

Appendix B:

Summary of Bereavement

Community Engagement Report 2022

South West London

Bereavement Services and Support:

Gaps workshops report 2025



Contents

2. Executive Summary, Key Themes and Findings.....	3
2.1 The Importance of Dialogue and Cultural Sensitivity	3
2.2 Navigating Administrative Challenges During Grief	3
2.3 Access to Bereavement Support and Services	3
2.4 The Need for Personalised Bereavement Support.....	3
2.5 The Impact of the Covid-19 Pandemic	4
2.6 Challenges in Accessing Information and Support	4
2.7 Gaps in Support for Specific Groups	4
3. Key Themes from Community Engagement Findings.....	4
3.1 The Experience of Bereavement	4
3.2 Key Priorities When Grieving	5
3.3 Bereavement Services: What Works and What Doesn't	5
3.4 The Role of Services vs. Personal Networks	5
3.5 Under-Served Communities: Faith, Culture, and Accessibility	6
3.6 Bereavement Support for People with Disabilities and Children	6
3.7 Accessing Information and Advice: Challenges and Solutions	6
3.8 The Impact of the Covid-19 Pandemic on Bereavement	7
3.9 Future Bereavement Service Recommendations	7
4. Key Themes from the Conclusion	7
4.1 Strengthening Bereavement Care Services.....	7
4.2 Training and Support for Healthcare Professionals	8
4.3 The Importance of Practical and Emotional Support.....	8
4.4 The Role of Community and Faith-Based Organisations.....	8
4.5 Addressing the “Tsunami of Grief” Post-Covid-19.....	8
5. Key Themes from the Recommendations	9
5.1 Aligning with the Compassionate Communities Framework	9

5.2	Strategic Integration and Collaboration	9
5.3	Enhancing Information and Awareness	9
5.4	Strengthening Bereavement Services	10
5.5	Training and Support for Frontline Staff	10
5.6	Expanding Pre-Bereavement Care	10

Appendix B: Summary of Community Engagement Report (2022)

Read full report: [Bereavement Services and Support in Kingston – Community Engagement Report | Healthwatch Kingston](#)

1. Executive Summary, Key Themes and Findings

1.1 The Importance of Dialogue and Cultural Sensitivity

- Open communication between bereaved individuals and service providers is essential to understanding what works well and identifying gaps in support.
- Faith and cultural needs must be acknowledged, particularly regarding mourning practices, rituals, and rapid burial or cremation.

1.2 Navigating Administrative Challenges During Grief

- Many people found administrative tasks overwhelming, such as registering a death, arranging funerals, and notifying relevant organisations.
- Funeral directors are a key source of guidance, but financial challenges (funeral poverty) are a growing concern.
- Vulnerable groups, such as elderly individuals without digital skills, require additional support in managing these processes.

1.3 Access to Bereavement Support and Services

- Family and friends provide most of the support, but individuals at risk of isolation must be identified and helped.
- Waiting lists for bereavement counselling exist, and it is unclear what role GPs play in offering support.
- Not everyone benefits from immediate counselling—some may find it more helpful later in the grieving process.

1.4 The Need for Personalised Bereavement Support

- Bereavement services should be tailored to individual needs, recognising that not all grief support requires formal face-to-face counselling.

- Services should prioritise those most in need, ensuring that resources are allocated effectively.
- Faith, belief, lifestyle choices, and language preferences must be respected in bereavement care.

1.5 The Impact of the Covid-19 Pandemic

- Many bereaved individuals experienced distress due to an inability to provide loved ones with a 'good death' or culturally appropriate burial.
- Healthcare and support staff endured significant emotional strain, having faced high death rates and extreme working conditions.

1.6 Challenges in Accessing Information and Support

- The bereavement support landscape is fragmented, with services offered by the NHS, charities, community organisations, and private providers.
- Finding suitable support while in a state of shock and grief can be an overwhelming and difficult process.

1.7 Gaps in Support for Specific Groups

- Further research is needed into bereavement support for:
 - People with disabilities
 - Children and young people
 - Individuals who have lost a child or experienced pregnancy loss
 - Veterans and their families

2. Key Themes from Community Engagement Findings

2.1 The Experience of Bereavement

- Bereavement experiences varied widely but common emotions included loss, sadness, shock, depression, and isolation.
- 62% of respondents reported an impact on mental health, and 45% noted effects on physical health.

- Some experienced anger, emotional withdrawal, and relationship strain, while others found bereavement strengthened relationships.

2.2 Key Priorities When Grieving

Respondents highlighted the importance of:

- Faith and cultural recognition in bereavement practices.
- Having someone to talk to who understands grief, ideally in the same language.
- Empathy, compassion, and shared experiences with others who have been bereaved.
- Practical advice and legal support, knowing what to do after a death.
- Time for personal reflection and healing while balancing family responsibilities.
- Safe spaces and dedicated locations for mourning and support.

