

Church Name

Jane Doe, RN, FCN

## WHEN DOES THE OLDER ADULT NEED MORE CARE?

Caregivers of older adults frequently struggle with the question: how do I know when it is time to intervene and get more care for the older adult, or perhaps move him/her to a higher level of care, such as an assisted living facility? Most older adults do not reach out for more care or initiate a move from their homes. Instead, they “tough it out” and struggle to remain independent. They may be unrealistic about their need for care and as a result may not admit to what their needs really are. Ninety percent of older adults want to continue to live independently in their own homes. They also fear becoming a “burden” on their families. Sometimes it is just the desire to keep a pet that makes them resist any move. What they may fail to realize is that ignoring the need for a little assistance may sooner or later precipitate the very move that they are trying to avoid.

### What signs will indicate to the caregiver that more help is needed?

- Physical signs such as persistent fatigue and loss of energy can indicate either that the older adult is not managing well independently, perhaps including not eating well, or that chronic conditions are being managed inadequately. The older adult may decline outings or find these increasingly exhausting. These signs are NOT just an expected part of aging.
- Other physical signs include difficulty with mobility (transfers and ambulation), weight loss and a poor appetite. These, if not addressed, will be likely to precipitate more serious situations such as falls and serious illnesses. To detect these, check the amount of food in their refrigerator and cupboards; check for evidence that towel rods have been used for transfer support in the bathroom. Also be alert to signs of poorly managed urinary incontinence.
- Emotional changes such as loss of interest in socializing or in hobbies once enjoyed, major mood changes, or changes in outlook on life are also not part of normal aging and can indicate that the older adult is either depressed, coping poorly with living independently, or perhaps developing early dementia.
- Evidences of lack of or diminished attention:
  - Neglect of personal hygiene as evidenced by unkempt appearance, body odors, stained clothing (vision loss may be the cause of the latter, also).
  - A decline in driving skills as evidenced by dents in the car and/or tickets received.
  - Lack of attention to finances as evidenced by unpaid bills and neglect of important mail.
- Evidences of memory lapses, poor judgment and difficulty concentrating:
  - Missed appointments.
  - “Sticky notes” stuck up everywhere.
  - Lack of interest in reading when it was once enjoyed, unrelated to visual difficulties.
  - Mixing up or failing to take medications according to the prescribed regimen; failure to refill medications appropriately. Solicit this information from the older adult’s pharmacist.
  - Failing to make medical appointments at appropriate intervals, either due to memory loss or poor judgment.
- Environmental clues:
  - Poor housekeeping, including an accumulation of dirty dishes, dirty countertops, an excessive build-up of dust and dirt on furniture and floors, and/or lack of home maintenance.
  - Refrigerators and cupboards that are empty or contain spoiled food.
  - An increase in clutter and tripping hazards in interior walking pathways.

## Where do I look for help?

- Getting help into the home (home care) is often the first step and will be more acceptable to the older adult than a move. Look on the web site of the Minnesota HomeCare Association ([www.mnhomecare.org](http://www.mnhomecare.org)) for member agencies. NOTE: When it is determined that the older has a need for care, it is not necessary that the family caregiver provide all the help as long as the older adult gets the help he/she needs. By contracting for help to meet the physical or environmental needs of the older adult, the caregiving son or daughter can be released to fulfill the role of the adult child, thus improving the quality of that relationship.
- If the older adult is eating inadequately, encourage him/her to accept Meals-on-Wheels (612-623-3363). Regular nutritious meals can make a big difference in the physical condition of the older adult.
- If physical symptoms are evident, schedule and facilitate a visit to the older adult's primary physician for a thorough check-up, including a review of medications. Ask the physician if any medications can be discontinued. Facilitate the older adult's compliance with regular appointments for management of chronic conditions.
- If the older adult's vision has not been checked within the last year or so, schedule and facilitate a visit to his/her eye doctor for complete eye examination.
- If the older adult's finances are limited, schedule a Long Term Care Consultation (LTCC) to assess the older adult's need for public benefits—especially those that will maintain him/her in an independent setting. Refer to NOAH's County Resource Sheets for the LTCC phone number for the county in which the older adult lives and call to schedule an assessment visit.
- If the older adult's isolation is causing problems with depression, the first step is to make an appointment with his/her primary physician. The socialization the older adult would receive in an adult day program may also help. Refer to NOAH's Respite Resources Sheet and the Topic Sheet on Depression in Older Adults.

## What if the older adult refuses to accept more care or to move?

- If, like most older adults, he/she wants to remain at home, point out that a few services at home will be likely to prolong his/her ability to stay there independently.
- Listen to the older adult's concerns and share yours. Express your concern for his/her safety and the burden of worry it places on you, the caregiver, a burden that would be greatly relieved by his/her acceptance of a little help. Direct his/her attention to specific concerns such as recent falls, unpaid bills, environmental hazards, or weight loss that suggest the need for more help.
- Emphasize that acceptance of help is not a failure—it is merely an acknowledgement of the realities of aging—realities that, if ignored, will very likely lead to bad situations.
- Involve the older adult's physician. Accompany the older adult to a clinic appointment after first informing the physician of your concerns and of the older adult's need for more care. Sometimes an older adult will listen to the physician when he/she will listen to no one else.
- In the worst case scenario, the deteriorating condition of the older adult will precipitate a crisis, such as a hospitalization. If that happens, work with discharge planners to find the best situation for the older adult. For help with the discharge planning process, download a booklet from this website: <http://www.medicare.gov/publications/pubs/pdf/11376.pdf>.

Resource: Family Caregiver Support Webinar Series: Recognizing the Signs of Aging and Need for Care