Addressing Cumulative Grief as an Interdisciplinary Palliative Care Team

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Learning Objectives
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1.) Participants will identify the unique burden of cumulative grief carried by physicians, nurses, social workers, chaplains, and other healthcare professionals.
Learning Objectives

2.) Participants will complete a grief inventory activity and gain competency in administering similar tools with colleagues.
Learning Objectives

3.) Participants will expand their set of resources for processing and coping with grief and preventing compassion fatigue
Introduction
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Who we are:
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• Tampa General Hospital
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• Tampa General Hospital
• 1,000 bed facility
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• Tampa General Hospital
• 1,000 bed facility
• Level-one trauma center
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• Regional burn center
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Who we are:
• Tampa General Hospital
• 1,000 bed facility
• Level-one trauma center
• Regional burn center
• Palliative care program
Introduction

Who we are:
• Palliative Care Team
Introduction

Who we are:
• Palliative Care Team
• 1 fulltime physician
Introduction

Who we are:

- Palliative Care Team
  - 1 fulltime physician
  - 3-4 (rotating) medical fellows
Introduction

Who we are:

• Palliative Care Team
  • 1 fulltime physician
  • 3-4 (rotating) medical fellows
  • Chaplains
Introduction

Who we are:

- Palliative Care Team
  - 1 fulltime physician
  - 3-4 (rotating) medical fellows
- Chaplains
  - 3 part time/ 1 chaplain fellow
Introduction

Who we are:
• Palliative Care Team
  • 1 fulltime physician
  • 3-4 (rotating) medical fellows
• Chaplains
  • 3 part time/ 1 chaplain fellow
• 1 social worker
Introduction

Who we are:

• Palliative Care Team
  • 1 fulltime physician
  • 3-4 (rotating) medical fellows
• Chaplains
  • 3 part time/ 1 chaplain fellow
• 1 social worker
• 2 Nurse Practitioners
Introduction

Who we are:

- Palliative Care Team
  - 1 fulltime physician
  - 3-4 (rotating) medical fellows
- Chaplains
  - 3 part time/ 1 chaplain fellow
- 1 social worker
- 2 Nurse Practitioners
- 2 nurses/ support staff
Introduction

Who we are:
• Palliative Care Team
  • 1 fulltime physician
  • 3-4 (rotating) medical fellows
• Chaplains
  • 3 part time/ 1 chaplain fellow
• 1 social worker
• 2 Nurse Practitioners
• 2 nurses/ support staff
• 1 Patient Care Tech
Grief
“[I]n health care, where loss is a daily event both for patients and caregivers, disenfranchised grief is an understudied phenomenon (Papadatou, 2009). Most professional understandings of stress and grief in the workplace usually refer to burnout or compassion fatigue, rather than grief explicitly.”

“Cumulative grief was experienced as an awareness of inner pain, brought about by many losses sustained over long periods without satisfactory closure.”

Why talk about grief?
“I think we absorb a lot of sadness that we can’t possibly acknowledge... Because we are caregivers, we feel we should be able to handle difficult things. We encourage others to just spill their guts and just say how they are feeling and yet we really deny ourselves that opportunity to really express the losses we have been through... I’ve paid the price for it. I think my body was full of sadness.”

An inventory of grief
A new approach to the sacred story of your relationship to grief
How many patients do you see in a week who are
• Actively dying?
• Have a prognosis of less than 6 months?
• Have just received a terminal diagnosis?

How often are you physically present at the bedside of a person as he or she dies?
What other stressors bring grief into your work?

• Tension among staff/interdisciplinary tension
• Colleagues leaving
• Repetitive exposure to suffering
• Loss of meaning-making
• Challenges to our own belief systems
• Outside stressors, personal struggles
Some symptoms of unresolved grief

- Unwarranted anger toward spouse/partner
- Impatience with children
- Feelings that you shouldn’t or can’t process your day
- Crying on your commute
- Isolating from others
- Somatic impact of this work
Reflection

As you think of the losses and the grief of your work, how do you feel in your body right now?
Reflection

What do you want to say to your grief?
Honoring and tending grief

“[H]ealth care professionals will provide better care and support to seriously ill [patients] and their families when they feel supported personally and professionally in their work.”

Addressing Grief as a Team

“Throughout the implementation of the action plan, the voices of suffering became more audible, perhaps because participants were invited to acknowledge it and name it, and respond to it rather than deny or repress it.”

Honoring and tending grief

- Established interdisciplinary network to support palliative and end of life care
- Palliative care rounds - in which staff needs were part of the assessment
- Patient care conferences
- Bereavement debriefings
Rituals to Honor Grief
I HONOR THE MANY FACETS OF YOUR GRIEF
There are many things that can only be seen through eyes that have cried.

Óscar Romero