Caring for the Caregiver Teaching Strategy

Overview of Teaching Strategy

Older adults, especially older adults with an underlying dementia are more vulnerable to developing delirium. The presentation of delirium characterized as an abrupt change in mental status caused by a physiological consequence of a medical condition is very frightening to family caregivers. The change in the level of functioning, abrupt behavioral changes sometimes marked by psychosis and agitation, and altered confusion is devastating. It is not uncommon for caregivers to believe that the presentation of symptoms is a rapid acceleration of the dementia. At times this can delay treatment and subsequently increase the risk of mortality in the patient.

Caregivers often feel guilty they did not seek treatment quicker. They may start making plans for a higher level of long term care in the face of the acute decrease in functioning. It is not uncommon for caregivers to feel burdened and burned out by frequent changes in mental status. The waxing and waning of symptoms exhibited by the patient can be both exhausting and confusing.

Helping caregivers better identify the change in mental status as potentially being a delirium can help them to feel more secure in the caregiving role. In addition supporting them during the often turbulent transitions between care settings can help with more favorable outcomes for them as well as the patient.

The inclusion of the family caregiver cannot be overlooked. This teaching strategy can be used to help students better learn how to help the family caregiver with education about dementia and delirium, resources for situational decision making and emotional support.

Learning Objectives

Students will:
- Assess the implications of stress on the caregiver
- Understand the role of the nurse in directing care to include the caregiver
- Utilize education about dementia and delirium, resources for situational decision making and emotional support for the family caregiver
- Understand the vulnerability of both the client and the caregiver during transitions to multiple care settings
- Assist the caregiver in making situational decisions

ACES Knowledge Domains
- Complexity of Care
- Vulnerability During Transitions

ACES Essential Nursing Actions
- Assess Function and Expectations
- Coordinate and Manage Care
- Use Evolving Knowledge
Make Situational Decisions

**NLN Competencies for Graduates of Nursing Programs**
- Human Flourishing
- Spirit of Inquiry

**Getting Started**

This teaching strategy focuses on the caregiver. It highlights the need to coordinate and manage care inclusive of the caregiver as an extension of identified patient. In addition it helps the student to better understand the need for educational and emotional support of the caregiver as situational decisions are determined and functional expectations are considered. It enhances the students’ human flourishing and spirit of inquiry.

This teaching strategy is designed to be used with the Millie Larsen case, but could also be easily utilized with any caregiver the student comes in contact with in any clinical settings.

There are several activities in this teaching strategy that can be done together or independent of each other. It is an excellent tool to use with members of a group, assigning each member or group one of the activities and having them report back to the larger group their findings.

The utilization of the Millie Larsen case study, specifically simulation scenario 2, provides an excellent start to understanding the needs of both the patient and the family caregiver.

**Materials**

**Case Study: Millie Larsen**

Millie Larsen is an 84-year-old Caucasian female who lives alone in a small home. Her husband Harold passed away a year ago and she has a cat, Snuggles, who is very important to her. Millie has one daughter, Dina Olsen, who is 50, lives nearby, and is Millie’s major support system. Millie is diagnosed as having delirium. Her mental status starts to clear after treatment of a urinary tract infection but almost falls walking to the bathroom. A discussion ensues regarding discharge plans and Dina is concerned regarding Millie’s ability to manage at home.

1. Utilize the caregiver preparedness tool to assess Dina’s readiness to take her mother home.

   - How would you interpret the results of the Preparedness for Caregiving Scale?
   - What areas of concern do you have for Dina in caretaking her mother at home?
   - How can you best support the caregiver to prepare for successful transition to home?
   - Develop a teaching guide and action plan to help Dina recognize and begin treatment of delirium in her mother should it occur again.

2. Develop a plan of care for offering Dina Olsen resources as she as she participates in discharge planning for her mother who has a resolving delirium and is functionally not quite
back to her baseline. Look at the resources provided by American Association of Retired People (AARP) as providing valuable information to Dina as she plans her mother’s care.

3. Consider the following questions as you think about the needs Dina Olsen may have now as a caregiver and how these needs may change based on her mother’s diagnosis of delirium.

   ▪ How would you start to assess Dina’s needs as her mother’s primary caregiver
   ▪ How would you collaborate with Dina and Millie to negotiate resources considering the risks and benefits of interventions
   ▪ How might you initiate a conversation with Dina about caregiving? How would you access her readiness to accept resources such as those provided by AARP?
   ▪ Prioritize 5 resources on the AARP caregiver resource page that you would refer Dina to as she plans care (see link below)


5. Legal Planning

   ▪ What legal planning do you anticipate may be needed for Dina and Mille in the future?
   ▪ What are the parameters of a power of attorney? A medical power of attorney? A legal power of attorney?
   ▪ How would you initiate a conversation between Dina and Millie regarding advanced directives?
   ▪ What are the components of advanced directives?

6. Self-Care

   ▪ How can you help Dina think about a caregiver team?
   ▪ What signs of burnout might you expect to see in caregivers like Dina?
   ▪ What resources do you think may be helpful to alleviate caregiver burnout?

7. Planning and Organizing

   ▪ How would you define a caregiver strategy?
   ▪ What are the considerations in hiring in home help? How is this financed?
   ▪ Look at the 12 Resources Every Caregiver Should Know About and identify what organizations may be helpful to Dina as she plans care:
      ○ What important documents are vital as Dina plans care for her mother?
      ○ Investigate the AARP app as a means of helping Dina to organize care for her mother

Teaching Strategies
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Suggested Reading


Dorothy F. Tullmann, PhD, RN, Kathleen Fletcher, RN, MSN, APRN-BC, GNP, FAAN, DELIRIUM Geriatric Nursing Protocol: Delirium: Prevention, Early Recognition, and Treatment retrieved from https://consultgeri.org/geriatric-topics/delirium

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