



Visiting Nurse Service Of New York®

HOSPICE CARE

We Bring The Caring Home®

Script for a Condolence Call to the Bereaved

- *Condolence calls by a Hospice volunteer are activated when the patient died within hours or 1-2 days of admission before any of the IDT team members had opportunity to make a visit.*
- *The purpose is to express the condolence of our Hospice and make an initial assessment within a few days of the death about the needs for additional follow-up.*

Hello, Mr./Mrs. _____. My name is _____ and I'm from *Visiting Nurse Service of New York Hospice Care*. Do you have a few minutes to speak?

First of all, I would like to extend the condolences of our Hospice staff to you on the death of your: _____(mother, spouse, etc.).

(Pause to allow response)

I understand s/he died just a short time (use the specific if you know it) after being admitted to our VNS Hospice Care.

I am a volunteer bereavement counselor. Bereavement volunteers are people who have received special training in helping people deal with their grief, and we regularly make phone calls to family member of persons who have died on the hospice program to see how they are doing. I want you to know that bereavement support is available to you over the course of the next thirteen months. You will be receiving a letter in the mail with more information about the bereavement services we offer.

- How are things going for you right now?
- Would you like me to have a VNS Hospice bereavement counselor call you rather than wait for the letter to arrive?
- Would you like to have the number for one of our bereavement counselors? (Willis Partington 718-888-6965 or Mary Kay King 718-888-6966)

We want you to know about some of our bereavement services.

*Mention the **groups** and **individual counseling** that is available as well as the **Pelkey education talks**. The education talks are often a way to engage people who are unsure about attendance at a group. There is also an annual **memorial service**.*

*Bereavement counselors can also mail **educational material** about the grief process. They will also be receiving a-monthly **Bereavement Newsletter** every other month from VNS Hospice Care.*

Thanks you, again, and please know that you are in our thoughts.

Following the call:

1. Please complete the *Volunteer Visit Report Form* and mail to your Volunteer Manager.
 2. If you noticed any of the complicated bereavement indicators that were covered in the training class (e.g. high anxiety, pervasive depression, risk-taking behaviors, etc.) contact the bereavement counselor as soon as possible for additional follow-up.
-

Developed by:
VNSNY Hospice Care
1250 Broadway
New York, NY 10001
www.vnsny.org
April 2008