

ELNEC COVID-19 Communication Resource Guide

An APRN Telephone Death Notification to Family Tool

PREPARATION

- 1) Make the call as soon as possible after the death.
- 2) Prepare for the call by talking with a colleague about the deceased to review the events of the last few days.
- 3) Gather and verify the facts about the patient – name, gender, age, medical record number, and circumstances of death. Have the chart available, if possible, depending on the location where you will take the call.
- 4) Establish the next of kin to be notified – contact person, full name(s), address(es), relationship to the patient.
- 5) Arrange for a medical interpreter, if needed.
- 6) Review with a colleague the context of the call, the history of the care, and what you will say.
- 7) Take a few moments to collect and prepare oneself – with a mindfulness minute or deep breathing.
- 8) Find a quiet space to call.
- 9) Remember to talk slowly and use simple language

MAKING THE CALL

- 10) Consider using technology to block personal phone telephone number such as *67, Doximity,
- 11) Initiate call.
 - If call goes to voice mail - do not leave information about the death. Leave your specific contact information such as Martha Mark, CNS at West Hospital. Please call me back at the following number.
- 12) Identify yourself and your position at the health care facility.
- 13) Ask to speak to the contact person and verify their relationship to the deceased.
- 14) Provide a warning shot – “ I am afraid I have some serious/difficult news to share.”
- 15) Ask if person has anyone with them or if they are driving.
- 16) Allow them time to get to a room with another person or call another person or to pull over on the road.
- 17) Check in they are ready to receive the news.

DELIVERING THE NEWS

- 18) Provide clear and direct language – “ I am so sorry to inform you that, X has just died.” “I am sad to have to tell you X has just died.”
 - Do not use euphemism such as passed on, expired or didn’t make it as you do not want to be ambiguous.
- 19) Allow time and silence for the family member/friend to take in the information.
- 20) Be prepared for the expression of emotions.
- 21) Offer simple details about what happened if the family member/loved one asks.
 - a. Explain how the patient was doing earlier and the sudden deterioration.
 - b. Explain the possible reasons for the sudden deterioration.
- 22) Allow the family members to ask additional questions and express feelings.
- 23) Provide therapeutic listening and support.

CLOSING THE CALL

- 1) Offer information about next steps
 - a. Ability to view the body at the facility
 - b. Basic guidance about funeral planning
- 2) Offer follow-up phone calls by the social worker, chaplaincy to help with support and funeral planning.
- 3) Provide information about follow-up telephone calls from the hospital including the release of the body.
- 4) Offer condolences and a statement for having to receive this information by phone - “Again, my condolences on your loss. I wish I had been able to tell you this in person.”
- 5) Document the call in the chart.
- 6) Notify the clinical team and the bereavement liaison that called has been completed.
- 7) Take a moment to reflect and provide a positive affirmation for providing a difficult call with empathy.

- C Dahlin for ELNEC COVID-19 Communication Resources

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