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Introduction

- Every year, approximately 500,000 olde adults pass away while residing in nurs homes in the United States.
- These statistics have been compounde during the COVID-19 pandemic.
- As a result, growing numbers of older adults make end-of-life decisions and receive end of life services in nursing homes.
- However, there is a lack of research on experiences of the nursing home staff provide this care and no known studies have sought the experience of grief support from the perspective of administrators in training within nursin homes.

Hypothesis

- This study examines organizational practices in nursing homes specific to of-life care.
- We predict that in nursing homes, ther minimal grief support.

Methodology

- Administrative residency students (37) were interviewed three months into th residency experience about grief suppo at their facilities.
- Two faculty members and two research students reviewed the data for novel ic that might be of interest for practitione providing suggestions for grief support nursing homes.

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Grief Support in Nursing Homes

	Qu	alitative Perce
er sing	Question: Who is involved in the end- of-life processes/death at	Everyone deals with deat End-of-life care includes e All worker categories liste
ed	your facility?	Some departments noted often, due to their roles i due to their direct care ro Nursing department/ phy Aides Social Services
n the who		Support to residents and religious leaders can talk with death
S	Question: What grief	Memorial services
	support is available at your facility?	Meetings Informal staff support (nu
ng		Chaplain/hospice availab
		Cards to the family
		Counseling services
		Bereavement days for sta Often short-term (e.g., 2
end-		Training: Overall training limitation as poor)
re is		Orientation training, 20 n
		_
		Sample Quote
	Who is involved in the end-of-life process/death?	"Everyone who is involved a resident's death."
neir		"Death tends to be a who majority of our facilities."
ort	Grief Support and related training	"DON would comfort staff
h deas		"It is a lot different when dealing with death vs. bei
ers, t in		"Unfortunately, I am una does when it comes to g fellow residents."

otions

every department ted: e.g., administrators

- d deal with death more in providing direct care or
- oles:
- ysicians

staff: Chaplain or other to others and help deal

- urse hugs)
- ole for staff if desired

aff

- days)
- ons (e.g., not available/rated
- min

es

- d with a resident 'deal' with
- ole-facility dealing at the
- f by talking or giving a hug."
- you're in the moment ing trained on death."
- aware of anything my site grieving and the loss of

- process.
- mental health and training.
- staff).

- These findings can help inform
- quality of care and quality of life.

implemented widely.



Results

• There are a wide variety of nursing home workers who are involved in the end-of-life

Administrative residency students shared the types of grief support available in their care facilities as well as relevant training available to nursing home workers to allow them to cope with their grief appropriately. Results suggest there is limited support when it comes to services related to Current grief support for nursing home staff is mostly informal (staff supporting

Discussion

improvements to the overall grief support available for not only nursing home workers, but healthcare workers in general. Mortality in nursing homes, staff attitudes, and environmental factors associated with mortality are important for health authorities and decision makers to consider as they revise policies to enhance

Conclusion

Findings of this research highlighted exemplary and unique practices that researchers believe could be adopted and