

Care for the Caregivers: Seeking to maintain resilience of those who help others

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Centre for Practitioner Renewal (CPR)

Health care is about living and dying, curing and healing;
art and science, mind and heart, skills and knowledge,
technology and compassion

Health care is based on a business model of efficiency, the
work we do is about relationship—relationship with
self, other and Other

Relationship is often sacrificed to action and efficiency

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- How do we sustain health care providers in the work place?
- What is the effect of being in the presence of suffering?
- What would be reparative, healing or restore resilience for health care providers?

Efficiency through relationship

Wisdom

“In examining disease, we gain wisdom about anatomy and physiology and biology. In examining the person with disease, we gain wisdom about life.”

Oliver Saks

Self Knowledge

Many people miss out on themselves as they journey through life. They know others, they know places, they know skills, they know their work, but tragically, they do not know themselves at all.

John O'Donohue: Anam Cara

Objectives:

(Do good / Do no harm - Do no *self* harm)

- Deepen mindfulness of what it means to be a HCP
- Recognize importance of HCPs placing themselves in the circle of caring
- Understand the impact of relationships in the workplace
- Explore how HCPs can sustain their sense of meaning, purpose and value in connection to their work

Challenges to Well Being in Health Care

- Economic restraint & restructuring
- Rapidly developing technologies
- Increased access to information (and misinformation!)
- Increased patient complexity
- Shortage of practitioners
- Decreased numbers of beds
- A more critical & litigious social climate

Our Experience at CPR

Sustaining Healthcare Providers in the workplace:

Burnout / Compassion Fatigue / Vicarious
Trauma / Moral Distress / Grief / Depression
/ Anxiety

and

“Lateral Stress” among colleagues

Lateral Stress:

Accumulated stress discharged between colleagues

- Smiling Rage
- Irritability, Frustration, Lack of Patience
- Intolerance of Emotion
- Silencing Response
- Scapegoating / Bullying

Chart Review Research

Referral Reasons	Frequencies
	Totals
Emotional reactions at/about work	21
Family/relationship-related issues	17
Stress/cumulative stress	15
Critical incident & CI-related behaviours	12
Career related decisions/issues	7
Grief & loss	7
Interpersonal/team issues at work	7
Burnout/exhaustion	3
Communication issues at work	3

Chart Review Research

Chief Complaints	Frequencies
	Total
Affect issues	141
Alienation from self/others	38
Work issues	33
Fear	23
Grief & loss	22
Family of origin/attachment issues	22
Stress/Cumulative Stress	20
Anger; frustration	17
Lack of agency/helplessness	17
Trauma & unresolved trauma	16
Communication difficulties	15
Depression	15
Client characteristics	13
Guilt	13

Self Awareness

Think back to a recent work day.

While you travel to work, what do you notice in your body, your mind and your feelings as you get to work?

How would you rate your emotional stress level?

As you leave your work, what do you notice in your body, your mind and your feelings?

Self Awareness (cont.)

As you commute home, how do you feel? When you arrive home? After several hours at home? As you fall asleep?

Do you dream about your work? If so, what are the themes and images in these dreams?

Burnout

- Emotional exhaustion
- Depersonalization
 - A negative attitude towards patients/clients
 - Personal detachment
 - Loss of ideals
- Reduced sense of personal accomplishment and commitment to the profession.

Maslach, 1993

Moral Distress

- The negative feelings resulting from a situation in which moral choices cannot be translated into moral action
- Associated with experiences of anger, frustration, guilt, and powerlessness

Jameton, 1984; Rodney and Starzomski, 1993

Vicarious Traumatization

- Vicarious Traumatization (McCann & Pearlman, 1990)
- Secondary Traumatic Stress (Stamm, 1995)
- Compassion Fatigue (Figley, 1995)

Compassion Fatigue

- Three symptom clusters similar to PTSD:
 - Hyperarousal
 - Avoidance and/or numbing
 - Reexperiencing-Intrusion

Most Common Signs of Distress

- Increased rates of illness
- Withdrawal - Isolation
- Cynicism - Sadness - Depression
- Exhaustion - Presenteeism
- Addictive responses
- Loss of efficiency - Judgment errors
- Challenging team dynamics
- Impaired boundaries - Identification vs. Empathy

