

bereavement in group homes

palliative care and disability

southern metropolitan region palliative care consortium

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fact sheet series

Information for disability services staff working in group homes

what is bereavement?

Bereavement is a complex response to loss of a loved one. It can include physical, emotional, cognitive, psychological, social and spiritual reactions. Most people go through bereavement in their own time if they understand what is happening and they have social support. However some people may experience complicated bereavement, which might need a referral to psychological help.

For more information on grief and bereavement, please [CLICK HERE!](#)

planning for bereavement in a group home?

When a resident is diagnosed with a terminal illness, many people may be affected. Preparing all involved by providing information and opportunities to talk can help. For many people it is not easy to talk about death but there are many resources available that can help you learn.

General principles are:

- be clear about the roles and expectations of those involved in the communication
- prepare and plan
- open communication and transparency is usually the best way

Below is a list of the different people affected and some considerations and resources.

People	Considerations	Resources
The resident	Think about how best to prepare the resident. Being honest and answering questions will be best in most cases. People often know if something is wrong and open communication can help. The resident might even want to talk about their funeral or what they want to happen to their possessions.	Breaking Bad News Resources for residents
The family	Be aware that there could be confusion around different roles and expectations. Communication is important to clarify this. Provide information and support around bereavement issues by talking to the family and offering written material.	PCV: "Living, Dying and Grieving Well"
Other residents and friends	Recognise special relationships and ensure people have opportunities to be together. Have a plan for the residents when the death occurs. Design and permit rituals and communication that allow participation. Monitor the residents to identify risks.	
Staff	Support and information for staff who may also be bereaved.	



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