

The National Long-Term Care Ombudsman Resource Center

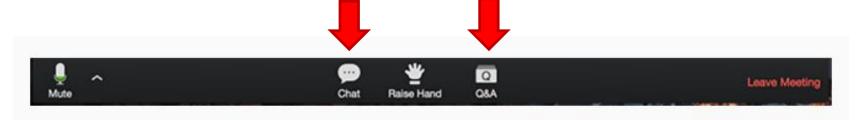
COVID-19 AND OMBUDSMAN PROGRAMS:

UNDERSTANDING HOW TRAUMA IMPACTS YOU, RESIDENTS, AND YOUR ADVOCACY

Grief and Mourning in a Time of COVID-19

July 29, 2020

Questions? Use the Q&A or Chat box.

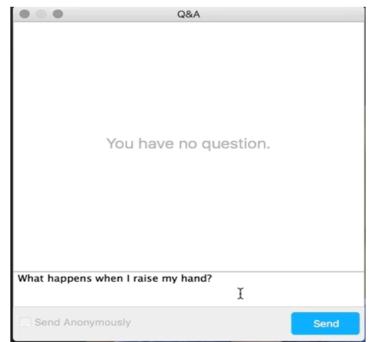




Question & Answer

The Q&A window allows you to ask questions to the host and panelists. They can either reply back to you via text in the Q&A window or answer your question live.

- 1. Click Q&A to open the Q&A window.
- 2. Type your question into the Q&A box. Click Send.



Chat

The in-meeting chat allows you to send chat messages to and send a message to the host, panelists, and attendees (if permitted).

1. Click Chat to open the in-meeting chat.



- 2. The chat will appear on the right side of your Zoom window if you are not in full screen. If you are in full screen, it will appear in a window that you can move around your screen as needed.
- 3. To change who you are chatting with, click the drop down beside **To:**.



4. Type your message and press **Enter**.

RESOURCES

Taking Care of You

- Compassion fatigue, burnout, individual trauma, and trauma-informed care
- Typical reactions to stress
- Self-care tips
- Program Management Considerations (supporting staff and volunteers)





Taking Care of You

The Coronavirus (COVID-19) is an unprecedented pandemic. In our lifetime, we have never been in the situation of dealing with so many variables impacting us, our families, employers, family caregivers, and residents of long-term care facilities. In addition to the general stress of this pandemic, the way Ombudsman programs operate has been significantly impacted due to the temporary in-person visitation restrictions. In-person visits with residents are a core part of Ombudsman program outreach and advocacy, so the restrictions may increase your feelings of stress and helplessness since you cannot interact with residents in-person and observe their environment. Although it may not feel like it now, our current situation is temporary, and we will return to our regular routines eventually. However, during this difficult time, it is critical that you take care of yourself so you can be your best for others in both your work and personal life.

By the very nature of Ombudsman program work, you may be subjected to compassion fatigue, burnout, or individual trauma. We have provided brief information about these and encourage you to use <u>screening tools</u> provided by Substance Abuse Mental Health Services Administration (<u>SAMHSA</u>) or other reputable health organizations. Please do not hesitate to seek assistance from family, friends, faith communities, co-workers, employers, and mental health providers if you are struggling.

Compassion Fatigue is emotional residue or strain of exposure to working with those suffering from the consequences of traumatic events such as the COVID-19 pandemic. Compassion Fatigue can occur due to one stressful experience or can be due to a "cumulative" level of trauma.

Burnout is a state of emotional, mental, and physical exhaustion that occurs when we feel overwhelmed by too many demands, too few resources, and too little recovery time. Burnout occurs over time, rather than in response to one event. Signs of burnout may be physical or emotional exhaustion, fatigue, insomnia, forgetfulness, impaired concentration, increased illness, loss of appetite, anxiety, depression, or anger.

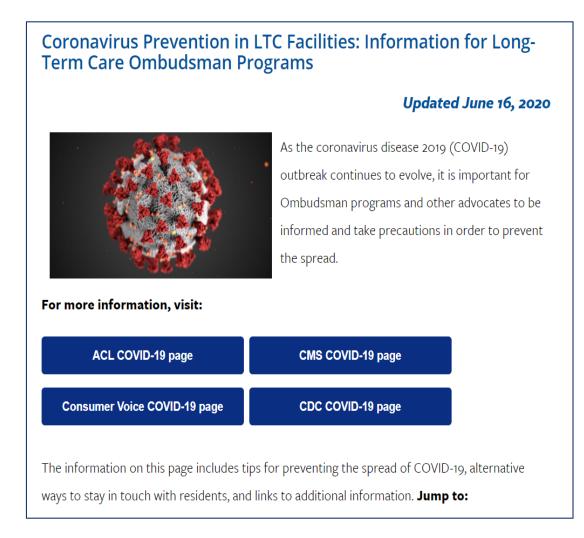
"Individual trauma" results from an event, series of events, or set of circumstances experienced by an individual as physically or emotionally harmful or life-threatening with lasting adverse effects on the individual's function and mental, physical, social, emotional, or spiritual well-being." SAMHSA HRSA Center for Integrated Health Services.

