



THE UNIVERSITY OF
AUCKLAND
Te Whare Wānanga o Tāmaki Makaurau
NEW ZEALAND

Resilience

NZNO Gerontology Section Conference

6 November 2018

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What I want the world to know about working in aged care

- People with dementia have a beautiful personality and spirit, they just have trouble remembering things or are frail



What I want the world to know about working in aged care

Accepting the move from independence to
dependence is often more difficult
than

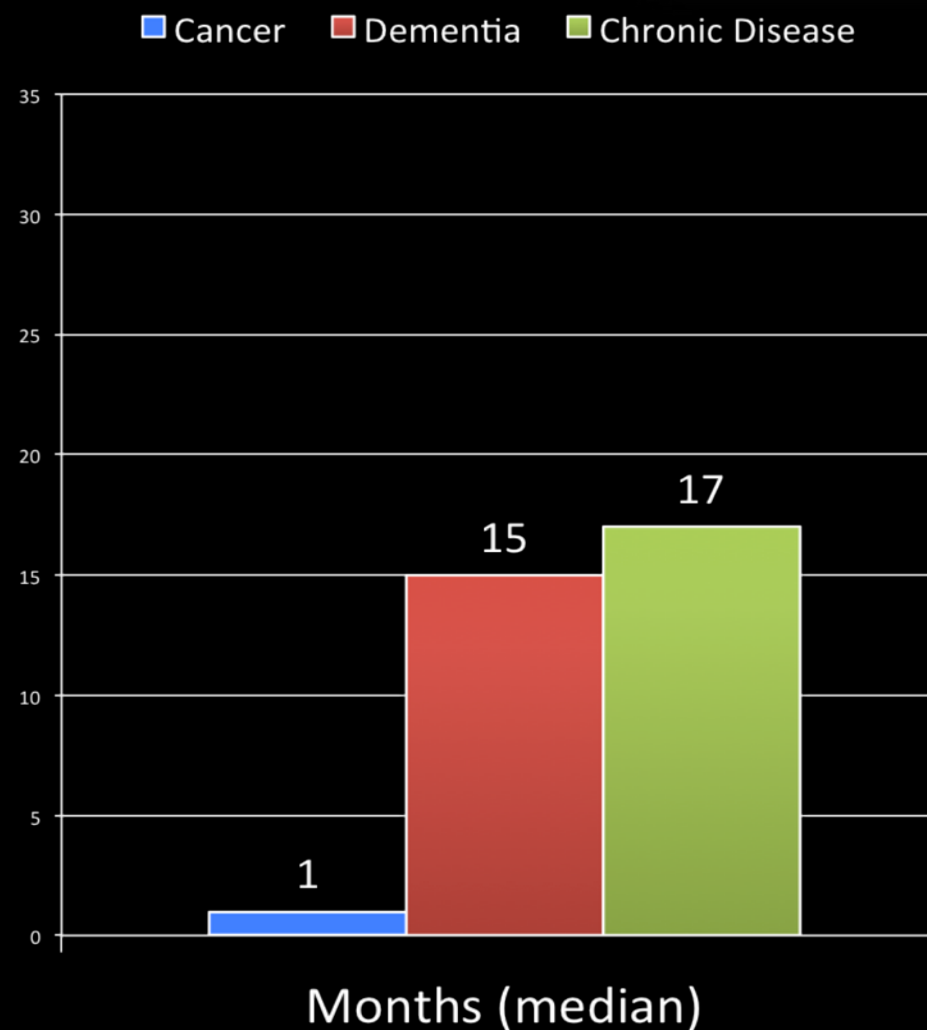
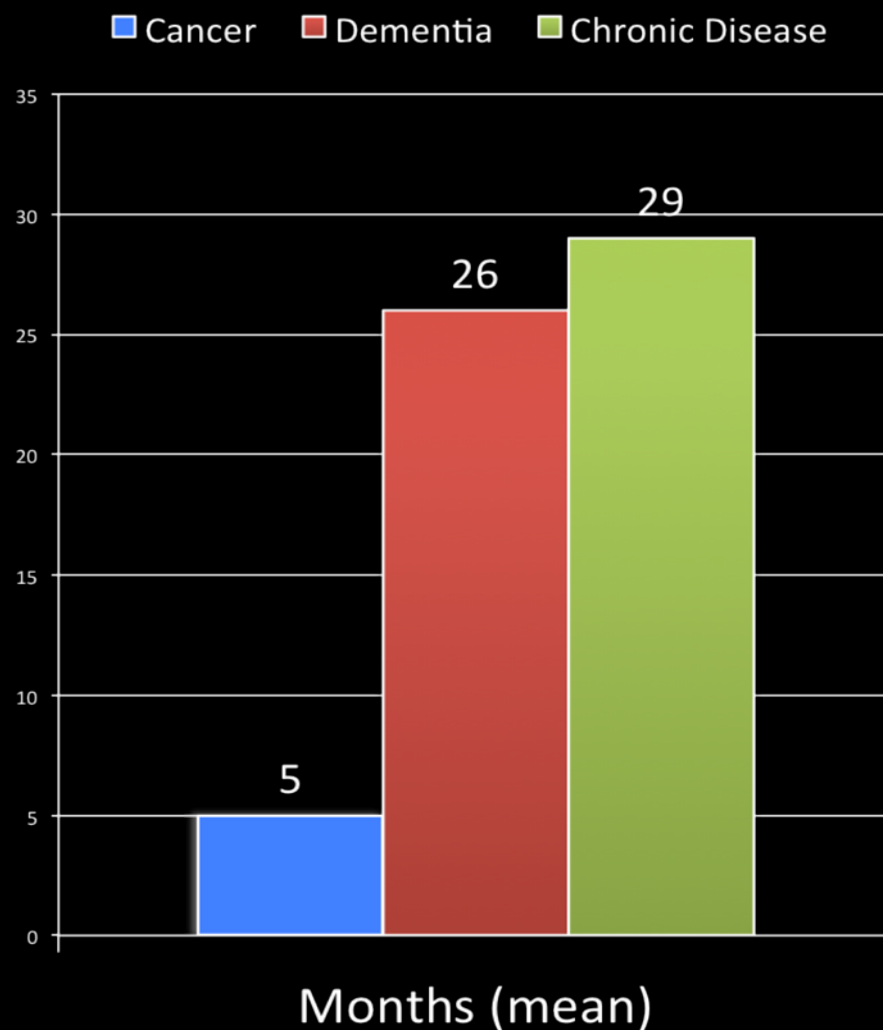
Accepting the inevitability of death

