Improving care for bereaved populations in hospitals is a high priority in palliative care.

Acute Care settings versus Hospice settings:
- Gaps exist in policy and practice
- Bereavement care not routinely assessed
- Bereavement support programs less formalized
- Generic interventions typical for all cases
- Lack of evidence for use of risk assessments in hospitals
- Paucity of evidence for best practices in the care of individuals during bereavement experience

**Objective**
- Select and implement a bereavement risk assessment tool in hospital setting
- Assess risks for complicated grief in family members experiencing death of a loved one in hospital
- Score bereavement risk in low, medium, high risk categories per public health model of bereavement support
- Develop grief support interventions per risk category

**Methods**

**Quality Improvement Project**

- **Setting:** Academic medical center
- **Framework:**
  - Clinical Microsystems
  - Public Health Model of Bereavement Support
  - Practice Recommendations

**Systematic Literature Review:**
- Bereavement risk factors/potential health outcomes
- Types of risk assessment tools
- Uses of risk assessment tools
- Effectiveness of grief support interventions

**Tool Selection:**
- Crosswalk table
- "Parker" criteria

**Participants**
- Inpatient Palliative Medicine Teams
- Physician
- Advanced Practice Registered Nurse
- Social Worker

**Selected Tool**

Bereavement Risk Index (Parkes, 2009).

Credit: Mari Andrew/Instagram, 2017

![Grief](Image)

**References**


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