

Support for grieving frontline home care workers

Home care workers working in palliative care experience the deaths of their clients often. This project identified themes from the grief experiences of these workers and resulted in more supports and resources being made available to help frontline home care workers cope better.

The grief experiences of frontline healthcare workers in long term care are well understood, and they have opportunities, working in an institution, for social and spiritual support and in-place training.

Home care workers who care for dying clients and their families also experience grief but need different kinds of support because they work in different circumstances: autonomy/isolation in the community, lack of institutional structures to provide face-to-face support, and longer, more personal involvement of direct care workers with dying clients and their families.

Project Overview

Studies in acute care hospital and long term care settings show that the effects of grief can have significant negative consequences on staff, the organizations they work for and the clients and families they care for. These consequences include reduced psychological well-being and job performance and lower quality of client care. Many studies have indicated that there is a need to support health care providers with their grief experiences after the death of clients, and experts and researchers have defined possible support

strategies for health care providers in acute and long term care settings.

The work of home care workers is different from work in acute care hospitals and long term care homes. Home health care providers are geographically dispersed and isolated from others in the health care sector. Although home care providers work in teams, these teams are virtual and often their interactions with other team members are limited to notes on charts and occasional employer organized meetings. Furthermore, the care is often provided longer along the health-illness trajectory

resulting in relationships that can extend over many years. The episode of care takes place within the client's and family's home and often home care workers form close relationships with clients and families, becoming an extension of the family. While the grief experiences of health care workers from the acute care and long term care settings possibly indicate the issues that home care workers face, the contextual differences will likely have some different implications for home health care workers.

We set out to document and analyze the grief experiences of nurses and Personal Support Workers working in palliative home care, determine whether they are appropriately supported, and if not, identify ways for supporting them better.

What did we do?

Over the course of several months, a researcher interviewed 15 direct care providers and video-recorded the interviews. We included nurses and PSWs working in urban and rural settings, and with a range of experience – from novice to experienced. We compiled a video, and took it to several focus groups composed of supervisors and other frontline workers to validate the findings and identify supports that would address any unmet support needs of frontline providers.

What did we find?

Isolation and dispersed home care work do make a difference to the grief experiences of home care workers in comparison with workers in institutions. Providing care in a home over an extended period

means workers feel a family member-like loss but they are also often asked concurrently to provide grief support to family members. We found that there were differences in the grief responses of novice and experienced home care workers. Workers expect help to deal with their own grief and want more counseling and time to talk with peers. They also expect time and training to provide support to family members; except in specific cases, they do not feel they get enough of either.

Employers can support their workers in different ways, including providing more time and space for grieving, peer support, and training on supporting grieving families.

What was the impact?

Changes were made in supports available within SE Health to direct home care providers:

- Clarification of Employee Assistance Program
- Guide for leaders to support staff
- Regular reports on client deaths for supervisors
- Case debrief guidelines
- Revised bereavement visit guide
- Annual celebration of life

A video documenting these grief experiences and how to support home care workers can be accessed here:

<https://vimeo.com/280739853>

In addition, in conjunction with a review of the spiritual care program at SE Health, a series of supportive webinars called *Spiritual Care Corner* was started.

How was the research funded?

This research was funded by SE Health as part of its social innovation mission.

Researchers

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About the SE Research Centre

The SE Research Centre is funded by SE Health to conduct impact-oriented health services research and evaluation for the benefit of Canadians. We study the needs of people, their caregivers, and health care providers, to develop evidence-based solutions to tough health and social care problems. Our researchers collaborate with a wide variety of community and academic partners across Canada.

In the SE Research Centre there are four fields of research and evaluation: Aging in Society; Dying, Death and Grief; Health and Care Experiences; and Models of Care Delivery.

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