Aged care horror stories sell papers –
not stories about the needs of the frail

*IT IS ALL ABOUT THE
RELATIONSHIP!*



Residential Aged Care Length of Stay

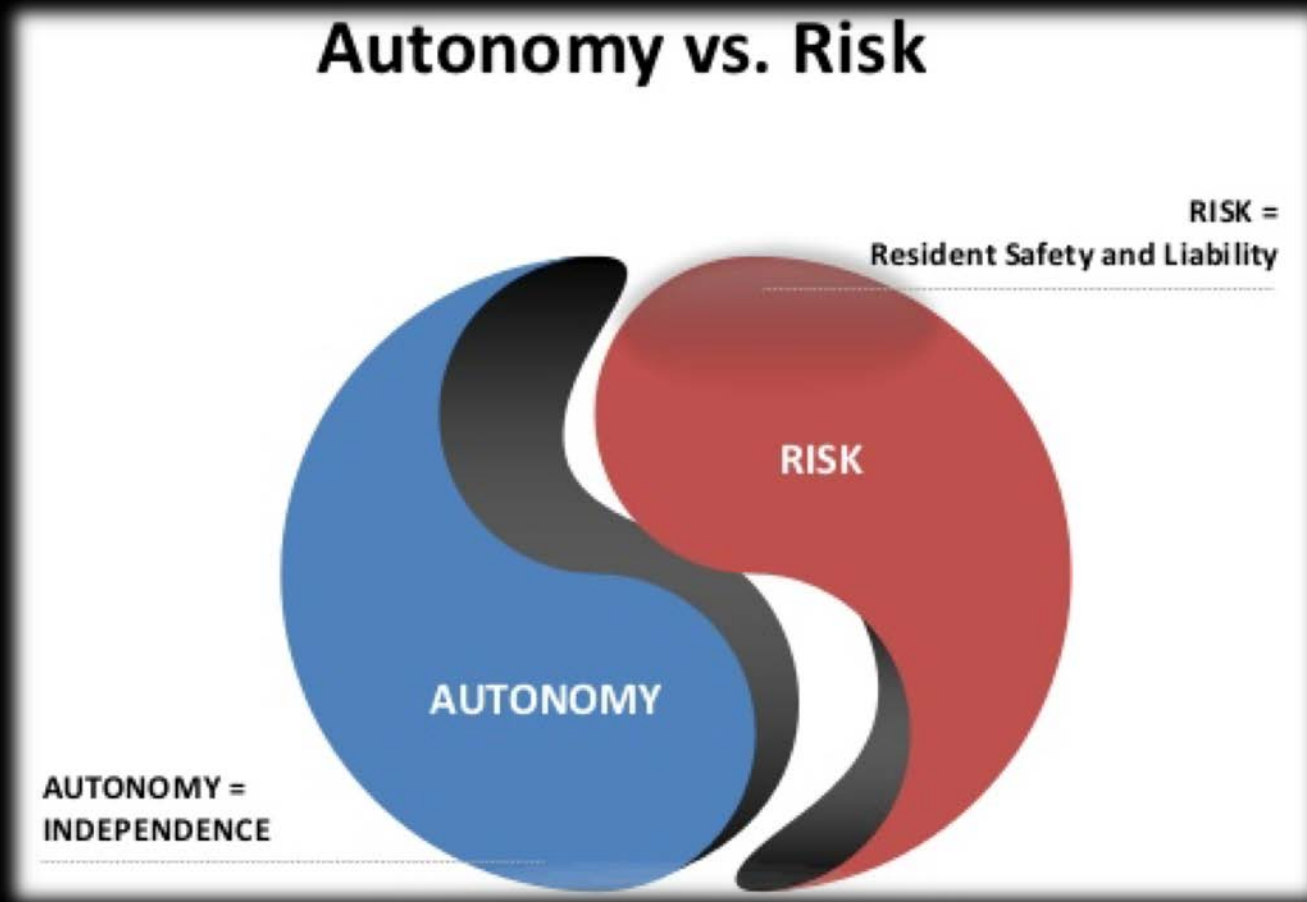


What I want the world to know about working in aged care

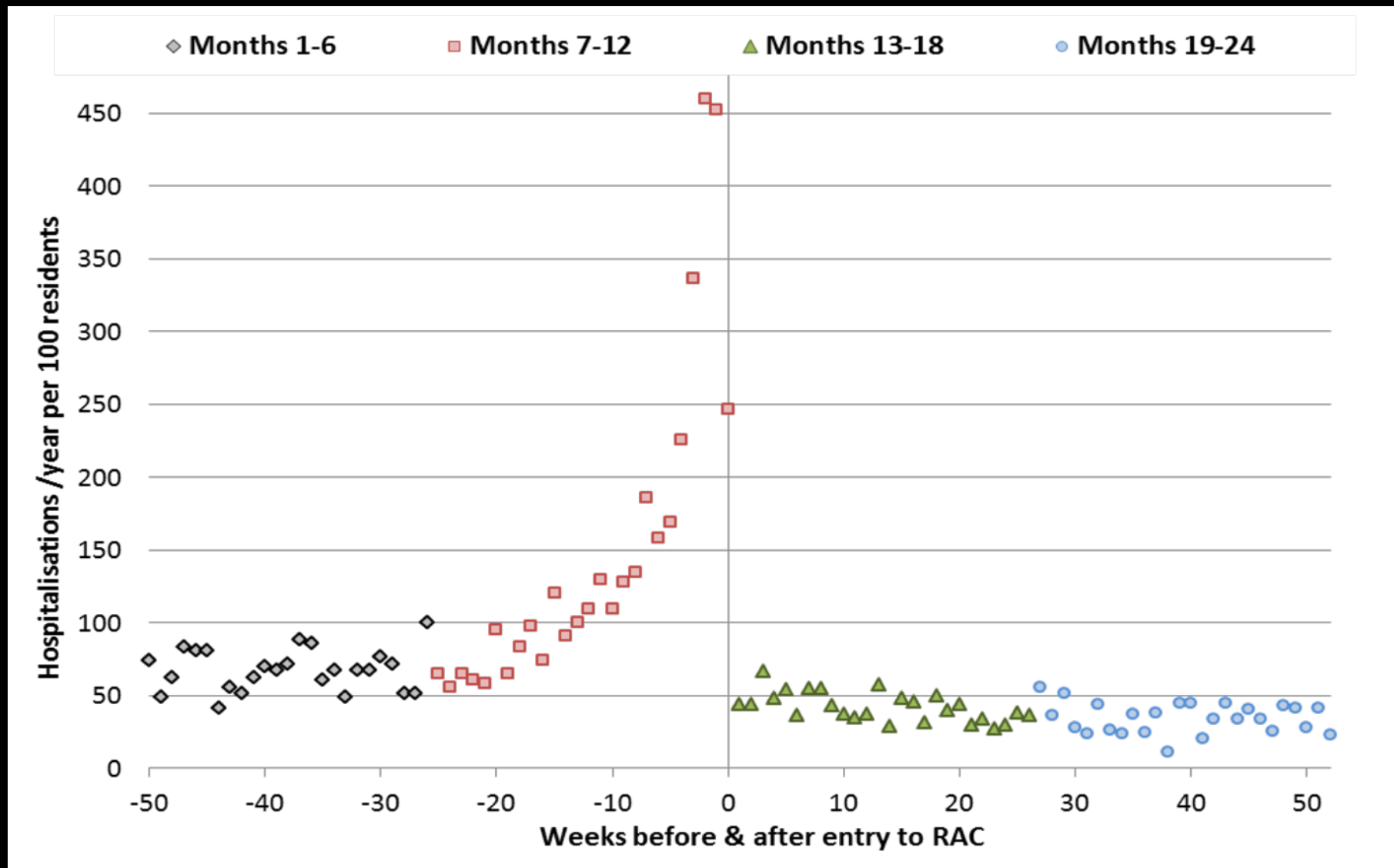
