

## **Bereavement in Direct Care Workers: Quality of Care and Workforce Issues**

### **Overview**

The purpose of this research is to better understand how direct care workers (i.e., certified nursing assistants in the nursing home, and home health aides in the community) respond to the death of a patient, and what kind of support they may need. This knowledge has important implications for delivery and quality of care provided in elder care, as well as for employment satisfaction and stability among direct care workers in nursing home and home care settings. Issues of dying, grief, and loss are pertinent in these types of health care settings. However, organizations that provide health care to elders typically provide little support, structure, or ritual to help staff through this time. This lack of attention regarding an issue that is a normative aspect of work life for direct care workers who provide care to the elderly may contribute to the extremely high turnover rate in this population that is consistently reported. Evidence from a few exploratory studies suggests that nursing staff experience some degree of grief in response to patient loss (e.g., Wilson & Daley, 1998). Yet, none of these studies provide a systematic assessment of grief and grief processing, and they fail to link assessments to particular deaths. Second, most do not focus on front-line staff who have the closest contact with the patients, and therefore have a tremendous impact on their life quality (Yeatts & Cready, 2007). Finally, few studies link grief-related staff responses with important employment-related outcomes (e.g., staff turnover), as well as examine the individual and institutional factors that predict these outcomes.

The present study aims to provide the empirical knowledge base to adequately identify front-line staff who are in need of support after the death of a patient, and to design support interventions based on empirically identified modifiable factors (e.g., development of rituals; support groups) that can successfully address this need.

The specific aims for the study are:

1. To examine grief symptoms and grief processing in direct care workers after the death of a patient in their care, and the extent to which these experiences parallel the experience of bereaved family members documented in prior research
2. To investigate the relationship between grief-related and employment-related outcomes (e.g., job retention, absenteeism, impact of loss on work)
3. To determine how staff-, patient-, and institutional factors are linked to grief- and employment-related outcomes, and to identify which of these are the strongest predictors of these outcomes.

### **Methods**

The study sample will consist of 120 certified nursing assistants (CNAs) from the Manhattan and Bronx long-term care facilities of Jewish Home Lifecare, as well as 30 JHL home health aides (HHAs), who had a patient loss about two

months before. Data collection will involve in-person interviews that take about two hours, and will include the use of standardized grief measures commonly employed in research on family bereavement, as well as collecting of qualitative data around their responses to loss, to capture any unique experiences that would not be documented with standardized measures. We will also investigate potential employment-specific consequences of patient death (e.g., job satisfaction and retention), as well as staff-related factors (e.g., cultural views on death/dying), patient/relational factors (e.g., suffering of patient, relationship with patient), and institutional factors (e.g., site-/unit-specific rituals) that may influence a direct care worker's response to patient loss.

**Status**

Start up in progress.

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