

Supporting Bereavement Care in Practice

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Presenting Team



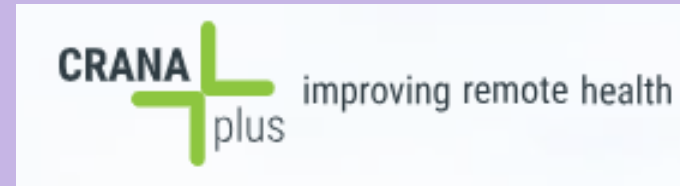
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Who Is Red Nose

National organisation supporting families after pregnancy and infant loss

Works across prevention and bereavement

Connects hospital, community, and primary care

The Services and Supports we Deliver:

Peer Support

This program is available 24/7 to anyone who has been affected by the loss of a pregnancy, stillbirth, death of baby or child. Our team are a mixture of specially trained team members and volunteers.



Hospital to Home

Our specially trained lived experience workers provide immediate support within three months of loss.



Counselling

I specially trained grief and loss counsellors work to provide person centered care that is designed around the individual needs of the parent or family unit. Support is not time limited and parents can access as many sessions as they need.



National



Professional & Lived experience



Free



x Medicare or x Visa



Confidential



Access more than one



x Referral

Co-designing bereavement resources with community to improve access

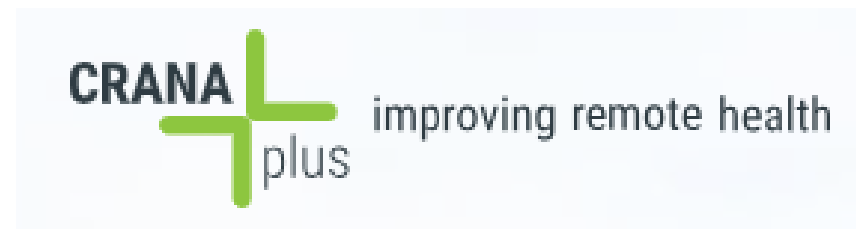
Supportive Diverse Families Resources



The Co-designed Suite of Resources

Supporting:

- culturally safe bereavement care
- communication in complex moments
- connection to support
- continuity beyond discharge



What We Created



For Clinical Staff, before stepping into the room

- 7 short clinical training videos
- points of care guidelines

To support conversations and warm handover

- Service information cards
- Referral flyers
- Birth cards that recognised pre and post 20 week loss

Support First Nations families



Supporting First Nations families
& communities in times of *grief*

How to use these tools in Practice

Before the conversation

- Prepare languages and plan to step into the room

During care

- Use guidelines as prompts for ongoing culturally safe care

After care

- Give families something tangible and guide them to care.
- Reduce isolation

“These tools reduce uncertainty for clinicians and improve trust for families.”

Why This Matters

Families
move across:

- hospital care
- discharge
- community and primary care

Support is
often:

- inconsistent
- dependent on individuals
- not embedded in systems

Panel Discussion