The Bereavement Collaboration ECHO Network

Session 5: Complexity: Access Challenges for Service Users who have Complex Needs including PTSD

26 April 2022

www.hospiceuk.org
Network Recording Declaration

During this ECHO session discussions will be recorded so that people who cannot attend will be able to benefit at another time. Filming is regarded as ‘personal data’ under the Data Protection Act 2018 General Data Protection Regulations (GDPR), under that law we need you to be aware that:

• This Data will be stored with password protection on the internet.
• This Data will be available for as long as your network continues to meet and will then be taken down from the internet and either stored securely at the Superhub or deleted.

Your ongoing participation in this ECHO session is assumed to imply your agreement to the use of your data in this way.

If you are NOT willing for your data to be used in this way, please LEAVE the session at this point.
# Agenda

<table>
<thead>
<tr>
<th>Time</th>
<th>Item</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00</td>
<td>Welcome and Safe Space Agreement</td>
<td>Gail Precious, Senior Development Officer, National Bereavement Alliance</td>
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<tr>
<td>11:15</td>
<td>When Bereavement Reactions Get Complex</td>
<td>Dr Grace Wong, Consultant Clinical Psychologist / Head of Service, Talking Therapies Southwark</td>
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<tr>
<td>11:45</td>
<td>Questions and Group Discussion</td>
<td>All</td>
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<tr>
<td>12:00</td>
<td>Continued Group Discussion/Break-out Room Discussion</td>
<td>All</td>
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<tr>
<td>12:20</td>
<td>Vote for Next Session</td>
<td>All</td>
</tr>
<tr>
<td>12:25 – 12:30</td>
<td>Summary and Close</td>
<td>Gail Precious, Senior Development Officer, National Bereavement Alliance</td>
</tr>
</tbody>
</table>
Safe Space Agreement Example

- It's important that we feel safe when participating in this ECHO. To achieve this we will all:

  - Respect our fellow participants and their views
  - Be honest
  - Keep discussion confidential – but we can share learning
  - Be kind to one another
  - Recognise all questions are welcome
  - Be curious
  - Actively participate
  - Be present
  - Be non-judgemental
  - Respect and understand that our clinical environments whilst being similar are very different
  - Celebrate our achievements
When Bereavement Reactions Get Complex

Dr Grace Wong (grace.wong@slam.nhs.uk)
Consultant Clinical Psychologist / Head of Service
Talking Therapies Southwark
When Bereavement Reactions Get Complex

A presentation for Bereavement Collaboration ECHO Network

Dr Grace Wong (grace.wong@slam.nhs.uk)
Consultant Clinical Psychologist / Head of Service
Talking Therapies Southwark

26th April 2022
What you have asked me to cover ....

• What an effective assessment looks like
• Under what situations might a client need more than bereavement counselling
• Some understanding of what Post Traumatic Stress Disorder (PTSD) is
• Dealing with urgent referrals
• Trouble shooting the gaps in the referral process
Multi-dimensional Impact of loss

- **Emotional and cognitive reactions**
  - sadness, anger, guilt, anxiety, numbness
  - intrusive images, mental disorganisation, preoccupation

- **Behavioural reactions as means of coping with emotional pain**
  - attend – faith, rationalisation, intellectualisation, expression of feelings
  - shut off – distraction, numbness, avoidance

- **Reactions serving to continue the relationship with dead person**
  - e.g. retaining belongings, identification with deceased,
  - seeing offspring as legacies, rituals, memories, dreams

- **Changes in functioning**
  - health (physical symptoms, service use, increased mortality)
  - Roles & employment

- **Changes in relationships**
  - e.g. family, friends, partners

- **Changes in self identity**
  - e.g. self image, self esteem
Normal reaction or psychological disorder?

- Common life events that we all face
- Clinical challenge: Is this presentation a normal emotional reaction or psychological disorder?
- Intervene - risk pathologizing a normal emotional reaction
- Disregard - risk missing an opportunity for effective intervention
Grieving patterns over time

This slide is taken from the IAPT Webinar on Traumatic Bereavement delivered by Prof A Ehlers in 5/2020

What factors influence the probability that grief will become prolonged or unresolved?

