivered within a psycho-educational framework.</p> <p>Staff are given the opportunity to meet with peers for support and that structures are put in place such as extra staff or the re organisation of work load to facilitate time away from the ward.</p>	<p>Provision of regular induction/training days for ALL Staff.</p> <p>Information on good resources (see below list of references) for accessing information on wellness and self-care and Employee Assistance Programme (EAP) are displayed on staff notice boards, as folders on each ward and regular emails/letters sent out to remind Staff etc.</p> <p>Regular meetings for ‘reviews of bereavement care’ are opportunities for staff to share their experiences</p> <p>Introduction of Schwartz Rounds / Balint Rounds/ CEOL review process (Compassion at End of Life) should be considered for roll out within the hospital/unit. Continued use of the ‘Assist Me’ model” (HSE, 2013).</p>	<p>Hospital Management/ HR</p> <p>Hospital Management/ Clinical Managers</p>	<p>Within 12months</p> <p>Within 6-12months</p>
<p>The hospital Management ensure that the staff support services provided within the hospital are fit for purpose through regular evaluation processes. This evaluation should include</p> <p>(i) Peer to peer in immediate aftermath</p>	<p>An evaluation process is implemented to include the use of staff survey, staff suggestion boxes, staff feedback forums.</p>	<p>Hospital Management/HR</p>	<p>Annual review</p>

(ii) Management response (iii) Formal debriefing (iv) EAP			
If a private space is not available this should be considered as part of future planning within the organisation by the Hospital Management.	A named room within the organisation to be available to staff.	Hospital Management	2 years

**Training and/or Education Courses Which May Assist Irish Maternity Care Organisations to Enhance Staff Support**

**Baby Lifeline:** Resilience Training for Maternity Healthcare Professionals [6 CPD credits].  
**Coombe Women and Infant University Hospital, Centre of Midwifery Education.** Mindfulness & Self compassion Programme (delivered as Study Days for Midwives across the three Dublin Maternities).  
**Cork University Maternity Hospital:** IMPROVE Workshop Building Resilience Capacity in Healthcare [Currently being reviewed for facilitation; 1.5 /3.5 CEU's].  
**Irish Hospice Foundation:** Grief in the work place; Providing effective support to grieving employees [Certificate of Attendance- NMBI Accreditation 7 CEU's pending].  
**Irish Hospice Foundation:** Grief in the work place; The Role of Managers Workshop [Certificate of Attendance- NMBI Accreditation 3.5 CEU's pending].  
**Irish Hospice Foundation** CEOL Review – a structured staff debrief/ support meeting for reviewing the death of a patient Setting [Certificate of Attendance- NMBI Accreditation 7 CEU's].  
**Irish Hospice Foundation:** Dealing with Loss in a Maternity Setting [Certificate of Attendance- NMBI Accreditation 7 CEU's pending].  
**Irish Hospice Foundation- ONLINE:** Loss for Words- Words for loss [Certificate of Attendance].  
**Irish Hospice Foundation:** Staying well at work [3.5 CEU's].  
**Irish Childhood Bereavement Network.** Various self- care modules. [Certificate of Attendance].  
**National University of Ireland Galway, School Nursing and Midwifery.** MSc in Children's' Palliative and Complex Care (in collaboration with UCD). One of the modules includes a dedicated Unit on parental and sibling bereavement. <https://www.nuigalway.ie/courses/taught-postgraduate-courses/childrens-palliative-care-complex-care/>  
**RCPI:** "An Approach to Caring and Coping" In Pilot Phase.  
**University Maternity Hospital Limerick:** Learning to Exhale-Mindfulness and self- compassion program. [Certificate of Attendance].

**Good resources**  
<http://www.yourmentalhealth.ie/get-involved/littlethings-campaign/>

<http://www.hse.ie/eng/about/Who/healthwellbeing/>

<https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/emotional-wellbeing/>

### **References**

Health Services Executive (HSE) (2016) National Standards for Bereavement Care Following Pregnancy Loss and Perinatal Death. Available at <http://www.hse.ie/eng/about/Who/acute/bereavementcare/standardsBereavementCarePregnancyLoss.pdf>

Health Services Executive (HSE) (2013) Supporting staff following an adverse event: the assist me model. Available at <https://hse.ie/eng/about/Who/QID/Other-Quality-Improvement-programmes/opacitydisclosure/opacitydiscFiles/bookletSuppStaffadverseevent.pdf>