I'm fine!

LABELS ARE FOR JARS.
NOT PEOPLE.

Jami
The Mental Health Service for our Community
Preventing Burnout in Social Care
We’ve learned a lot about our MENTAL HEALTH
Mental health is ....

“Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.”

https://www.mentalhealth.gov/basics/what-is-mental-health
Mental Health

Situational

Relational

Sociological
Containing Leadership?
Burnout Ladder

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Adaptive Stage</strong> (<em>NEW</em> for Crisis Working)</td>
<td>Crisis threatens to plunge our organisation into flight, fight or freeze. Necessary to adapt to challenges which may cause high stress</td>
</tr>
<tr>
<td><strong>Honeymoon Phase</strong></td>
<td>High satisfaction with increased task commitment, energy and enthusiasm</td>
</tr>
<tr>
<td><strong>Stepping Up (<em>NEW</em>)</strong></td>
<td>Fire fighting and plate spinning phase. Running on adrenaline and previous commitment to our organisation; delaying the inevitable burnout</td>
</tr>
<tr>
<td><strong>Balancing Act</strong></td>
<td>Fatigue sets in causing inefficiency, reduced motivation and productivity</td>
</tr>
<tr>
<td><strong>Symptoms Set In</strong></td>
<td>Noticing exhaustion, somatisation and possible mental health challenges. We feel pressurized which may cause increased reliance on alcohol/drugs and caffeine</td>
</tr>
<tr>
<td><strong>Symptoms Peak</strong></td>
<td>Exhaustion won’t fade even with sleep. Negative thinking begins to dominate with pessimism and self-doubt prevalent</td>
</tr>
</tbody>
</table>

With thanks to Herbert Freudenberger (1980) who coined the term "burnout," Christina Maslach (1982) who also did seminal work in this area and Bob Veninga and Jim Spradley (1981) who created the original concept of the 5 Stages of Burnout. [Visit this link](https://www.winona.edu/stress/bntstages.htm)
Burnout Ladder

NEW

Adaptive Stage

• Faced with the crisis that threatens to plunge the organisation/group/individual into a classic anxiety response (fight, flight or freeze) you ADAPT ways of working/lifestyle.

• Costs of adaptive stage include stress/challenge of creating new models of working, new systems of family life and existence
What is Burnout?

Type 1 Work Burnout

- A debilitating psychological condition brought about by unrelieved work stress, resulting in:
- Depleted energy and emotional exhaustion
- Lowered resistance to illness

https://www.winona.edu/stress/bntstages.htm

Herbert Freudenberger (1980) coined the term "burnout," Christina Maslach (1982) and Bob Veninga and Jim Spradley (1981) all did seminal work in this area
What is Burnout?

Type 2 Carer’s Burnout

Now also recognised

- Giving care to family member over long term can lead to similar experiences to work burnout
- Ultimately you cannot continue to give the same level of care to your caree
- Can lead to feelings of guilt, shame and failure
- Can be well hidden and masked by outward signs of coping
Self Care

Mind Full, or Mindful?

I MIGHT READ UNTIL I FEEL BETTER

HOW WELL I SLEEP

AT WORK

WATCHING A MOVIE

DRIVING

LAYING IN MY OWN BED AT NIGHT

Jami
The Mental Health Service for our Community
Registered Charity 1003345. A Company Limited by Guarantee 201377C.
Preventing Burnout

Practice In our teams

• Educate about mental health and wellbeing
• Lead by example – talk about your self-care
• Embed a culture of self-care and reflection
• Challenge with compassion
Taking Back Control

- When we feel uncertain it can be helpful to take back control where possible
- Think about what you can control, not what you can’t control
Empathy

- From the Greek *empatheia* combining ‘em’ meaning ‘in’ and ‘pathos’ meaning feeling

- Being empathetic means being in a feeling or alongside a feeling with someone
Empathetic Listening

“The biggest communication problem is we don’t listen to understand. We listen to reply.”

- Stephen Covey
Let’s Talk
philippa.carr@jamiuk.org
DELIVERING MENTAL HEALTH SERVICES VIRTUALLY

THE NEW REALITY: ITS CHALLENGES (AND OPPORTUNITIES) FOR OUR AGENCIES AND THOSE WE SERVE

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561-684-1991
I. Our New Reality
II. The Shadow Pandemic
III. Challenges for Our Agencies and Staff
IV. Opportunities
V. Learning to Cope
THE NEW REALITY

• DIFFERENT HOUSEHOLD STRUCTURES (Different age groups, living situations, etc.)
• LOSS OF CONTROL
• LOSS OF BOUNDARIES
• PRE-EXISTING CONDITIONS/ISSUES