- **Nature of relationship**
  - type
  - quality

- **Type of loss**
  - expectedness
  - cause – traumatic, uncertain

- **Characteristics of the bereaved**
  - self-esteem & competence
  - previous experience of loss

- **Context**
  - supportive relationships
  - impact on life (socially, financially, daily function)
  - (sub) cultural expectations – what is seen as an appropriate reaction
  - circumstances (e.g. violation of cultural rules about funerals, death after an argument, no good-bye, imagined trauma)
Psychological Disorders after Bereavement

- Adjustment Disorder, Post Traumatic Stress Disorder (PTSD), Prolonged Grief Disorder (PGD), Depression (and combinations)

- Adjustment Disorder: Maladaptive reactions to an identifiable psychosocial stressor or multiple stressors and the condition must end 6 months after the trigger event

- PTSD: characterized by the presence of flashbacks, nightmares, hypervigilance, exaggerated startle response, avoidance

- PGD: main presenting difficulty is yearning and preoccupation with the deceased

- Depression: Concurrent presence of at least 5 of the following symptoms – depressive mood, reduced daily pleasure, feeling guilty, poor appetite / sleep / energy, lack of concentration, restlessness, feeling suicidal – most of the days for at least 2 weeks
Prolonged Grief Disorder (PGD) – ICD-11

• **At least one of the following:**
  - Persistent and pervasive longing for the deceased or
  - A persistent and pervasive preoccupation with the deceased

• **Examples of intense emotional pain:**
  - Accompanied by intense emotional pain e.g. sadness, guilt, anger, denial, blame.
  - Difficulty accepting the death
  - Feeling one has lost a part of one’s self
  - An inability to experience positive mood
  - Emotional numbness
  - Difficulty in engaging with social or other activities

• **Time and impairment criterion:**
  - Persistent for an abnormally long period of time (more than 6 months as a minimum) following the loss, clearly exceeding expected social, cultural, or religious norms for the individual’s culture and context. Grief reactions that have persisted for longer periods that are within a normative period of grieving given the person’s cultural and religious context are viewed as normal bereavement responses and are not assigned a diagnosis.
  - The disturbance causes significant impairment in personal, family, social, educational, occupational, or other important areas of functioning.
Dealing with urgent referral / a situation when bereavement reactions get complex

• How is ‘urgent’ usually understood by a mental health team in NHS: a client is at serious risk (the presence of suicidal intent and plan) of self-harm or harming someone else

• Pathway for urgent referrals
  • Call 999
  • Present at A&E
  • Contact SLaM crisis line on 0800 731 2864

• Pathway for client when their mental health needs have exceeded bereavement counselling
  • GP can refer to borough based Assessment and Liaison Team (new name is Primary Care Mental Health Team), SLaM
  • Self-referral or health professional referral to an IAPT service https://slam-iapt.nhs.uk
Group Discussion
Break-out Room Discussion

Topics:
- Self-care
- Assessment
May Session

Topic
Options:
- Assessment/triage and urgent referrals
- Scope of bereavement services
Next Session:

Date: 31 May 2022

Topic: TBC
Call for papers now open!

Contribute to our conference by displaying a poster or giving an oral presentation.

Closing date: 23:59 on 16 May

No extensions to the closing date.
Mentorship scheme & getting in touch

New mentorship scheme introduced this year to support people who are new to the business of writing abstracts.

Mentorship applications deadline is 9 May.

If you have any questions about the call for papers or mentorship scheme, contact Stuart Duncan at: s.duncan@hospiceuk.org
Find out more

To submit an abstract, find out more about the process, access FAQs and learn about the mentorship scheme, visit:

https://www.hospiceuk.org/professionals/courses-conferences/national-conference/call-for-papers
Before you go…

Let us know your feedback via this survey:

https://www.surveymonkey.co.uk/r/BCollabApril22