Key Themes in Caregiver Resilience

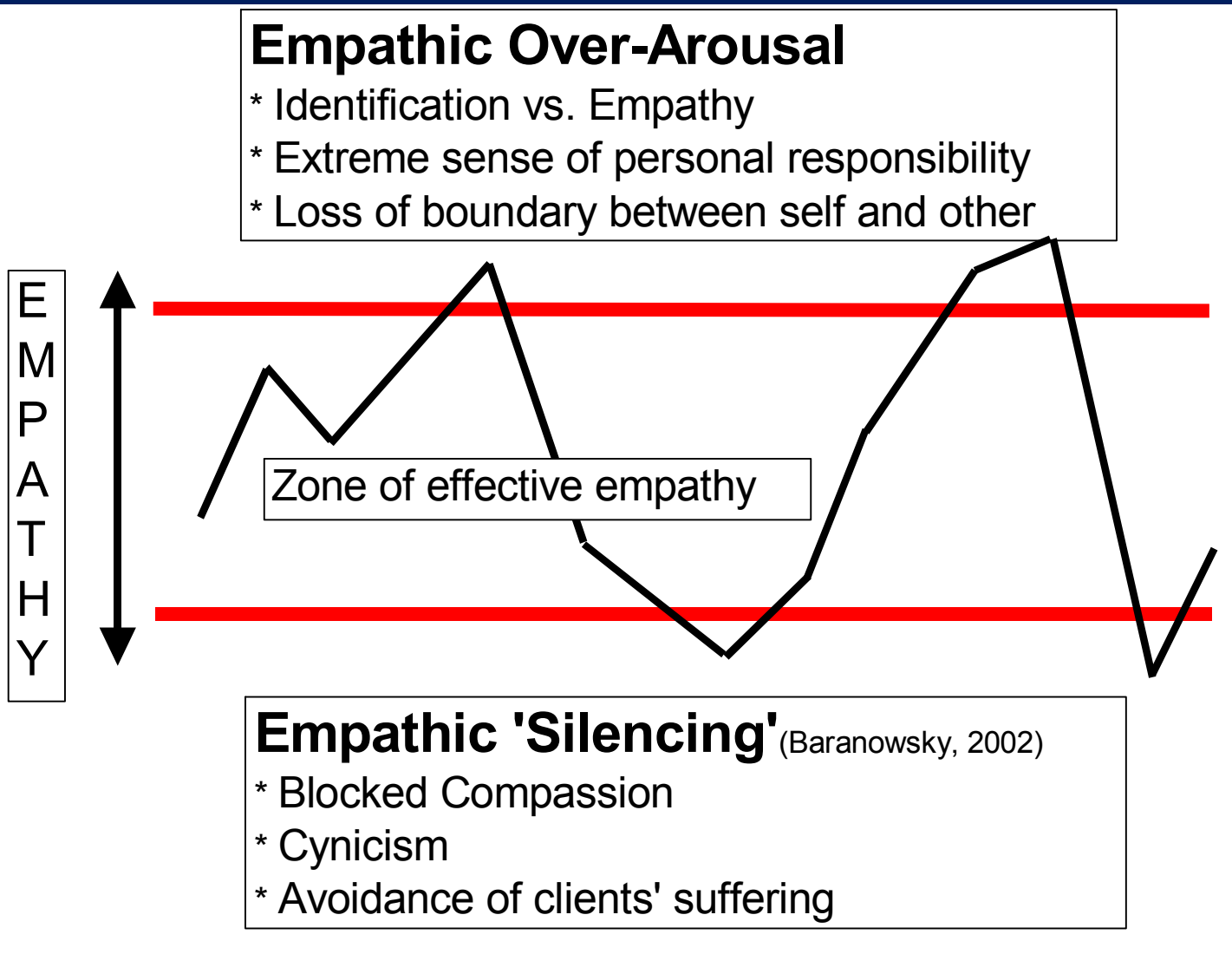
Restorative

- Long-term relationships
- “Healing connections” (Mount, Boston & Cohen, 2007)
- Sense of meaning, purpose or service to a ‘higher good’
- Embracing Life

Challenging

- Long-term relationships
- Identification
- Death out of time
- The paradox of a “chronically terminal” disease

Window of Effective Empathic Engagement



Positive Transformation

- Personal growth
- Deeper connection with others
- Deeper appreciation of the human journey
- Greater awareness of the natural world and their place within it
- Meaningful sense of the transcendent

Sork, J. (2005). A study of health care professionals experiences of witnessed suffering.

Addressing Caregiver Distress: Coping

- Self care (physical needs)
- Self nurturance
(forgiveness/connection/tranquility/play)
- Escape

Addressing Caregiver Distress: Transforming

- Self-awareness: strengths, vulnerabilities, needs
- Continuing growth – personal & professional
- Connection
 - self (time for self-reflection)
 - work related supports
 - Effective debriefing procedures
 - Supervision/Mentorship
 - Collegiality
 - social supports

Self Knowledge and Connection

To understand ourselves we have to be understood by another. To understand another we have to understand ourselves.

Watzlawick, Bevan & Jackson

Basic Human Needs

Exist

Relate

Grow

Alderfer, 1969

Effective Group/Team

Safety

Inclusion

Trust

Guidelines

Confidentiality

Equal airtime

Non-judgemental listening

Timeliness

Right to pass

Engaged

Resilience

1. Motivation to self-reflect and develop insight
2. Memory cues as a reminder to emerge from daily routines
3. A tool to help self-reflection/self-awareness

Resilience

Performance = f (Ability + Motivation + Environment)

Memory Cues

- Hand washing
- Going to the toilet
- Closing the office door at the end of the day
- Sitting in a particular chair
- Pulling a chart out of the door holder
- Checking off a patient's name on the day sheet
- Logging into or out of the EMR program
- Placing a chart into the folder for filing

Maintaining Yourself FIFE yourself

Feelings

Impression

Function

Expectations

Cave, 2009

Maintaining Yourself

FIFE yourself

Feelings

What do you feel about yourself/patient/colleague?

Impression

What is your impression (judgment) of yourself regarding your patient/work/colleague?

Function

What effect does this patient/work colleague have on you?

Expectations

What expectations are you expressing in how you are communicating?

End of Day Ritual

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