# Caregiver Burnouts

## **Scenario**

Sue, an 85-year-old woman, has a history of COPD, HF, anxiety, and dementia. Sue's daughter Kelly (45 years old) is the only caregiver. Sue also has a history of memory loss and uncooperative behaviour. Kelly is a full-time worker and does not have training to care for individuals with complex needs. Kelly is feeling overwhelmed and burnout from providing care daily. She senses that she can not take care of her mother anymore. Sue falls at home, breaks her hip, and ends up in hospital. Kelly told the healthcare professional that she would be away until further notice because she needed a break. It leads to additional work for healthcare providers, especially nurses, and causes nursing burnouts.

## <u>Interrelationships</u>

### **Informal Caregiver**

- Increased family caregiver workload ———
  Decreased personal accomplishment
- Decreased perceived social support 

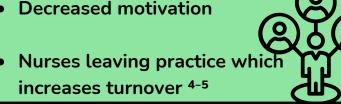
   Increased emotional exhaustion
- Increased family caregiver emotional —————— Increased depression and decreased life empathy satisfaction <sup>3</sup>

### **Nurse Caregiver**

Patient's increasing frailty

Increased turnover rate

- More responsibility for the nurses-> increasing workload
- Improper coping from increased work stress



## **Boundaries**

### **Informal Caregiver**

- Financial setbacks, lack of information <sup>1</sup>
- Emotionally and physically fatigued
- Social isolation, disruption to work and life
- Inadequate support from the healthcare system 9
- Relationship and co-residing, the complexity of care and needs, amount of care, and amount of time required for care 10

### **Nurse Caregiver**

- Lack of respect for staff
- Insufficient funding
- Increase patient/workload
- Lack of employer engagement <sup>11</sup>
- Pre-pandemic burnout, mandatory overtime, and nurse attendance 12 Workplace violence, increased risk of poor mental health <sup>13</sup>

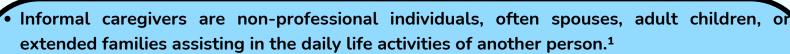
## **Solutions**

### **Informal Caregiver**

- Increased services and education
- Adult day services for a day reprieve
- How to better care for seniors
- How to better manage chronic illness in those you care for
- Keeping seniors more independent <sup>2</sup>
- Plan caregiver self-care
- Caregiver education
- Increase in organizations to support patients with chronic disease
- Caregiver intervention programs
- Increase in caregiver and social awareness of chronic disease and its effects



## **Population**



- In British Columbia, 26.2% of the population accounts for informal caregivers and provides over 80% of the care at home.<sup>2</sup>
- Caregivers are experiencing burnout due to several reasons, e.g., lack of training, intense and complex roles, compassion fatigue, distress, and inability to take breaks for self-care. This results in the utilization of the medical system by informal caregivers to have a break from their complex roles. It places strain on the medical system at every level to provide adequate care due to an increase in patient volume.1
- Caregiving has a complexity of its own due to people from different backgrounds, ethnicities, and cultural values. The informal caregivers are often caught between health care professionals and care receivers in medical decisions.1

## **Perspective**

### Informal Caregiver

- Lack of proper training leads to burnout which causes poor physical and mental health
- Feelings of being unable to continue as an informal caregiver 6

### **Patient**

• Decrease in patients' health status due to being unable to care for themselves this is why we see an increase in hospitalization.<sup>7</sup>

### **Nurse Caregiver**

- High workloads or patient assignments due to informal caregivers' burnouts
- Lack of quality care
- Burnouts
- Further decrease in patients' status 8

## **System Stressors**

- Increased ER visits due to caregivers needing a break
- The medical system is used as a form of respite
- True respite is not covered under medical
- Financial burden
- Barriers to success: fatigue, negative effects on mood, decreased personal health, and happiness 14
- Patients with dementia have increased hospital stays due to caregiver stress.
- Decreased levels of care at home resulted in increased hospital stays 15





## **Solutions**

### **Nurse Caregiver**

- Increase attractiveness to profession: tax incentives, pay increase, student loan forgiveness
- Mental health support, time off
- Increased access to education for LPNs to transition to RNs
- Unfettered access to PPE
- Increased public/nursing education that COVID-19 spreads via aerosol
- More staff, better pay, better recognition
- More government funding
- Better retention of nurses 11

## **Linking it All Together**

Informal caregiver burnout is an important topic that needs to be addressed. Our team identified that informal caregivers' burnouts directly affect nurses and cause nurses' burnouts while utilizing the IPB framework. Informal caregivers often experience difficulties caring for other family members, considering financial setbacks, social isolation, and lack of information about caregiving roles and the illness. This leads to higher rates of anxiety and depression among informal caregivers. Informal caregivers also experience exhaustion, decreased life satisfaction, and decreased personal accomplishments. Informal caregiver burnout strains the healthcare profession by increasing patients' workload NI leading to nurses' burnout. Insufficient funding, inadequate support from health organizations, and emotional and physical exhaustion among healthcare providers must be addressed. Solutions should be generated at an organizational level while including the other interprofessional team members to better address informal caregiver burnout.