PERMISSION TO LOWER EXPECTATIONS!
THE SHADOW PANDEMIC

• Definitions
• Many are experiencing stress, anxiety and depression like never before
• National poll in March: 32% report mental health negatively impacted by COVID
  July: 53% report their mental health negatively impacted
• According to recent CDC study, social isolation due to social distancing measures, financial struggles, and socio-political climate is furthering a suicide crisis
  ➢ In June 2020, nearly 11% of American adults seriously considered suicide (more than twice the rate in 2018)
  ➢ That number was 25.5% for respondents ages 18-24.
  ➢ Mental Health and social care for people with severe mental illness and psychosocial disabilities must become part of the definition of essential services in all countries
CHALLENGES TO OUR AGENCIES AND STAFF

Our new backdrop of: Loss of Control; Lack of Boundaries; and Pre-existing Situations affects our clients, agencies, and staff too…

THE CLINICAL WORK:
- no choice but to go virtual….for everyone?
- which platform to use
- how to use the technology
- teaching our clients the technology and the etiquette
- proper documentation including consent for telehealth
- are all clients appropriate
- managing risk (basics….location, zoom links, supervision)
CHALLENGES

THE AGENCY

- no choice but to go virtual….for everyone?
- Are all staff allowed to work from home
- Do the hours of operation remain the same
- Can we consolidate some of our satellite locations
- How do we manage the COVID risk? Who sets the rules?
- Do we have the money to provide services for all of the people who are out of work who need mental health treatment?
CHALLENGES

THE EMPLOYEES
- Realizing that providing telemental health was not a primary part of the services provided by most of our agencies
- No prior knowledge of the technology
- Managing COVID fears among our employees and implementing safety measures
- Providing ongoing support to employees, while they support their clients
- Need to maintain boundaries in a boundary-less time……"We can ZOOM forever!"
- Location boundary questions
- Risk of lack of self-care
OPPORTUNITIES

➢ Providing easy access without driving time
➢ Expanding our services in creative ways… (new groups, attendance increased at psychoed programming)
➢ Collaboration across time zones
➢ Isolated seniors now connected and able to “socialize.”
AN OBSERVATION....

“THERE IS NOT ENOUGH YOGA IN THE WORLD TO COPE WITH THE MAGNITUDE OF WHAT WE ARE DEALING WITH RIGHT NOW!”

...APA MONITOR, JULY 2020
THE ROLE OF SELF-CARE IN MANAGING RISK

• TELEHEALTH HAS PRESENTED NEW CHALLENGES, “ADD-ON” PRESSURES
• WE NEED TO “UP” OUR SELF-CARE SKILLS DURING THIS TIME
• DIMINISHED SELF-CARE ASSOCIATED WITH INCREASED MEDICAL ERRORS
• IF WE DON’T FOCUS ON SELF-CARE, WE PUT OURSELVES, AND OTHERS AT RISK

THE CHALLENGE:
WE NEED TO BE ABLE TO GUIDE CLIENTS THROUGH THIS MOST UNPRECEDENTED EXPERIENCE, WHILE GUIDING OURSELVES!
AN OPPORTUNITY TO ENHANCE COPING FOR US ALL

-- BASIC PH --

• THE MODEL WAS DEVELOPED BY DR. MOOLI LAHAD, DIRECTOR OF THE COMMUNITY STRESS PREVENTION CENTER ISRAEL (ZANERE, 2004).

• THE MODEL SUGGESTS THAT PEOPLE POSSESS SIX POTENTIAL CHARACTERISTICS OR DIMENSIONS THAT ARE AT THE CORE OF AN INDIVIDUAL’S COPING STYLE.

• COPING EFFORTS ARE BELIEVED TO BE EFFECTIVE AS LONG AS ONE CAN SUSTAIN THEIR BASIC ROUTINE.

• CREATING A SENSE OF SUPPORT AND NORMALCY (TO THE EXTENT POSSIBLE) IS CRITICAL IN HELPING INDIVIDUALS DEAL WITH PSYCHOLOGICAL STRESS.
<table>
<thead>
<tr>
<th>BELIEFS/VALUES</th>
<th>AFFECT</th>
<th>SOCIAL</th>
<th>IMAGINATION</th>
<th>COGNITION</th>
<th>PHYSICAL</th>
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<tbody>
<tr>
<td>Attitudes</td>
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<td>Social role</td>
<td>Humor</td>
<td>Processing</td>
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<td>Structure</td>
<td>Creativity</td>
<td>Knowledge</td>
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<td>Expression</td>
<td>Group</td>
<td>Art</td>
<td>Information</td>
<td>Exercise</td>
</tr>
<tr>
<td>Meaning</td>
<td>Sharing your story</td>
<td>Contacting and connecting with friends/family</td>
<td>Music</td>
<td>Problem solving</td>
<td>Relaxation</td>
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<tr>
<td>Clarification</td>
<td>Crying</td>
<td></td>
<td></td>
<td>Reading</td>
<td></td>
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<tr>
<td>Connection to religion or higher power</td>
<td>Laughing</td>
<td></td>
<td></td>
<td></td>
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YOUR THOUGHTS, DISCUSSION.....