Enhancement of Bereavement Care in the End-Of-Life (EOL) Programme
Lee Ader(1), Ho SF(1), Chu KF(1), Tong KO(1), Chan WS(1), Fung SC(1), Choi PY(1), Wai NT(1), Chan CF(1), Chu KW(1), Lee LY(1), Ng KL(1), Chan CY(1), Chan CH(1), Wong MC(1), Lo SH(1), Sze WK(1)
(1)Department of Clinical Oncology, Tuen Mun Hospital, New Territories West Cluster, Hospital Authority, Hong Kong SAR

Keywords:
Bereavement Care
End-Of-Life Care
Cancer Palliative Care

Introduction
Letting go of people is not easy. The death of loved one brings different forms of grief like chronic grief, masked grief and delayed grief. Grieving generally proceeds through a series of phases: denial, anger, bargaining, despair and acceptance. In Tuen Mun Hospital, the End-Of-Life (EOL) team provides enhanced bereavement care for those who had experienced a loss. 608 families were helped to get over those phases and grief in 2015 and 2016.

Objectives
Provide quality bereavement care to patients and their relatives in a timely manner by trained staff
Alleviate negative affectivity and prevent crisis

Methodology
1. Intensive one-to-one support
A qualified and trained nurse from the EOL team acted as a dedicated coordinator and case manager from initial assessment till post-bereavement care. Family members were provided with compassionate support and given information before, during and after the patient’s death.

2. Case Conference
Patients or relatives with complicated grief were discussed in the case conference by a multi-disciplinary team. Proper interventions for them were proposed and implemented.

3. First post-bereavement - Return relatives
The EOL coordinators invited the relatives to come back within 3 days after the patient had passed away. The coordinator acted as a ‘gateway’ to further bereavement services. The bereaved were referred to the Medical Social Work Department, Child & Family Bereavement Center or external organizations and home care visits if
necessary.
4. Second post-bereavement - Interview
The EOL coordinators contacted the relatives within 3 months by a phone for follow-up actions. An approach called "MEAN" was adopted, in which the bereaved were encouraged to "Maintain connections with significant others", "Enjoy leisure & engage in adapting new life", "Accept loss" and "Neutralize depression, sadness and grief".
5. Post-bereavement support group
In the interview, the bereaved were invited to join the post-bereavement support groups. It was an integrated peer support group organized and supported by health care professionals, enabling the bereaved to talk with those who had also experienced a loss.
6. EOL Preceptorship programme
The "EOL Preceptorship programme" was developed to equip more qualified nurses with knowledge and to enhance their confidence to act as EOL coordinators.

Result
From 2015 to 2016, the EOL team served 1517 cases. 164 appreciations were received. The patients and relatives felt supported. The bereaved overcame their grief and went back to their life on track after receiving bereavement care.