

Webinar Q&A

Role of Grief and Bereavement in the Care of Health Care Providers and their Families during COVID-19 – Wednesday April 22, 2020 @ 1 pm ET

Question	CPC Exchange
<p>Anonymous 01:52 PM</p> <p>How can we work with organizations to advocate for supports for the frontline and secondline staffing? I suspect/fear that we will have a mass exodus of healthcare providers after this as many feel fearful, distraught, grief and silenced, how do we get organizations to utilize their already built in supports such as counsellors and psychospiritual bereavement clinicians?</p>	<p>There were several questions submitted during the webinar that the panellists were unable to answer due to the time restrictions of the webinar.</p> <p>Please continue the discussion by joining the Canadian Palliative Care Exchange and posting your question as a discussion topic.</p>
<p>Lisa 01:54 PM</p> <p>For the workers who are going into LTC (we have a centre here in Halifax) that will be working in 12-hour shifts, then shipped off to a hotel for 12 hours-how do you suggest we get that relief of being so immersed in this pandemic. The thought is that these workers will do this for a continuous 6-week time frame. Your advice is greatly appreciated.</p>	<p>There is no cost to participate.</p> <p>Join now to share and learn alongside your colleagues from across Canada: www.cpcexchange.ca</p>
<p>Maria 01:58 PM</p> <p>Dr. Elliott I teach a course to nursing students called the human meaning of death. I think your work in this area would be so helpful to them. Do you have training programs so that your work can be brought to our local healthcare professionals? Or can we invite you down to community to do the training?</p>	
<p>Lana 01:58 PM</p> <p>As a frontline worker in Palliative care, I feel my tools of facial expression and comforting physical touch, are no longer accessible. Could Mary make some</p>	

<p>suggestions of ways to communicate compassion while wearing a mask and being restricted with touch?</p>		
<p>Anonymous 01:57 PM</p> <p>How should HCPs grieve when we do not realistically have time to do so at work? After a patient dies, we have to perform postmortem care, complete paperwork and documentation, etc.</p> <p>How do we honor the deaths of our patients?</p>		
<p>Valorie 01:58 PM</p> <p>What strategies have you put into place for the mental health patient in crisis who needs to be on isolation within our inpatient observation units and have difficulty understanding the process for this?</p>		
Question	Answer	CPC Exchange
<p>Anonymous 01:37 PM</p> <p>I work in LTC and we have had directives in place. Some of our residents' directives are to send to hospital and some still have directives for CPR. When should we be having discussions with families about these directives? Right now, we have no positive cases in our facility.</p>	<p>Hi. Next week Pallium is hosting some webinars specifically targeting the LTC sector and we will be addressing this question then. This webinar is focusing on the impact on health care professionals.</p> <p>A quick follow up though: It would be important to start that work quickly and rapidly. There are some useful resources for this ... see Fraser Health COVID palliative care resources and VitalTalk.</p>	<p>If you'd like to continue this conversation head to the Canadian Palliative Care Exchange and create a discussion topic or contribute to a conversation already taking place.</p> <p>There is no cost to participate.</p> <p>Join now to share and learn alongside your colleagues from across Canada: www.cpcexchange.ca</p>