

Patient loss How do acute nurses deal with grief?

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Introduction

Death and grief are well-known threats on the work, health and performance of a nurse. Nurses are at risk as patient loss is frequent among many nurse specialities, including acute care (Shorter & Stayt, 2010). Nurses play an invaluable role when patients are admitted into acute care. Taking a hands-on approach when working with the patients, striving to build a therapeutic relationship and provide holistic care. Their primary goal is to ensure the survival and recovery of patients (Shorter & Stayt, 2010). When caring for a patient in an acute setting, nurses often come to form a bond with the patient and their families. Subsequently, the loss of patient's is more upsetting and difficult to deal with (Shorter & Stayt, 2010). Patient death combined with work stress and lack of psychological support can lead to burnout (Saunders & Valente, 1994). This lead to the question, what are the effects of Patient Death on Nurses in Acute Care Settings?

Literature review

A review of literature on this topic showed 3 main themes.

- & Chui, 2013; Shorter & Stayt, 2010).
- 2013; Shorter & Stayt, 2010; Sherman, 2004).
- a charge nurse (Shorter & Stayt, 2010; Loftus, 1998)

Effects of patient death

The death of a patient has a great impact on stress levels and • Nurses felt they were unprepared for the death of their burn out rates; these can however also vary between the patient, either because the death was sudden and different nursing specialties. The effects of patient death can unanticipated or seeing the reaction of the family and friends affect nurses both physically (e.g. changes in appetite, of the patient (Kent, Anderson, & Owens, 2012; Mak, Chiang headaches, fatigue and exhaustion, sleeping disturbances) and psychological (e.g. memory disturbances, anger, low self-• Nurses had developed their own coping mechanisms, with esteem, increased isolation and impaired judgment and both positive and negative outcomes (Mak, Chiang & Chui, reasoning) consequences (Sherman, 2004). To help prevent these common themes that were found throughout literature, • A lot of nurses would seek formal and informal support, in possible actions can be put in place. Most nurses receive little, the form of family or friends or help provided by the ward like if any, education on how to deal with the grief of patient loss. Each person reacts differently and this constitutional hazard can envoke ongoing stress (Saunders & Valente, 1994).

Recommendations

- Have small courses available to prepare nurses about what they may experience when losing a patient, especially in specialities where there is high stress and patient death is more regular. This can be a place where strategies can be put in place that help nurses protect themselves without hardening themselves with patients (Kent, Anderson, & Owens, 2012).
- It could be beneficial to advertise and encourage nurses to participate in self-cares on high stress wards. Such coping mechanisms as yoga or meditation, healthy eating, regular exercise and time to themselves can help relieve the stress that nurses come to feel over time in a high stress environment (Mak, Chiang & Chui, 2013; Shorter & Stayt, 2010).
- It is recommended to participate in some form of support group, whether it's in the form of formal support set up by the charge nurse on the ward or informal support such as a friend or family member. Discussing what lead to the death can give the nurse a type of closure can be beneficial for the nurses wellbeing (Shorter & Stayt, 2010).

Conclusion

Nurses experience many stressors in their profession; one of them includes caring for patients that die on their watch. When a nurse cares for a person, their aim is to help them survive and be pain free; but when that patient dies, it affects them. Patient death affects each nurse differently; to overcome this and keep working, nurses create their own coping mechanisms. Nurses must each discover the best way that they cope with patient loss, whether it through coping mechanisms that promotes selfcare or different styles of support. Every nurse will undoubtedly experience death.

References:

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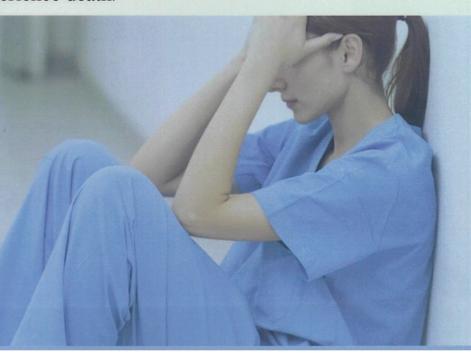
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Saunders, J. M., & Valente, S. M. (1994). Nurses' grief. Cancer Nursing, 17(4), 318-

Sherman, D. W. (2004). Nurses' stress & burnout. How to care for yourself when caring for patients and their families experiencing life-threatening illness. American Journal of Nursing, 104(5), 48-56.

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Rationale

My topic was the effects of patient death on acute nurses and my recommendations were to help minimise the negative effects that patient death has. I have chosen to present my literature review as a poster because I believe it is the best way to raise awareness.

The death of a patient is something that every nurse will most likely experience and they often form a bond with these patients and their families. Subsequently, the loss of patient's is more upsetting and difficult to deal with (Shorter & Stayt, 2010). While some of the recommendations I made were actions the wards could put in place, such as formal supports (Shorter & Stayt, 2010), other were ways that nurses could adjust their lives to reduce the impact death could have on them or different ways that they could deal with the death, such as participating in self cares or reaching out to a friend or family member for support (Mak, Chiang & Chui, 2013; Shorter & Stayt, 2010).

I think a poster would be an effective way to inform a larger population so nurses are more aware of what they can do to prepare themselves and deal with the death. Without these tools available, nurses can burnout from the stress and burden that patient death puts on them, decreasing their personal well-being, and subsequently decrease the level of care they are able to provide to other patients.

	PECOT	Information relating to the	
	category	question	Explanation
	Population	· · · · · · · · · · · · · · · · · · ·	
	Fopulation	Acute care nurses	This is the area I will be working in and I am hoping, as patient loss is inevitable in a nursing career, that it will be relatable and helpful.
	Exposure	Caring for a patient that	If the death of a nations is
	(intervention)	dies in an acute setting	If the death of a patient is expected like it would be in palliative care, the nurse is able to prepare for it. When the death of a patient is unexpected the nurse is unprepared to cope with it. An acute setting is where I have interests in working.
	Comparison/ control	How the nurse reacts and is effected by this loss and how the nurse copes and deals with the loss	I am interested it what can or is put in place to help cope with the loss of a patient as is has the potential to affect them emotionally, physically and intellectually.
		Nurses develop coping strategies that allow them to continue caring for patients	After loosing a patient, it would be ideal to see the nurse able to go back to care for other patients with minimal issues. What recommendations can be made to facilitate this?
-	Гime	N/A	The death of a patient could happen at any time and recovering from it can vary between nurses and the circumstances around what caused the death