That older people have just as much right to
hospitalisation as anyone else.



What I want the world to know about working in aged care



Hospitalisation Before and After Residential Age Care Admission

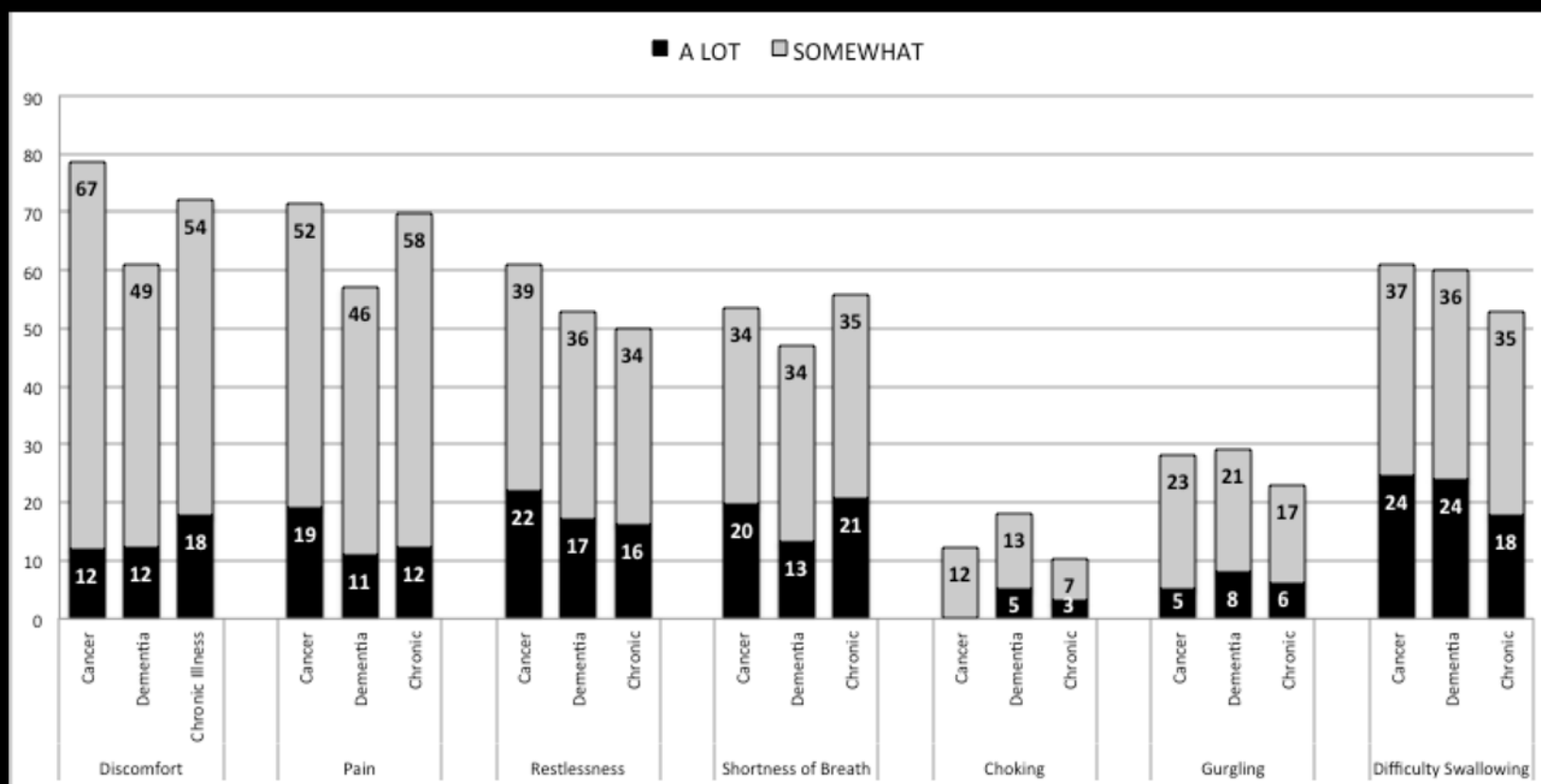


Boyd M, et al. Age Ageing. 2016;45(4):558-63.

