

# How are you coping?

Thinking about loss and grief



A guide for our colleagues in our care homes  
and retirement living schemes

This resource was written by David Moore (MHA Dementia Lead) and Danuta Lipinska in collaboration with MHA colleagues.

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MHA would like to thank Danuta Lipinska. Danuta is a trainer and facilitator, psychotherapist and supervisor in private practice, specialising in dementia care. Danuta has pioneered counselling services for people living with dementia.

All photos were taken before the Covid-19 pandemic.



## Part of the job?

Supporting and caring for our residents, many of whom have life limiting conditions, mental health concerns, physical disabilities or a dementia, you will not be a stranger to the ongoing nature of dying and death, loss, grief and mourning. Care staff often say, “Well, it’s just part of the job. We do the best we can.”

But this past year it has not been, ‘just part of the job’.

## So why is it different this time?

**“The Covid-19 pandemic has affected the whole world. We are living in totally unprecedented times and it’s something we couldn’t prepare for.”**

MHA colleague

**“We are all very experienced in death and this is part and parcel of what we do. You grieve for your residents one by one, but when you times that by ten and think about the numbers of residents we have had to grieve for...”**

MHA colleague

**“The shock of losing so many people at the same time – looking round at all the empty chairs and realising that that person wouldn’t be there again. We’re used to people dying and we miss them when it happens but it’s usually just one at a time. The lounge felt like a war zone and it must have been like the end of the war – when you realised that lots of people weren’t ever going to come back.”**

MHA colleague

We are now in 2021 during another lockdown. You have been through this once, but for some this wave of the pandemic seems fiercer. However, we do have hope now that vaccines have started to be rolled out.

You are also much more experienced than first time around but at the same time you may be feeling more exhausted and distressed, carrying more losses and grief with you.

The nature of this pandemic brings us into the realm of Traumatic Loss.

This means that there is a deeply disturbing threat of actual or possible harm directly towards you, your loved ones, those you care for at work and the citizens of the world at large.

**“It caused tension at home because my husband didn’t really understand why I wanted to come into work and the children were frightened because they thought I was going to die. I was split between not wanting to frighten them and wanting to look after our residents when they needed us.”**

MHA colleague

**“At the start my partner asked why would you put the family at such a level of risk, why don’t you just walk away? But I told him I couldn’t turn my back on the team or residents and everyone was relying on me. The pressure of feeling that was overwhelming even for a manager like me who has been a manager for a long time.”**

MHA colleague

Feeling frightened and anxious are natural human responses to trauma and the threat of trauma. Fear of breaking down and losing control are also common.

Caring for residents with the illness, wondering when the next person will become unwell and supporting their death and dying can bring feelings of inadequacy, guilt, hopelessness and helplessness, great sadness and anger.

We feel the loss of how things used to be in our care homes and retirement living schemes and may feel powerless to change it.

- Our residents have become or are becoming unwell. Some are going to hospital and not coming back, and some are dying in the care home or scheme. You wonder if their death could have been prevented. You may not have had the chance to say goodbye to a person you have come to care deeply about over many years.
- Relatives, partners, children, grandchildren are not always able to be with them as their illness progresses and their dying and death takes place.
- You are responding to multiple losses - many losses at once. At work, at home, in your families, in the community, the country, the world. You have had to take on the management of the multiple changes within the care home or scheme that would not normally be occurring.
- Our basic needs for security and safety have been threatened. For some people, food and shelter, jobs and finances are affected. For many, their sense of wellbeing and being able to cope has been challenged and they are not themselves. We were unable to prepare for this and this can leave us feeling conflicted, de-skilled and vulnerable.

**“We felt pulled in different directions – doing as we were told to do for infection control but that contradicted what our caring instincts were telling us to do.”**

MHA colleague





**“I was also really scared for my staff because some of them were really poorly. I would spend my nights and weekends contacting them to see how they were.”**

MHA colleague

**Loss (or bereavement)** is what happens as a result of the changes in our lives or the actual death of a person. Loss is the event that happens when we are rowing along the River of Life in our canoe and suddenly, we are thrown over the edge of a waterfall into a swirling whirlpool below. At the bottom of the fall, over by the rocks there is a calm deep pool. We could end up in either or both of these places.