2.3 Bereavement Services: What Works and What Doesn't

- Good support includes skilled, non-judgmental listening, flexible and easily accessible practical assistance, and clear information about what to do when someone dies.
- Respondents valued face-to-face counselling, though long waiting lists for bereavement services were a concern.
- Faith-based and community support were crucial, but follow-up support was often lacking.
- Inadequate bereavement timing—some received support too soon when they were not ready, with no follow-up later when it was needed most.

2.4 The Role of Services vs. Personal Networks

- Support from partners, family, friends, and sympathetic employers was the most common form of assistance.
- Services should complement, not replace, personal networks, but access to counselling, practical advice, and community groups remains important.
- GPs primarily provided signposting and clinical referrals, though some patients expected more listening support.

2.5 Under-Served Communities: Faith, Culture, and Accessibility

- Different faith and cultural communities require swift burial or cremation, which can be hindered by delays in issuing death certificates or coroner procedures.
- Financial barriers were an issue, particularly when access to funds was restricted until probate was granted.
- Language barriers and lack of awareness of bereavement services among some Hindu, Muslim, Korean, and Tamil communities created additional challenges.
- Many older bereaved women experienced severe isolation after the loss of a spouse.
- Men from some cultures felt discouraged from expressing emotions, limiting their access to professional support.

2.6 Bereavement Support for People with Disabilities and Children

- People with disabilities reported difficulty in accessing bereavement information and services, with many unaware of where to seek help.
- Children and young people expressed a need for someone to talk to, structured support networks, and bereavement-trained professionals.
- Carers felt a double loss—grieving their loved one while also losing their role and purpose as a caregiver.

2.7 Accessing Information and Advice: Challenges and Solutions

- 45% of respondents were not informed about bereavement services by healthcare providers.
- Funeral directors were a trusted source of information, though concerns about funeral poverty and lack of cost transparency were raised.
- Many found health service information outdated and fragmented, leading to confusion about registering deaths, financial matters, and funeral arrangements.

- One central hub for bereavement information and services was suggested, with clear online and offline resources in multiple languages.

2.8 The Impact of the Covid-19 Pandemic on Bereavement

- Covid-19 disrupted end-of-life care and grieving processes, with many experiencing sudden loss, isolation, and an inability to say goodbye.
- Bereaved individuals felt isolated due to lockdowns, and support services had to shift online, which was challenging for many.
- Healthcare professionals and chaplains reported extreme emotional strain, describing their work as “torrid” and “heartbreaking.”
- Increased complex grief responses require specialist support and greater access to long-term therapeutic interventions.
- The pandemic highlighted digital inequalities, with 11 million UK citizens lacking digital life skills, making online bereavement support inaccessible for many.

2.9 Future Bereavement Service Recommendations

- More investment in bereavement services, including counselling, peer support, and practical advice.
- Community-based training for volunteer counsellors and paid bereavement support roles to improve service delivery.
- A centralised bereavement information hub to streamline resources and reduce confusion for bereaved individuals.
- Clearer regulations for funeral costs and financial support, addressing funeral poverty for those on low incomes.
- Greater integration of bereavement services across health, community, and faith-based organisations, ensuring long-term support beyond the immediate aftermath of a loss.

3. Key Themes from the Conclusion

3.1 Strengthening Bereavement Care Services

- Improved coordination between local, regional, and national bereavement services is necessary for a sustainable model of bereavement care.

- Families need regular communication before and after a death, allowing them to ask questions and receive reassurance.
- Where possible, families should have opportunities to be with their dying relatives to support the grieving process.

3.2 Training and Support for Healthcare Professionals

- Grief training should be integrated into medical, nursing, and healthcare professional education to improve bereavement care.
- Healthcare professionals need better tools and resources to assess bereaved families' needs and signpost them to appropriate support.
- The emotional toll on staff supporting bereaved families must be acknowledged, with training and support provided to help them manage these challenges effectively.

3.3 The Importance of Practical and Emotional Support

- While family, friends, and communities provide emotional support, navigating the legal and administrative aspects of bereavement is often difficult, particularly for those who are isolated or have language barriers.
- Clear signposting and strong links with voluntary organisations are essential to ensure bereaved individuals receive appropriate help.
- Peer support and lived experience networks were highlighted as valuable ways for people to support each other through grief.

3.4 The Role of Community and Faith-Based Organisations

- Churches, voluntary agencies, and faith-based organisations play a critical role in bereavement support.
- Collaborative work between faith groups and community organisations can strengthen bereavement services and address unmet needs.
- Given the current resource pressures and rising demand, active collaboration
- and pooling of resources may be necessary to expand service provision.