What I want the world to know about working in aged care



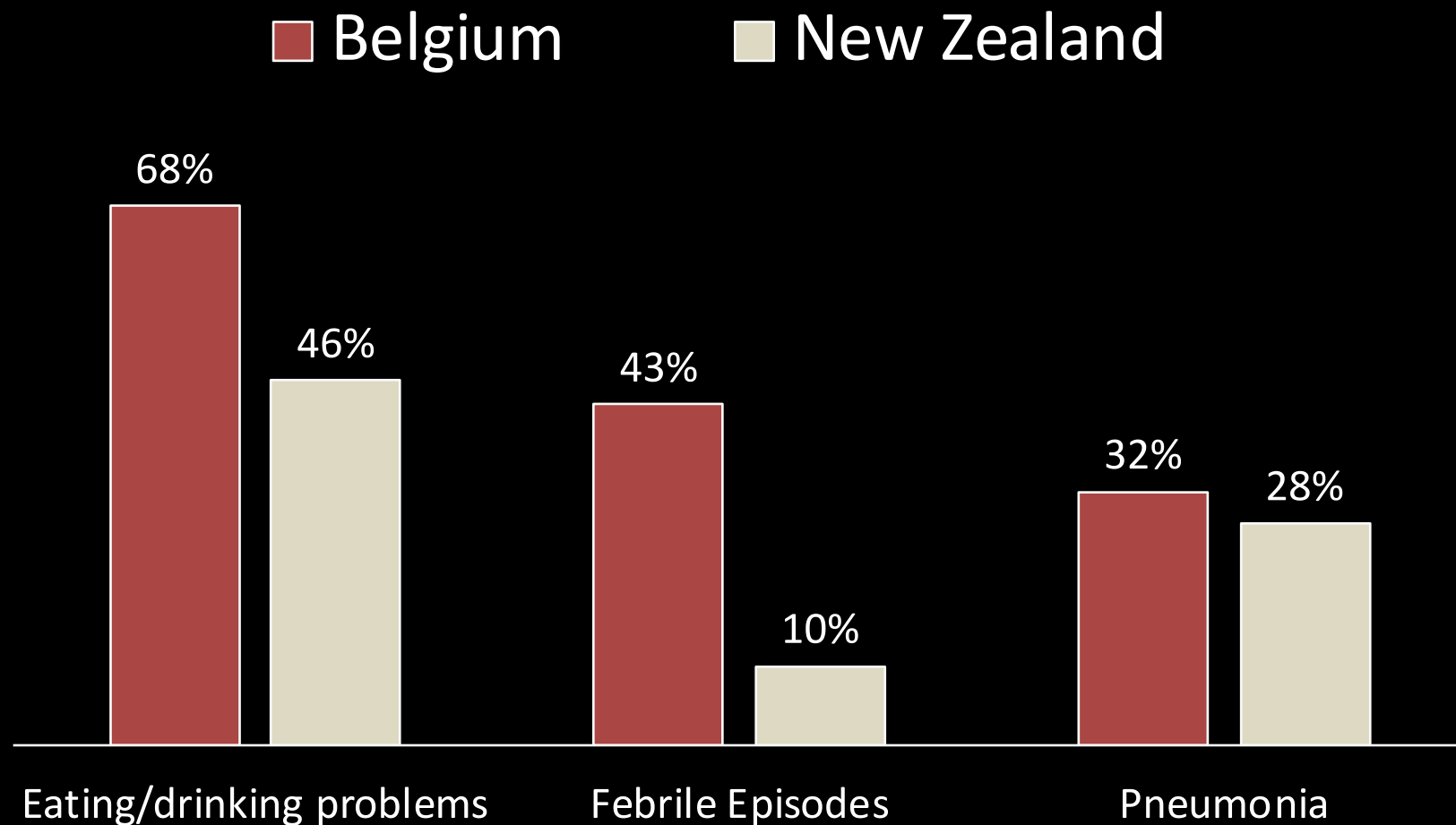
- We are working with the most medical complex and palliative care complex people