The Losses associated with the Covid-19 pandemic arouse our basic instincts to threat – our needs for self-protection and survival kick in and we respond in very basic human and instinctive ways (our ‘gut response’)

- Fight,
- Flight,
- Freeze or
- Follow

**Grief** is what we feel and this can be a ‘whirlpool’ of many emotions all churned up and colliding over one another, or a quiet still pool where feeling numb and non-reactive is just another way of being with the loss. It is a process of stages that can come and go, co-exist and last for as long as we need them to. There are many ways people have written about grief. Possibly the most recognisable is the Five Stages of Grief described by Dr. Elisabeth Kubler-Ross in 1969. They are:

- Denial
- Anger
- Depression
- Bargaining
- Acceptance

It is important to remember that we all grieve in our own unique way, and these are just guidelines that might help to make sense of your experience. If it doesn’t that’s fine. Something and somebody else will be there to help you, if you ask. When you are ready. That might be tomorrow, it might not be for a long time.

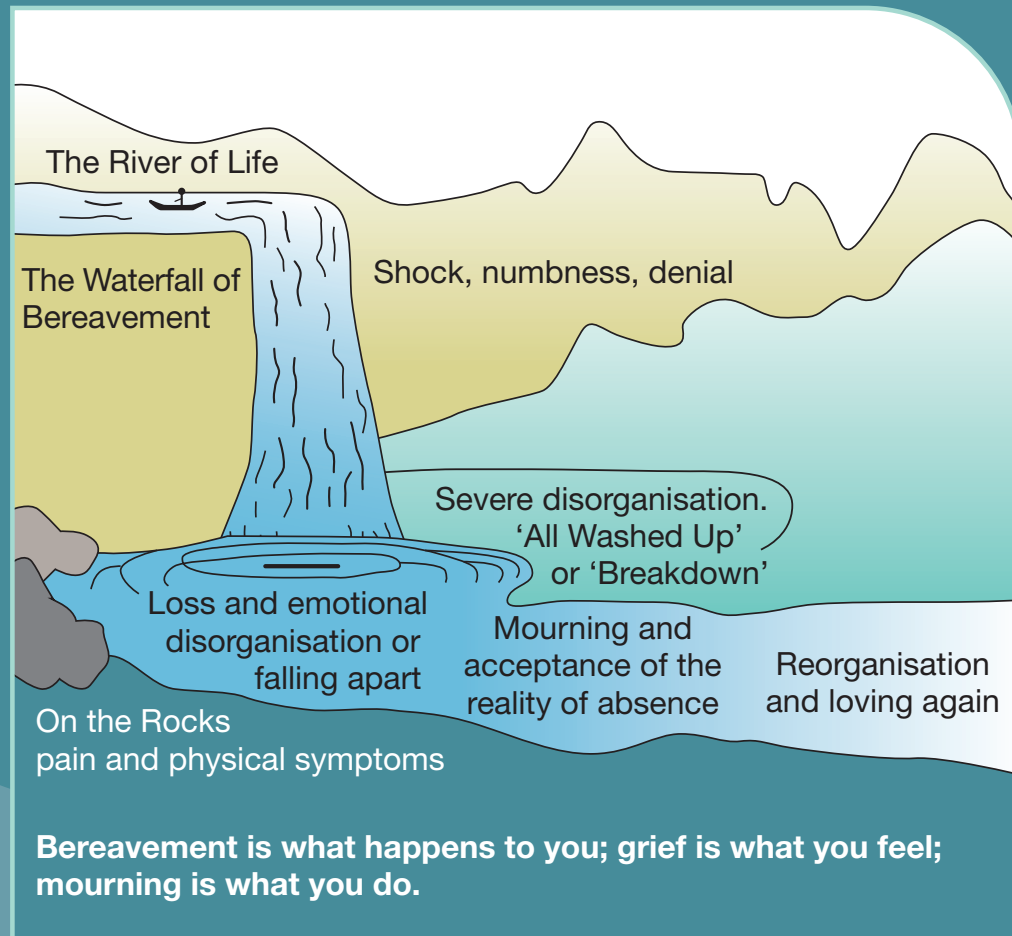
At this particular time, there are a few kinds of grief that we are experiencing within this pandemic.

- Global grief
- My grief
- Your grief
- What if...grief (or ‘Anticipatory grief’ - our real worry and concern about what might happen in the future – it can feel as real as if it is happening NOW).