Trauma-informed care is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma (review this <u>fact sheet</u> for additional information). Recognition of the role of trauma in our lives is very important. If you are experiencing trauma due to the COVID-19 pandemic, talk to your supervisor and seek support.

https://ltcombudsman.org/uploads/files/support/taking-care-of-you.pdf

NORC COVID-19 Information

- Administration for Community Living (ACL)
 - https://acl.gov/COVID-19
- Updates and Information
 - CMS
 - ACL
 - NORC
 - Consumer Voice
 - Ombudsman programs



https://ltcombudsman.org/omb_support/COVID-19

Consumer Voice COVID-19 Information

Information for Advocates

- Fact Sheets
- Weekly Webinars
- Map with State COVID-19 Nursing Home policies



https://theconsumervoice.org/issues/other-issuesand-resources/covid-19

Information for Residents and Families

- Tips to Stay Connected
- Get Help/Take Action
- Share Your Story

	ne latest information about the impact	as been challenging and frightening for residents t of COVID-19, changes to facility requirements,
Consumer Voice Resources	Other Resources	Tips to Stay Connected
Getting Help/Taking Action	Share Your Story	COVID-19 Policy & Advocacy Page

https://theconsumervoice.org/issues/other-issues-and-resources/covid-19/residents-families

Grief and Mourning in a Time of COVID-19

Sheri Gibson, Ph.D.

sherigibson2@gmail.com

www.DrSheriGibson.com

A Tsunami of Death



Negative Consequences of a Pandemic

- Chronic social isolation, Ioneliness
- Crippling unemployment
- Financial insecurity
- Increase in domestic violence, child abuse, elder abuse
- Escalating sales of guns and alcohol
- Rising suicide rates
- Exacerbation of mental health problems such as anxiety disorders, phobias, depression, PTSD, attachment disorders

Poll Question #1

- In your work, have you encountered residents, families, and/or LTC staff displaying significant distress over... (check all that apply)
- A. The possible loss of loved ones, though they are currently without symptoms of COVID-19
- B. The possible loss of loved ones who are presenting with mild or moderate symptoms of COVID-19
- The possible loss of loved ones who are presenting with severe or end-stage symptoms of COVID-19
- D. The death of loved ones from COVID-19
- E. The death of loved ones from other causes, with their distress exacerbated by the conditions of the pandemic

For Whom the Bell Tolls



The Context of Dying During COVID-19

- Shocking and unanticipated death
- Isolation of family from the dying and from supports
- High anxiety and helplessness fragmented caregiving and attachment bonds
- Existential crisis Where is God now? Loss of religious community and important rituals
- Profound loss of meaning
- Disproportionate loss within minority communities
- Overwhelmed medical systems void of family supporters as a key role in care

What is "Normal" Grief?

- Emotional
- Behavioral
- Physical
 - Abnormal symptoms such as use of drugs, alcohol, violence, and suicidality warrant reaching out for professional help.
- Duration varies from person to person.
- Research shows that the average recovery time is 18-24 months.
- Grief reactions can be stronger around significant dates, e.g., death anniversaries, birthdays, and holidays

What is "Prolonged Grief"?

- ICD-10 Criteria:
 - Death of a close person
 - Persistent and pervasive grief response accompanied by longing for or preoccupation with deceased
 - Intense emotional pain (sadness, guilt, anger, denial, blame, loss of sense of self, absence of positive mood, numbness, avoidance of social and other activities)
 - Minimum of 6 months after death, exceeding social, cultural and religious norms
 - Significant impairment in personal, familial, social, occupational or other functioning

Negative Impact of Prolonged Grief

- Myocardial infarction and congestive heart failure
- Immune system dysfunction
- Substance use and abuse
- Essential hypertension
- Functional impairment
- Reduced quality of life
- Suicide attempts

Risk Factors for Prolonged Grief Disorder

- Social isolation
- Suddenness of the death
- Insecure, anxious attachment
- Spiritual struggle with the death
- Inability to make sense of the loss
- Lower education, socioeconomic disadvantage
- Lack of institutional and information support