Belgium/New Zealand

Last Month of life with Dementia

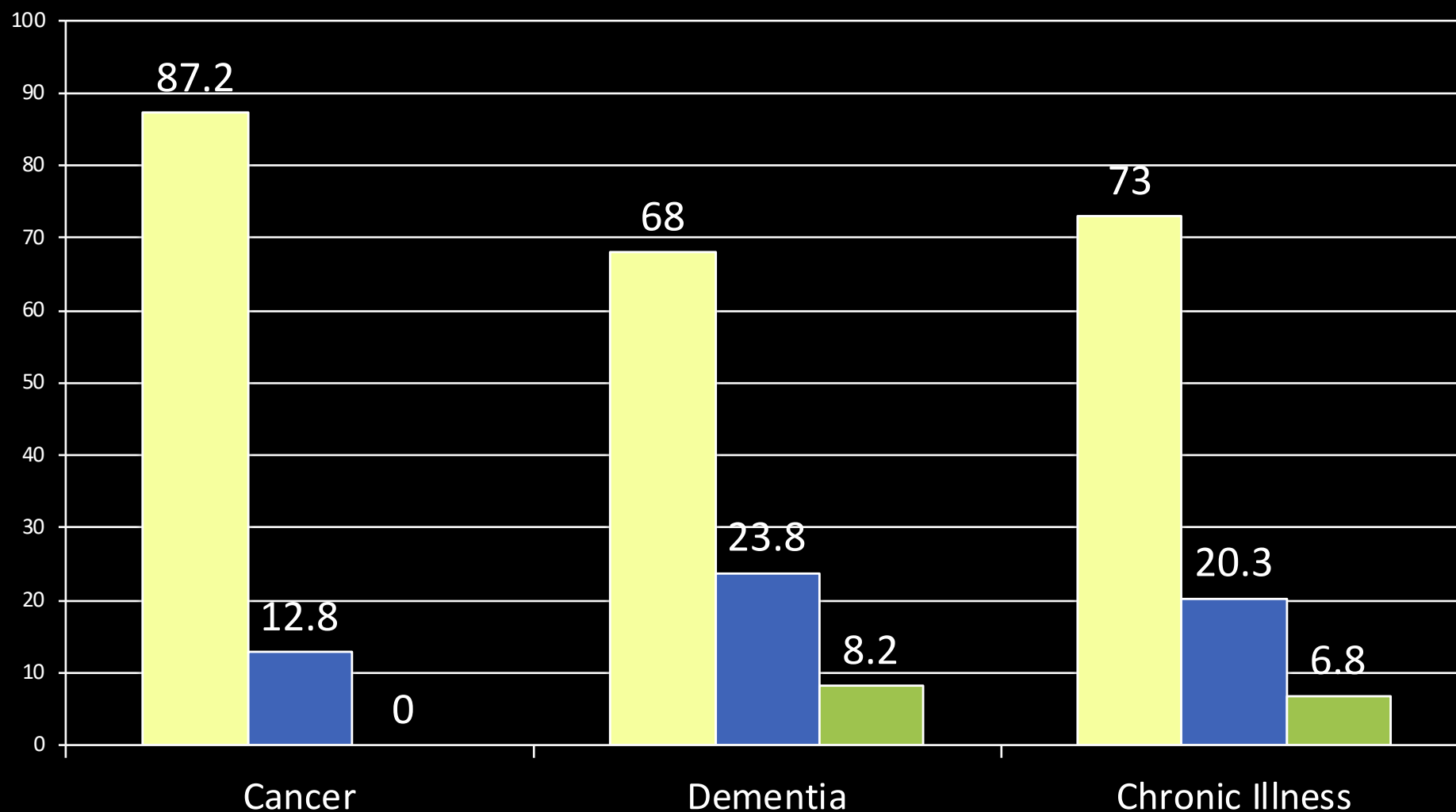
Vandervoort, 2013 (JAMDA 14:485) n=198,
Boyd, ELDER, 2018 (under review) n=158



Expected/Unexpected Deaths: % by primary diagnosis



■ expected but faster ■ neither expected or not ■ unexpected



SPICT TOOL



Supportive and Palliative Care Indicators Tool (SPICT™)



The SPICT™ is a guide to identifying people at risk of deteriorating health and dying. Assess these people for unmet supportive and palliative care needs.

Look for two or more general indicators of deteriorating health.

- Performance status is poor or deteriorating (the person is in bed or a chair for 50% or more of the day); reversibility is limited.
- Dependent on others for most care needs due to physical and/or mental health problems.
- Two or more unplanned hospital admissions in the past 6 months.
- Significant weight loss (5-10%) over the past 3-6 months, and/ or a low body mass index.
- Persistent, troublesome symptoms despite optimal treatment of underlying condition(s).
- Patient asks for supportive and palliative care, or treatment withdrawal.

www.spict.org.uk for information and updates.

Hospitalised Older People: Positive 48% one year mortality, negative 11% one year mortality

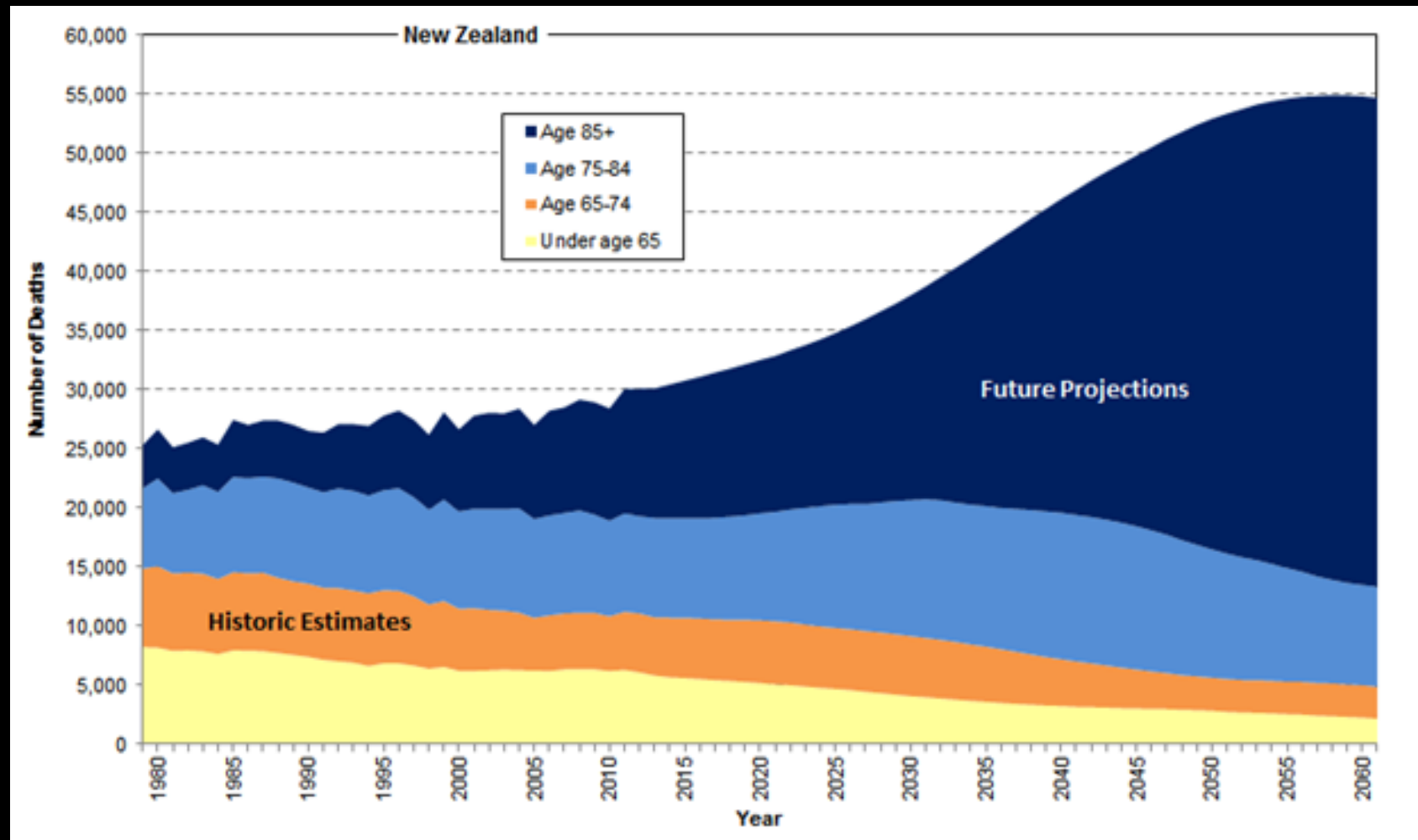
The “surprise question” for predicting death in seriously ill patients: a systematic review and meta-analysis

