

# Caregiver Burnout

Recognize signs of burnout, understand the associated risks to caregiver and care recipient, and identify available resources for support. **Experience boredom and helplessness as you embody Hazel**, a 75-year-old woman living with severe chronic pain and early-stage dementia.

## People You'll Meet



**Cathy:** Hazel's daughter and the mother of Lucas and Lily (9-year-old twins). She is a single mom who struggles to balance the demands of work and family. She has always been an overachiever and does not accept help easily.



**Lucas:** Hazel's 9-year-old grandson



**Karen:** Hazel's home health aide



## Who is Hazel?

Hazel is a vibrant 75-year-old who thrives on her relationships with others. She enjoys singing at church, playing Bridge, and volunteering in her community. Due to her degenerative joint disease, Hazel can no longer walk into town or safely climb stairs. Last year, she moved in with her daughter Cathy who has a first-floor bed and bath. About 6 months ago, Cathy began noticing some changes in Hazel's cognition, but Hazel seems unaware of any deficits.

## Learning Objectives

- 1 Learner will identify dangers associated with caregiver burnout (medication errors, care plan violations/shortcuts, irritability, lack of patience, impaired decision making).
- 2 Learner will recognize opportunities to engage people living with dementia in meaningful activities that enhance the quality of life and reduce behavioral manifestations.
- 3 Learner will identify community resources to support informal caregivers and empower those wishing to age in place.

## Discussion Questions

- 1 How did you feel while embodying Hazel?  
Why did you feel that way?
- 2 What are some things Cathy could've done instead of sharing her medication?
- 3 Was the ER doctor successful in supporting you (as Hazel) and Cathy?  
How did you feel in the emergency room?

*Please use the back side of this guide to write your answers.*

## Optional Activities and External Resources

- 1 Make a list of 3 (or more) things you can do in your own day-to-day life if you are experiencing burnout.
- 2 Think about your loved one's interests - Make a list of 3 (or more) meaningful activities that the person(s) you care for can participate in.
- 3 Compile a list of contact information for your support network and community resources
- 4 External Resources:  
Relaxation/meditation: [calm.com](https://calm.com)  
National (US) resources for caregivers: [bit.ly/3rXyHZY](https://bit.ly/3rXyHZY)  
Intro to essential oils: [bit.ly/3fuAMY6](https://bit.ly/3fuAMY6)



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### Locations

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### Facilitation Guide

Elder Safety and Well-Being  
8/2021

# Intervention and De-escalation

Embody Abby, a lead nurse's aide who faces a sensitive situation involving her resident, Heloise. **Observe a potentially abusive situation**, determine how best to keep an elder safe, and experience a confrontation with a challenging family member.

## People You'll Meet



**Heloise:** Heloise is in her mid-70s and has mid-stage Alzheimer's. She has high anxiety and language deficits due to progressive aphasia. She often refuses care and believes she is neat and clean even when she is not. Heloise startles easily and "freezes" when she is afraid. Triggers include loud noises, people invading her personal space, and raised voices.



**Jennifer:** Jennifer is Heloise's daughter. She works a high-stress job and visits more out of obligation than desire. Jennifer is harsh and almost militant in dealings with her mom, does not understand dementia at all, and thinks her mom is being difficult on purpose. She frequently complains about her mom's appearance and is intimidating to staff.



**Hector:** Hector is a new CNA being trained by Abby. He has recently completed abuse prevention training and is eager to do the right thing. Today is his first experience with a potentially abusive situation.



## Who is Abby?

Abby is a seasoned nurse's aide and a confident elder advocate who is passionate about empowering the individuals she serves. She is a team leader and enjoys mentoring new staff members.

## Learning Objectives

- 1 Learner will identify strategies for successfully diffusing tense situations and redirecting elders using effective communication and active listening skills
- 2 Learner will gain confidence in initiating difficult conversations with family and co-workers to advocate for elder safety
- 3 Learner will have a clear understanding of their role in preventing/reporting suspected/known abuse

## Discussion Questions

- 1 While embodying Abby, how did you feel when you confronted Jennifer?  
Why did you feel that way?
- 2 Have you ever had to intervene to protect an elder from an abusive interaction?  
What strategies did you use?  
Were they successful or unsuccessful?
- 3 What could you or your co-workers have done to possibly prevent/reduce Jennifer's frustration?
- 4 What communication choices worked best for de-escalating tense situations?  
Can you think of additional ways to diffuse?
- 5 Were there communication choices that you disagreed with? - and why?

If you were to replay this experience, would you make different choices? What would they be?

*Please use the back side of this guide to write your answers.*

## Optional Activities and External Resources

- 1 Have learners break into groups of 2. One partner will voice a complaint/concern and the other will practice active listening techniques (not interrupting, asking clarifying questions, paraphrasing, pull-back, apologizing, validating) to try to diffuse the situation.
- 2 External Resources:  
Conflict resolution strategies:  
<https://bit.ly/3lFH2jF>



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# Trauma-Informed Care

Embodiment Harold, a veteran with an extensive history of Post-Traumatic Stress Disorder. **Experience PTSD flashbacks and associated anxiety symptoms**, identify common triggers and self-regulating practices.

## People You'll Meet



**Melanie:** Melanie is a seasoned nurse's aide with a clear understanding of PTSD and experience providing trauma-informed care. She is warm, compassionate, and well-loved by staff and residents.



**Karen:** Karen is a nurse's aide with institutional experience who is still learning about PTSD. This is the first trauma-informed community she has worked in and she is eager to make a difference.



**Ken:** Ken is the nurse manager and is also a veteran. He enjoys spending time one on one with all of his residents and building meaningful relationships. He always has a smile to share.



## Who is Harold?

A retired soldier living with Post-Traumatic Stress Disorder in a trauma-informed community. PTSD triggers include people screaming/crying, loud banging noises, crowded/congested areas, the smell of rice cooking, fireworks. Harold is proud to have served but embarrassed and private about his PTSD. He is frustrated that he's still affected after all these years. Harold is a trivia buff and enjoys simple pleasures like fresh air, sunshine, and a good cup of coffee.

## Learning Objectives

- 1 Learner will gain empathy and understanding of PTSD and identify common triggers
- 2 Learner will use positive approach tactics to safely and effectively support older adults experiencing PTSD flashbacks
- 3 Learner will promote self-regulation techniques such as deep breathing, guided meditation, and environmental adjustments (earplugs, music)

## Discussion Questions

- 1 While embodying Harold, how did you feel while experiencing the flashback? Why did you feel that way?
- 2 What environmental triggers did you notice? What could be done differently to reduce the risk of re-traumatization?
- 3 How did you feel when using the breath coaching/earplugs? How would you use this technique to support someone experiencing anxiety? Can you think of other times this technique may be useful in supporting older adults?
- 4 How has your perception of PTSD changed after embodying Harold? How will this change your current care practices?

*Please use the back side of this guide to write your answers.*

## Optional Activities and External Resources

- 1 Split into 2 groups:  
Step 1: Have each group make a list of potential triggers that are commonplace in your day-to-day environment (slamming doors, elders screaming, war movies, banging pots and pans, overhead pages, etc.)  
Step 2: Switch lists and identify potential solutions for reducing/eliminating triggers listed  
Step 3: Have each group present their ideas
- 2 External Resources:  
**Strategies for coping with PTSD flashbacks:**  
<https://bit.ly/3yt7q3X>  
**Implementing Trauma-Informed Care Handbook:**  
<https://bit.ly/3jwBLID>



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