A Public Health Crisis

- We are grieving in isolation
- A spike in COVID-19-related prolonged and complicated grief is a potential public health crisis
- Urgency in the need for timely access to mental health services
- Opportunity to think creatively about bereavement efforts
 - We have learned from previous epidemics e.g., Ebola in Congo
 - Funerals are being live-streamed
 - Physicians and chaplains use speaker and video chat functions to allow families to say goodbye to a critically ill loved one and to deliver last rites
 - A new era of "e-mourning"

The Good Death

- Prior to COVID-19, a "good death" was characterized as:
 - Adequate pain management
 - Being accompanied at the time of death
 - Exercising choice over the location and circumstances
 - Being able to determine who will be present
 - Having time and space to say goodbye
 - Feelings of not being a burden to others
 - Leaving behind a meaningful legacy
- The notion of a "good death" in the context of COVID-19 has seemed nearly impossible

...Redefined

- We must change the way we think about a "good death" in a time of crisis
- Many people have died a "bad death" during these times, and yet, psychologically, we must accept that fact
- Understanding the "bad death" provides opportunity for us to redefine the "good death" – recognition of the importance of endof-life care and bereavement support.
- Finding unconventional ways of mourning may result in expansions to palliative care, chaplain, and social work services

Leaning In

- What are you feeling now?
- What comes up for you in this moment as you imagine re-entry into LTC communities?
- How will you cope with your grief response and sitting in mourning with others?

Giving Yourself Time to Grieve

- Find supportive people to reach out to during your grief.
- Take care of your health.
- Postpone major life changes.
- Consider keeping a journal.
- Participate in activities.
- Find a way to memorialize ones who have died.
- Consider joining a grief-support group or contacting a grief counselor for additional support and help. Utilize your EAP benefits.

"Old Shoes"
Poem by
Robert A.
Neimeyer.



Loss is Multifaceted

- And so is grief.
- There is no "one size fits all" my process will be different from your process, and so on.
- Give yourself and others permission to bereave the loss, and hold no expectations for the duration of how it should look and feel.

Resources and Bibliography

- The Portland Institute for Loss and Transition
 - www.portlandinstitute.org
- Moore, B. (2020). Dying during Covid-19. *The Hastings Center Report*, pp. 13-15.
- Neimeyer, R. A. (Ed.) (2012). Techniques of grief therapy: Creative practices for counseling the bereaved. New York: Routledge.
- Silver, R. C. (2020). Surviving the trauma of COVID-19. *Science*, 369 (6499), pp 11, doi: 10.1126/science.abd5396.
- Thompson, B. E. & Neimeyer, R. A. (Eds.) (2014). Grief and the expressive arts: Practices for creating meaning. New York: Routledge.
- Verdery, A. M. & Smith-Greenway, E. (2020). COVID-19 and family bereavement in the United States. *Applied Demography Newsletter*, 32, 1-2.

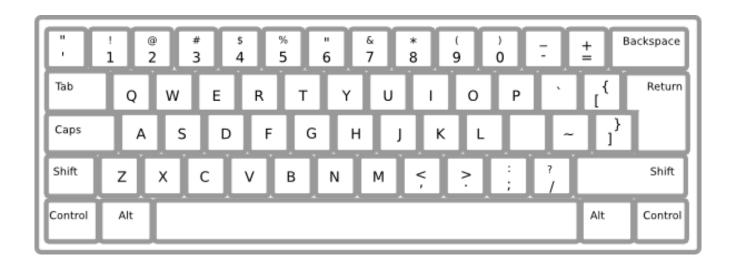
Thank YOU!



QUESTIONS

Please type your questions into the Question and Answer box by clicking on the Q&A icon at the bottom of your screen.





Coming Soon...

- Recovery and Reentry Resources
- Crisis Communication (webinar for all Ombudsman programs)
- 4-part training series (30-minute recordings) for three different audiences (family members, direct care staff, long-term care facility administrators)
 - Person-centered care/Person-centered Thinking
 - Trauma-informed care
 - Compassion fatigue
 - Grief/Anxiety



Do You Receive Our Emails?

Join our database to receive webinar notifications, the *Ombudsman Outlook* (quarterly e-newsletter), the *NORC Notes* (monthly resource reminder), and more.



To receive our emails directly, use this link to sign up now: https://ltcombudsman.org/sign-up



Connect with us:

www.ltcombudsman.org

ombudcenter@theconsumervoice.org







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