James Downar MDCM MHSc, Russell Goldman MD MPH, Ruxandra Pinto PhD, Marina Englesakis MLIS, Neill K.J. Adhikari MDCM MSc

■ Cite as: *CMAJ* 2017 April 3;189:E484-93. doi: 10.1503/cmaj.160775

- Worse discrimination for those with non-cancer diagnosis
- “The surprise questions performs poorly to modestly as predictive tool for death”
- Frailty may be a better way to identify those at risk

Historic Deaths and Future Projections by Age Band



Heather McLeod, Palliative Care Council, July 2013. Drawn using data from Statistics New Zealand; personal communication Joanna Broad.

Residential Aged Care

Resident to RN ratio:
>20 to 1

GP availability variable
55% without 24 hour
'On call' GP

High Staff Turnover
Few Multi-Disciplinary Team
Members available

In-patient unit Hospice

Patient to RN Ratio:
2-3 to 1

Palliative Care Consultant or GP
usually available

Social Worker, Chaplain, Volunteers
Complimentary Therapy,
Counselling



**GINGER ROGERS
DID EVERYTHING
FRED ASTAIRE DID
BUT BACKWARDS
AND IN HIGH HEELS**

Where to From Here?

Specialist or Generalist?



Gerontology

The diagram consists of two overlapping ovals. The top oval is red and contains the word 'Gerontology' in white. The bottom oval is dark blue and contains the words 'Palliative Care' in white. The two ovals overlap in the center, suggesting a shared or interdisciplinary area between the two fields.

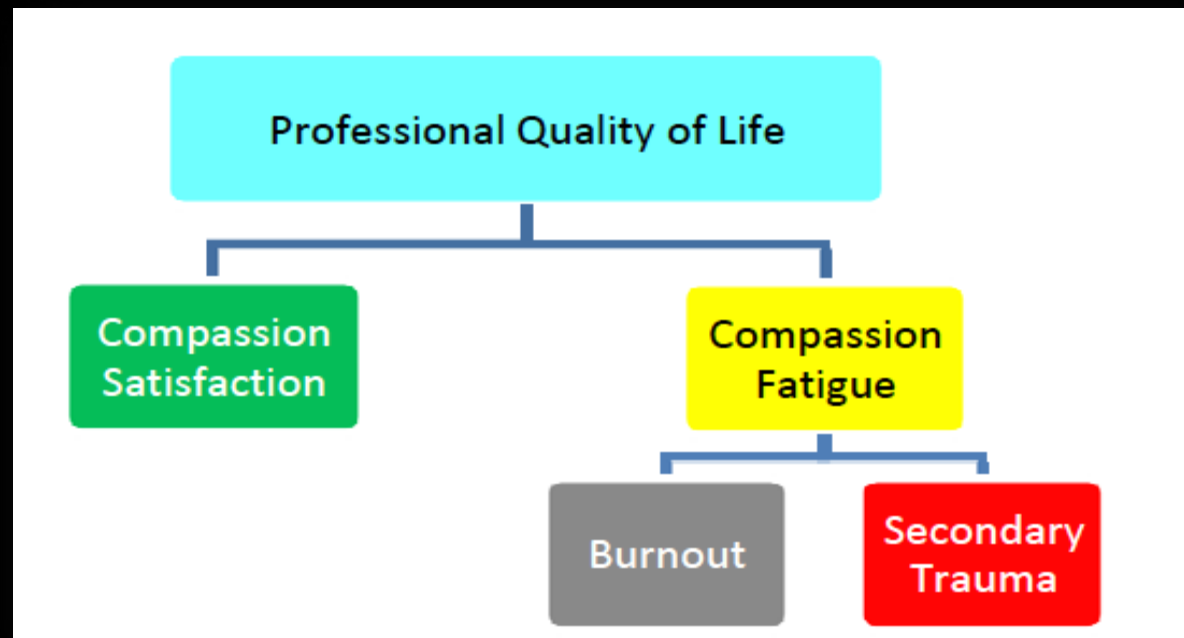
Palliative Care

Building Resilience

- Resilience begins with being realistic about what the challenges are.
- In order to heal it is important to recognise the signs and symptoms of compassion fatigue