3.5 Addressing the “Tsunami of Grief” Post-Covid-19

- The pandemic has intensified grief and bereavement needs, requiring expanded informal community-based support to reduce isolation.
- Long-term educational and societal initiatives are needed to improve how communities engage with death, dying, and bereavement.
- A Compassionate Communities approach—encouraging community-based activities and support networks—could help bereaved individuals cope better in the long term.

4.Key Themes from the Recommendations

4.1 Aligning with the Compassionate Communities Framework

The recommendations should be implemented within the four pillars of the Compassionate Communities programme under the South West London Integrated Care System (ICS):

- Primary Care Quality Improvement: Enhancing coding for ethnicity, cultural/spiritual needs, and bereavement status.
- Community Development: Mapping service gaps, fostering community dialogue, and improving service reach.
- Acute Transformation: Improving information and data systems for bereavement care.
- Compassionate Community Charter: Leading cultural change and strengthening support networks.

4.2 Strategic Integration and Collaboration

- Ensure bereavement service improvements align with South West London End of Life Care action plans and wider health strategies.
- Encourage collaborative working between the borough bereavement officer, council funeral services, and community organisations.
- Establish a borough-wide funeral service offering clear, transparent, and set-price arrangements to address funeral poverty.
- Create a multi-agency task group to develop bereavement service standards and monitor service uptake.

4.3 Enhancing Information and Awareness

- Co-produce a multi-cultural bereavement guide (print and digital) covering funeral arrangements and available support services.
- Make information easily accessible via Connected Kingston, ensuring end-of-life care and bereavement support are fully available to all residents.
- Commission educational films in multiple languages to destigmatize death and bereavement, hosted on Connected Kingston for wider accessibility.

4.4 Strengthening Bereavement Services

- Identify and address gaps in bereavement support for:
 - People with learning disabilities or additional support needs.
 - Children and young people in educational settings.
- Reduce waiting lists for bereavement support and develop inclusive, tiered service models to accommodate diverse needs.
- Introduce voluntary bereavement champions to connect communities with available services.

4.5 Training and Support for Frontline Staff

- Assess training needs for frontline workers and community volunteers to deliver culturally sensitive bereavement support.
- Provide pandemic-related support for care home staff, domiciliary care workers, and residents affected by trauma, loss, and financial insecurity.

4.6 Expanding Pre-Bereavement Care

- Offer individuals with terminal illnesses, and their loved ones, culturally appropriate information and pre-death funeral planning support.
- Increase identification of those anticipating grief, such as caregivers, and improve signposting to bereavement services.
- Ensure ongoing emotional and practical support for those involved in pre-death care, extending assistance beyond the funeral.



Healthwatch Kingston is an independent statutory service (not part of the NHS nor Kingston Council). You can find out more about us on the [Healthwatch Kingston website](#).

Healthwatch Kingston was set up by the [Health and Social Care Act of 2012](#) to be the independent champion for local NHS and social care.

We seek the views of patients, service users, carers and the public to help services work better for the people who use them. We play an important role bringing communities and services together. Everything we say and do is informed by what local people tell us.

As well as encouraging those who run local services to act on what matters to people, we also share local views and experiences with [Healthwatch England](#) and the [Care Quality Commission](#) who make sure that the government put people at the heart of care nationally.

[Tell us what you think about your NHS and social care](#)

Healthwatch Kingston upon Thames

Suite 3, 2nd Floor, Siddeley House

50, Canbury Park Road

Kingston upon Thames

KT2 6LX

www.healthwatchkingston.org.uk

t: 020 3326 1255 **e:** info@healthwatchkingston.org.uk

X: @HWKingston **Facebook:** /HWKingston

LinkedIn: @healthwatch-kingston **Bluesky:** @hwkingston.bsky.social

© Healthwatch Kingston upon Thames, 2025



Kingston Voluntary Action is an infrastructure organisation that provides a wide range of support to the voluntary sector. We support local charities and community groups at all stages of their development.

Our Vision: Communities and people that KVA works with are empowered to drive social change towards a fairer, more inclusive, healthier and happier society.

Our Mission: Meeting the needs of community organisations and individuals by equipping them with relevant tools, skills, knowledge, confidence and voice to drive positive change.

Our Values: We are Collaborative, Resilient and Creative.

Our Strategy: [2025–2028: Stronger Organisations, Healthier Communities](#)

Our Role: KVA is part of a national network of over 250 local infrastructure bodies, known as Councils for Voluntary Service (CVS).

We believe that infrastructure has a crucial role in helping to build strong, connected communities.

We see infrastructure as based on three complementary and intertwined strands: capacity building, connecting and representation.

Contact:



020 8255 3335



admin@kva.org.uk



[@KingstonVoluntaryAction](#)

Please visit the [KVA team page](#) to contact individual staff members.

Find Us

Siddeley House, 50 Canbury Park Road, Kingston upon Thames, Surrey, KT2 6LX