



COVID-19 PSYCHOLOGICAL WELLNESS GUIDE:
HEALTHCARE WORKER (HCW) GUIDANCE ON CALLING FAMILY
Version 1, 2/02/2021

Healthcare workers (HCWs) are very much aware that the COVID 19 pandemic has made the experience of being in the hospital exceptionally difficult for patients. In the pandemic, limiting people in the emergency rooms, clinics and hospitals has been a challenging and painful public health necessity so to limit the spread of the virus, thus protecting patients and HCWs. The psychological stress of being alone in the hospital is tremendous for many patients, and the worry of family and friends is greatly magnified by not being at the patient's bedside during an illness. Family must anxiously await news about a sick family member from home. For busy HCWs, there often does not seem to be nearly enough time to stay in contact with family, which is difficult for HCWs and families alike given the psychological boost people feel when they work together to help someone is missing without the regular connection between HCWs and family. When a patient's disease is impossible for the healthcare team to manage and a patient dies, the missing connection between HCWs and family is even more profoundly missed and the conversation communicating the death of a patient is exceptionally difficult.

For HCWs who are needing to make calls to family members when a patient has died during the pandemic, please consider these tips, not only to ease the grief reaction of the family, but also maintain your sense of purpose and groundedness, and to preserve your own wellbeing during these difficult times.

Collect the facts before you call

- Know as much as you can about the patient before calling family (diagnosis, age, time in the hospital, events leading to death, what was done to save the patient)
- Share details about the final moments before death that may be comforting to the family (someone held her hand, who prayed with him, the passing was quiet and peaceful)
- Be sure you call the Health Care Power of Attorney (HCPOA), the adult next of kin
- Know where the patient's body is located and who the family needs to call next (funeral home, morgue)

Reserve time for the call

- Set aside at least 10 minutes, sit down, have the patient's details written down
- Before you dial, count to 5 with an in breath, and count to 5 with an out breath
- Try to call from a quiet place and have a pen and piece of paper



- Identify yourself and your position in the healthcare system
- Ask family, “are you in a quiet place we can talk about” state the patient’s full name?
- Speak in non-medical (lay person) terms
- Let the family speak, listen
- Sincerely offer your condolences: “I am sorry for your loss”
- Have a wrap up statement and phone numbers ready to share - “I apologize, but I do need to go now. If you have questions please call (referring physician, hospital family services, morgue).”

Give yourself a minute

- Repeat the breathing activity you did before the call
- Notice any tension in your neck, shoulders, hands and try to stretch a bit
- Remind yourself that the healthcare team is doing everything they can to help sick patients
- Remember that you are part of a team and the patient’s death is not your fault alone or likely anyone’s fault
- Try to do something you usually enjoy immediately after difficult calls as going for a short walk, calling a friend to say hi, listening to music, stretching, or connecting with a colleague

Share your experience

- Remember that HCWs experience death differently, and reactions to a patient’s death will vary
- Talk with a colleague who also cared for the patient about what was working, and what was disease process was beyond the ability of medical care to reverse
- Consider what was unique and special about the patient and family, reflect on their humanity
- Take a moment of silence as a team
- Say a prayer for the patient and family (if consistent with your belief system)
- Consider mailing a sympathy card as an individual or team
- Engage in your own spiritual health traditions (if consistent with your belief system)



Get help if you don't feel like yourself

- Remember, taking care of patients, staying in contact with family, and calling family after a patient has died, is difficult and being affected by death is normal
- Talk to someone you can trust (mentor, colleague, family member) about your feelings and experiences if you
 - Are obsessing about a patient or family experience or memories of the case are distracting you
 - Are not sleeping or eating well because you are feeling so distressed about death
 - Are not enjoying activities that used to be uplifting
- Seek out professional health through your individual institutions, employee assistance programs, state and national hotlines, and private practitioners in the community

Helpful Resources

- Institutional Employee Assistance Programs
- Georgia COVID resources
- <https://www1.georgia.gov/covid-19-coronavirus-georgia/covid-19-hotlines-and-help-lines>
- Physician Support
- <https://www.physiciansupportline.com/>
- National Suicide Prevention
- <https://suicidepreventionlifeline.org/>