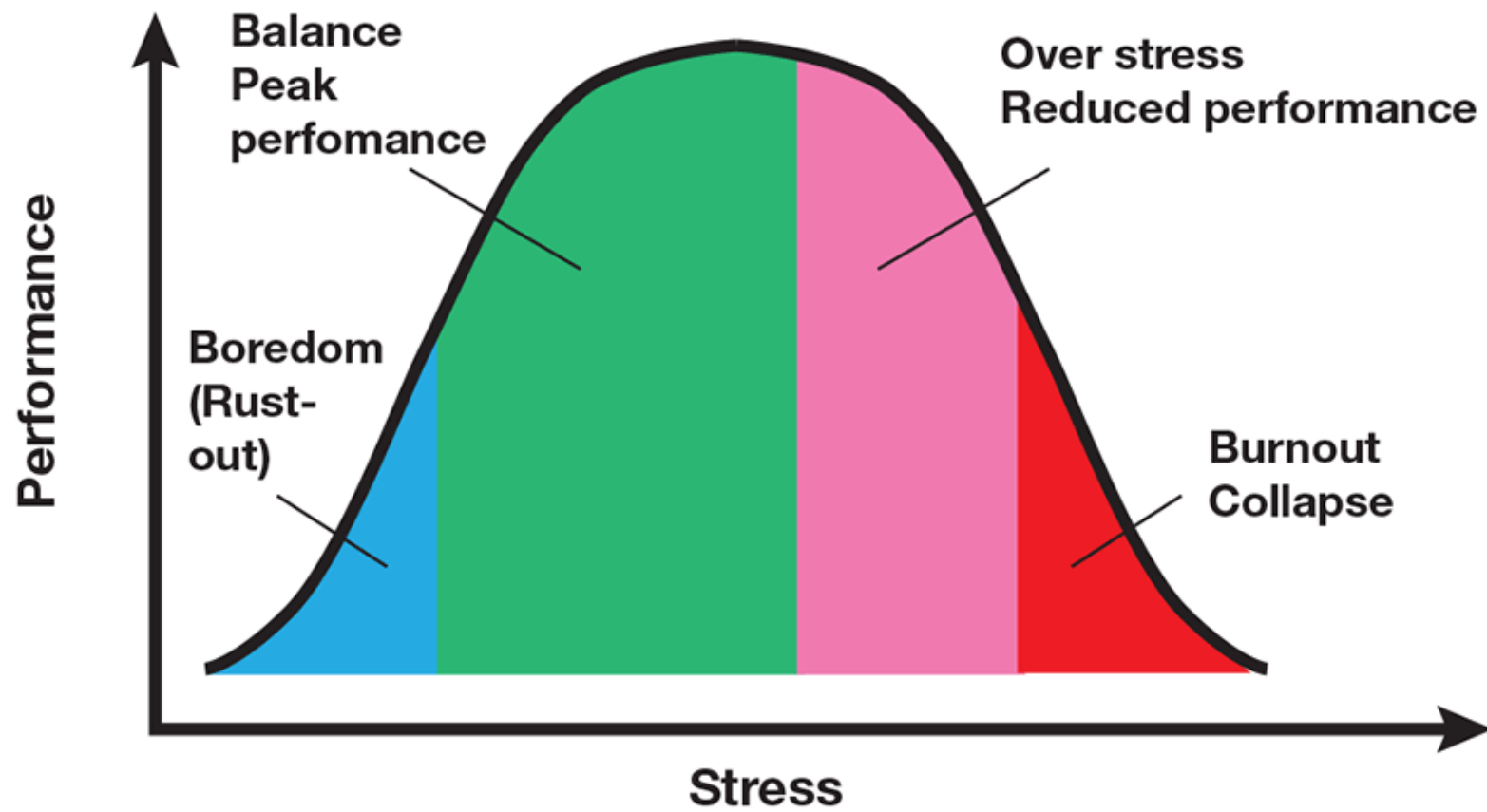
Compassion Fatigue

- Compassion Fatigue: occurs when you don't have the ability to provide care that you are satisfied with.
 - No longer get pleasure out of doing a good job



Are you at risk of burn out?

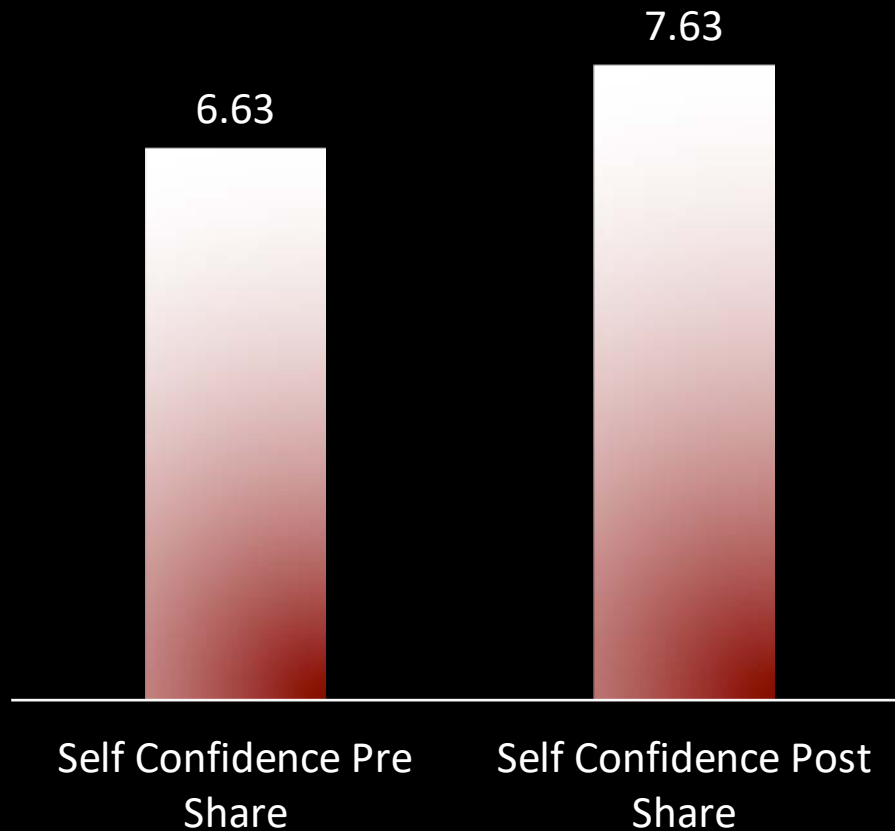
-
1. Do you have anhedonia?
 2. Do you manifest cynicism?
 3. Is your work affecting your family?
 4. Do you dread going to work?
 5. Are you easily annoyed?
 6. Do you envy those who are happy?
 7. Do you no longer care about performance?
 8. Do you have fatigue/low energy?
 9. Are you bored?
 10. Are you depressed before the work week?
-