**“The gratitude of families when they are allowed to visit to say good bye, but the immense sadness that goes with that, at one point we had belongings of 15 plus residents sat in an empty lounge waiting for collection, heart breaking is an understatement.”**

MHA colleague

## The whirlpool of grief



**Richard Wilson, 1992**

This diagram might be helpful in visualising how your experience of grief might be at the moment.

Notice that the river does keep flowing onwards, away from the chaos and pain.

## It's okay to feel a lot of emotions at the same time

**"The utter despair and deep sense of sadness, especially when relatives were not allowed in. I will always remember the relative stood at the window singing to her dad, it still upsets me to this day."**

MHA colleague

You might be feeling or have felt ANY or ALL of these emotions. Sad, angry, annoyed with others, numb, hopeless, in despair, shutting others out, sleeping more than usual, not sleeping, not eating, comfort eating, guilty (I am safe, others are not; can I be doing more? Why am I at home when I should be with my colleagues?), crying, frightened, anxiety, astonished by kindness, hopeful.

These and more feelings are natural in these difficult and uncertain times.

You might be by yourself at this moment, and you may be feeling alone, even in the midst of a busy care home or retirement living scheme.

But you do not have to stay alone in your thoughts and feelings. Talk to your manager, a trusted colleague or the chaplain. You can be seen and heard on an app, online or on the telephone if that is what you choose.

**Mourning** is what we do to acknowledge the pain and the loss and offer a ritual, a tradition, a faith or spiritual based activity which focuses on the loss.

**"It was the speed and the unpredictability of it. I sat and chatted to one gentleman for most of one day because he was sitting outside in the lounge and was so lonely. He seemed well. Just very lonely. The next day when I came in I went to look for him and was told he had been taken into hospital and had died. That happened on several occasions. You just didn't know who it was going to 'get' next."**

MHA colleague

## What can we do about it?

**"It was a dreadful experience but the interesting thing is now, when I look back on it, I think of it as something really precious. We lived at a deeper level than we do normally. We were certainly there for each other in a way that we hadn't been before. We supported each other as a team – ringing each other at home to support each other when we knew someone was struggling. And we feel closer to each other because we went through it together. A dreadful time but I shall remember it as a very precious experience."**

MHA colleague

When you stop to consider, take a deep breath and perhaps you can share your feelings with a co-worker, a manager or the chaplain and when you get home, with a trusted partner, friend or family member.



**"I hugged them and told them it's okay we will get through it, I told every staff member and messaged them thanking them for everything they are doing and my door is open, to swear to cry to do whatever they need to during these sad and scary times."**

MHA colleague

**Talk and Listen** to one another, even if not in the same room or close enough to touch or hug. You don't have to do this by yourself, even though you may physically be alone.

Find a colleague in the care home or scheme. Speak to your manager. **"I need a minute please"** is a good place to start. Often your work colleague will know exactly what you might be thinking or feeling, as they share the same experiences as you. They might just be feeling or seeing it differently to you and that can be helpful for both of you.

If you are feeling overwhelmed, or suicidal or self-harming, or your usual coping strategies are not working and you may be drinking or using more drugs than usual, call Samaritans help line **116 123** or Cruse Bereavement Support **0808 808 1677** or your local Community Mental Health Team.

**"Making sure the staff took their annual leave was really important. Even the staff who said to me they didn't want to be off and wanted to help I told them it was really important to have some down time."**

MHA colleague

**"There were a people who just sent an email to me to ask how I was. Even people I didn't speak to much would email me and say I am just checking in with you. This meant a lot to me."**

MHA colleague

# Tips to help

**Take a break** let a colleague or your manager know you need to take time out – take 5 minutes and go to the staff room or step outside.

**Breathe**  
Taking some deep breaths really can help clear the stress, anxiety, the ‘fog’ in our minds, bringing more oxygen into our bodies and brains which is really helpful for shifting our thoughts and worries. It also helps bring new energy to tired muscles and organs.

**Have a drink** of water – staying hydrated helps our brain function – the place from where all the thoughts, feelings and behaviour are controlled.

**Ending the shift** write down 3 things you feel good about today. It can be very simple. **“I gave Barry a great shave”**. **“Marion really enjoyed her strawberry ice cream”** **“I helped Amy talk to her Dad on the ipad.”**

Write down the names of anyone you are especially concerned about and add a kind word next to their name.

