

New to Bereavement Coordination

Bereavement Professional Chat Box Transcript

July 5, 2017

NHPCO Staff: Hi, everyone! Here is the link to the slides located at MyNHPCO:

<http://my.nhpc.org/viewdocument/new-to-bereavement-coordinators-ch?CommunityKey=191c46b6-05de-4f1d-8e1e-dca744cc7879>

NHPCO Staff: If you are getting your audio through the phone and would like to ask a question, click the green question mark icon at the top of the screen and enter your phone number. We will unmute your line.

Leslie Harrison: How do you get certified in this field?

Leann P. McConchie, MA-MHC: I am interested in further information regarding BER certification. I may have missed this.

Deanne Perez: How so bereavement programs use volunteers?

Diane Snyder Cowan: ADEC.org.

Natasha Satre: Do you have recommendations for resources to develop grief/loss support group curriculum?

Robin Gallant: Paw pals too.

Vonshelle Beneby: Memory Bears and Pillows.

Valerie Bohlen: How involved is the Bereavement coordinator during IDT meetings?

Robin Wussow: What is your practice regarding meeting with patients and their families before death to establish rapport? Was thinking of attending a visit with a Social Worker as part of the team introduction...thoughts?

Leann P. McConchie, MA-MHC: We also create memory pillows.

Leslie Harrison: Are bereavement coordinators social workers or are degreed (MDiv, DMin) chaplains also used?

Julie Daprile: How often should I be calling bereaved clients?

Leslie Harrison: In many of the seminary programs where students have to take 4CPE units you receive all the group therapy and mental health counseling.

Robin Gallant: Depends on the patient need...

Belinda Motzkin Brauer: We honor our patients that die at our monthly staff meeting by creating a slide show with the patient's photo and name adding an appropriate song in the background. The lights are off to create a sacred atmosphere. We have lit a battery operated candle as well. At the end of the slide show we sit in silence for a minute. This is the only way we have found to be able to collectively get our team to tap into their professional loss.

Robin Gallant: That is very nice Belinda.

Leslie Harrison: We honor our patients at the weekly IDT meeting by calling their name, lighting a candle and memories.

Polly Hebig: Do you know of any training or a good book to give to staff that have no grief support experience but because we are so small and rural, need to wear that hat at times.

Deborah Pausig: Companioning the Bereaved by Alan Wolfelt.

Ann Fronek O'Connell: Looking for suggestions for bereavement groups- topics for meetings.

Valerie Bohlen: The Grief Recovery Handbook by John W. James and Russell Friedman.

Leslie Harrison: we do caregiver groups quarterly. The chaplains also check in with health care givers after a death. We do memorial services at nursing facilities to help those caregivers.

Heather OBrien: re: Caregiver groups - We partner with a local retirement community and they supply staff to be with loved ones while caregiver attends group. Group is open to their residents and the community.

Belinda Motzkin Brauer: What are the two questions to help assess "pre-bereavement" needs?

Valerie Bohlen: After death, does your agency send a flower to the funeral/memorial services?

Valerie Bohlen: Just recently we started making those contacts from the hospice staff; working out well.

Daniel Sanford: We typically have me or our other chaplain go to the funeral or memorial service and talk with the family where we express our condolences and thank them for the privilege of caring for their family member and let them know that our services are available whenever they need to call and talk with someone

Leslie Harrison: My agency sends a card signed by each staff member. Some staffers add a message.

Robin Gallant: Thank you!

Julie Daprile: Thank you!

Robin Wussow: Great information! Thank you...

Daniel Sanford: Thank you!

Amy Stallings: Thanks so much for the input!

Leslie Harrison: Thank you. The information was very valuable.

Leann P. McConchie, MA-MHC: Thanks to the presenters and colleagues.