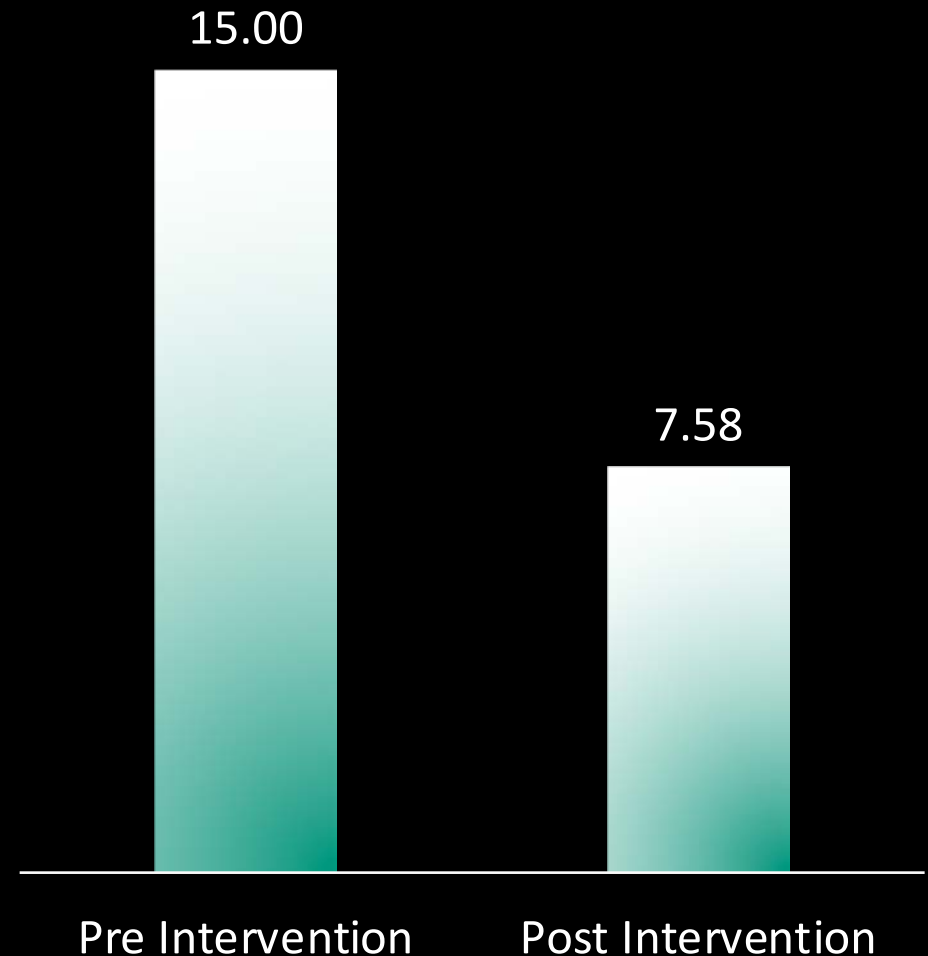
SHARE Outcomes

Frey R, Boyd M, Robinson J, Foster S, Gott M. Nurse Educ Pract. 2017;25:80-8.

Staff Self Confidence



Staff Depression



How to Stay Resilient

- No matter how busy we are:
 - take short breaks to rest, sing, laugh, and exercise.
 - Even breaks as short as 10 minutes can be effective.

Become Empowered

- Empowered Nurses have
 - challenging work
 - tasks using skills and knowledge
 - collaboration with doctors
 - being sought out by peers
 - seeking ideas from other professionals

Assumptions about human behaviour

Douglas MacGregor 1960

Theory X

- Assume people avoid effort, work only for money and security and therefore people need to be controlled

Theory Y

- Work is as natural for human beings as play or rest
- Initiative and creativity are widespread
- If people are committed to a goal, they will seek responsibility
- More accurate and more effective approach

Drive

(Daniel Pink)

- **Autonomy**

- **Mastery**

- **Purpose**

Team Mastery Depends on Diversity

Resourceful, exciting and fun
Irresponsible, childish and impulsive

Confident, witty, and imaginative
Arrogant, remote, and preoccupied

artisan	rationalist
says what is,	says what's possible,
does what works	does what works
guardian	idealist
says what is,	says what's possible,
does what's right	does what's right

Solid, trustworthy, dependable
Inflexible, dogmatic, unimaginative

Charismatic, receptive and accepting
Moody, unpredictable, and overemotional

Boost Your Resiliency

- Resilience is our ability to bounce back from stress.
- Resilience is a skill that can be learned and cultivated.
 - Be positive
 - Live and learn
 - Helping others
 - Take care of yourself
 - Laugh together



Use Positive Coping Strategies

- Consider making a list of positive coping strategies to use in times of stress.
 - deep breathing
 - meditation
 - taking a walk
 - talking with a friend
 - watching a funny movie
 - relaxing in a hot bath.



Plot twist. Waldo finds himself.

He tangata, he tangata, he tangata



Thank You.



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