Add the thought **“I have done the best that I could do today. Well done.”**

Leave the piece of paper in an envelope in your locker or desk drawer. Close the door and leave it there. Now you are ready to leave your workplace and move to the next. You do not have to open the envelope when you come back tomorrow.

## Give a MHA recognition postcard to a colleague

There are a number of postcards that can be used to acknowledge the support others have given during this time. These can be found on the MHA Wellbeing intranet page.

## Remembering together

Many of our care homes and schemes are gathering residents and MHA colleagues to sit together, light a candle, and talk about the person who has died, playing their favourite piece of music, having their favourite dessert, baking a cake together for tea time, watching his/her favourite film with ice cream cones.

Everyone is encouraged to share a word, a brief thought or memory aloud.

A Memory Tree with photos of the person who has died and thoughts from anyone in the home about them, written on the ‘leaves’ and hung from the branches of the tree. This can be a small tree with fairy lights inside the branches or painted onto a wall or a cut out of a tree tacked onto the notice board.

You can be as creative as you like with the above process of community remembrance as it aids our grief and mourning process and acknowledged our shared experience of loss. Care home and retirement living colleagues have said how helpful this can be, and the residents feel part of what is happening too; also essential to their wellbeing.

If you are unsure of how to hold a remembrance, make sure you speak to the chaplain. They are there to support with memorials.

You can also access the support provided by MHA. This includes:

### **MHA chaplains**

Our chaplains are available to support their MHA colleagues. Even if you don't have a chaplain at your home or retirement living scheme you can still contact a chaplain by emailing **chaplaincy@mha.org.uk**. A chaplain will then respond to your email.

### **MHA Wellbeing Internet page**

This webpage has lots of useful resources incorporating a wellbeing tool kit. The toolkit has lots of practical techniques to help promote wellbeing including:

**Gratitude journals.** These can be used to help focus on what we are grateful for.

The **catch it, check it and change it approach**. This can help change negative thinking and help us to look at perceived problems differently.

**Circle of concern, influence and control.** This approach can support you to focus on what you can and can't change and influence. Often we worry about things that we have no control over, which in turn increases feelings of stress.

**Mindfulness techniques.** These will help you to be in the present moment, giving you time to rest and reduce worry about future or past events.

**[www.mha.org.uk/mha-internal-information-wellbeing/](http://www.mha.org.uk/mha-internal-information-wellbeing/)**

### **Areas explored on MHA's wellbeing page**

**Positive Emotion:** Focusing on and sharing positive emotions helps boost ours' and others.

**Engaging:** Taking time to do the things we enjoy helps us to process and refresh so we can keep moving forward.

**Connecting:** Knowing ourselves helps us to build strong and effective relationships with others.

**Purpose & Achievement:** Knowing our 'calling in life' and focusing on our achievements helps us to flourish.

**Resilience:** Build your reserves for when you need that bit extra.

**Physical health:** Look after your body to help look after your mind.

**The bigger picture of wellbeing.**

### **Care First - Employee Assistance Programme (EAP)**

Care First provide free, confidential information and support. It is an independent service which can be accessed 24 hours per day, 365 days per year via telephone, email, instant messaging and online.

Telephone number: **0800 174 319** (you simply need to say you work for MHA).

Alternatively you can access this service over the internet at **[www.carefirst-lifestyle.co.uk](http://www.carefirst-lifestyle.co.uk)**

**Remind yourself** that you are doing the very best you can in the situation.

You are doing a tremendous job and one that is often unseen and unheard. You are caring for the most unwell and vulnerable people in our families and communities. You are providing caring and skilled accompaniment for people at the end of their lives.

You are 'standing in' for loved ones, families, friends and faith leaders who are unable to be there.

What an important role this is and gives comfort to so many family members who cannot be there with their relatives.

**Thank you**



# Other sources of support

Samaritans help line **116 123** or email [jo@samaritans.org](mailto:jo@samaritans.org)

Samaritans website: [www.samaritans.org](http://www.samaritans.org)

Cruse Bereavement Support **0808 808 1677**

website: [www.cruse.org.uk](http://www.cruse.org.uk)

Mind website [www.mind.org.uk](http://www.mind.org.uk)



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