



Assisted Living Column



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Move it before it's too late: helping older adults accept less residential burden and more assistance



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Independence is a valuable commodity for all of us regardless of age. Unfortunately, aging brings with it a gradual, or in some cases abrupt, change in the ability to manage the routine tasks required to be independent. The basic activities that we are most concerned with include grooming, bathing, dressing, eating, toileting, walking, and transferring commonly require assistance with advancing age. There are also other tasks that must be taken care of such as cleaning the house, pain the bills, doing the laundry, and shopping for food and other essentials all of which would benefit from assistance. The older adult who struggles with these activities and tasks may be hesitant to make their problems known to others and may not want to seek help because that would mean losing at least some of the independence that they enjoy.

Most older adults will at some point in their life need assistance. This is especially true when it comes to alleviating the burden and stress associated with leaving one's family home after the children have left. Many will have a need to reduce the burden of their home where they raised their family as well as seek out assistance with their ADLs and IADLs. Unfortunately for most the optimum point of making this significant life transition is more often delayed until it is forced by a catastrophic event. Health care providers involved in assisting living are especially well positioned to correct this trend through several interventions. These include identifying when help is needed or a move is optimum, facilitating this transition or if this preplanning fails to be accepted, readying to

respond to a catastrophic event. When possible, it is also beneficial when health care providers can anticipate a decline even when that decline may not occur for another few years to start to prepare individuals and her family's for the drastic change in her life that will occur when they think about leaving their family dwelling and giving up a portion of their independence and autonomy. This is certainly not an easy undertaking to be able to predict an individual's decline and it certainly is not an easy discussion to have but it is an important discussion to have at the earliest time possible.

Identifying ideal time for help or a move

For many the timing of when to move from one's family home or bring in assistance can best be summed up by the Chinese proverb "*The best time to plant a tree was 20 years ago. The second best time is now.*" Applied to this situation it means that the best time to plan for a move for older adults is some time ago. To be more specific to the situation of older adults and their family home the discussion of what and when should be a part of retirement planning that occurs early with family and experts.

One of the most critical factors in determining care needs is the level of caregiver support required. Prior research has identified the presence of a spouse as one of the strongest and most consistent determinants of nursing home admission.^{1,2} Beyond this several studies have found that an increase in the number of children is associated with a reduction in the risk of nursing home admission.^{3–5} Further in this area, other studies concluded that having daughters rather than sons is associated with a reduced risk of nursing

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home admission.⁶ Obviously the number of caring daughters one has is a factor that is impossible to change but this is a factor none the less that along with others can determine care requirements and timing. Most states utilize a check list (Table 1) which will include many of the elements listed below to determine if an individual meets level of care needs requiring skilled nursing facility long term. These factors involve an individual's ability to care for ones' self in the current environment as such it assesses both intrinsic and extrinsic factors. While the intrinsic factors are often difficult to positive impact, the extrinsic factors could be supported or enhanced to maintain an individual safely in the community (Table 2).

Here is a list of real life examples of events that can happen in people's lives that illustrate the influence of the factors just mentioned on the ability of older adults to function safely in the community and remain in their homes:

- 1) The person in question gets lost when they go to places that are familiar. A real-world example of this was recently reported in the news regarding Bud Harrelson, a former baseball player with the New York Mets who is still only in his early 70's but has already reportedly been diagnosed with dementia. He was driving home from a familiar place when he almost caused a traffic accident by making a sharp unexpected turn when he realized, in the middle of an intersection, that he was going the wrong way to get home.
- 2) You notice when you visit your elderly parent that their clothes do not seem to be fitting them correctly, hanging loosely off their body. Without even weighing them it is easy to see that there has been a significant loss of weight that could come from the fact that they are not properly nurse because they are not able to prepare meals and perhaps not able to go shopping for the items that are needed to prepare meals.
- 3) You visit your elderly parent but you are hesitant to eat any food or snack that they offer because many items in the cupboard have expired dates or many of the refrigerated items have an unpleasant odor.
- 4) You are concerned when you visit your elderly parent home that it is not as neat as it usually is. There is much more clutter, and some of that clutter seems to be creating a hazard that raises your concern that your elderly parent may trip over something and fall resulting in potentially serious injury. In addition, you see a stack of mail on the dining room table that is not even opened. You inspect the mail and find that many of the letters were sent weeks earlier and some of them are bills that may not have been paid.
- 5) You walk into the home of your elderly parent and your met with the unpleasant odor that comes from poor personal hygiene. You use to your parent being in a meticulously clean condition but nail there only taking a shower once or maybe twice a week and when you try to talk to him about it they cannot seemed to understand why they need to take a shower and they may gnat even be able to negotiate all the steps required in taking a shower. You realize that the situation has come about because they have lost some of the cognitive and executive skills.
- 6) You are accustomed to bringing the bowel and having your parent answer the door and let you in without much of an effort. Now, it to struggle for them to answer the door and as you enter the home you cannot help but notice that they seem a little wobbly on her feet.
- 7) When using the bathroom at your parent home, you notice that there seemed to be an extremely large number of medication bottles in the bathroom cabinet. You also notice,

Table 1
Level of care assessment.

- ▶ Cognition
 - Cognitive skills for daily decision making
 - Memory / Recall Ability
 - Periodic Disordered thinking / Awareness
 - Acute change in mental status from person's usual functioning
 - Change in decision making as compared to 90 days ago
- ▶ Communication and Vision
 - Making self-understood / Expression
 - Ability to understand others / Comprehensive
 - Hearing
 - Vision
- ▶ Mood and Behavior
 - Indicators of possible depressed, anxious, or sad mood
 - Self reported mood
 - Behavior symptoms
 - Mood decline
- ▶ Psychosocial well-being
 - Social relationships
 - Lonely
 - Change in social activities in last 90 days
 - Length of time alone during the day
 - Major life stressors in last 90 days
- ▶ Functional status
 - Instrumental Activities of Daily Living (IADL) self-performance and capacity
 - Managing finances
 - Handling transportation (driving or navigating public transit)
 - Shopping
 - Preparing meals
 - Using the telephone and other communication devices
 - Managing medications
 - Housework and basic home maintenance
 - Activities of Daily Living (ADL) self-performance
 - Feeding
 - Toileting (maintaining continence)
 - Dressing
 - Bathing & grooming
 - Walking and transferring
 - Locomotion / Walking
 - Activity level
 - Physical function improvement potential
 - Change in ADL status compared to 90 days ago, or since last assessment if less than 90 days ago
 - Driving
- ▶ Continence
 - Bladder continence
 - Urinary collection device
 - Bowel continence
 - Pads, briefs worn
- ▶ Disease Diagnoses
 - Disease diagnoses
 - Musculoskeletal
 - Neurological
 - Cardiac or Pulmonary
 - Psychiatric
 - Infections
 - Others (Cancer, Diabetes)
- ▶ Health Conditions
 - Falls
 - Problem Frequency
 - Balance
 - Cardiac or Pulmonary
 - Psychiatric
 - Neurological
 - GI Status
 - Sleep Problems
 - Dyspnea
 - Fatigue
 - Pain symptoms
 - Instability of conditions
 - Self-reported health
 - Tobacco and alcohol

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