HOW TO CARE FOR THE FRAIL OLDER PERSON

With advancing age, some older people will develop frailty and disability – a combined effect of the ageing process and health experiences as well as chronic diseases.

When caring for a frail older person, one should respect the universal desire of all people:

• To have good health.
• To be optimally independent, live in their own home and community, and “age-in-place”.
• To have self-determination and make decisions for themselves.
• To be cared for and supported by family and people who they love and who care about them.

While long-term care arrangements, such as nursing home, may be necessary for those who totally lack care support at home or who needs 24-hour nursing care, even disabled older people with complex medical and social problems (such as following a significant stroke), as well as bed bound elders, can actually be cared for at home. This can be achieved with a combination of family and community support, an organised and coordinated system of professional community services for care where family is unable to provide (due to work and other resource constraints), and a consistent and capable medical provider. (See “How to Get Help on Community Support Services” on page 71).
Achieving Optimal Health

For frail elders with multiple health problems and their caregivers, the medical issues can be overwhelming as they can have many specialist appointments and many medications. Here are some ways of organising and managing the medical issues.

- Find a good primary care doctor who is trained and has experience caring for seniors, who can coordinate with the many specialists, to be the elder’s primary health provider and the family’s primary partner for information and guidance (see “How to Take Charge of Your Healthcare” on page 7).

- Learn how to best manage the senior’s conditions. Most chronic diseases require lifestyle and diet changes in addition to medication to really control the disease (e.g., diabetes). Caregivers can ask the elder’s doctor, check the internet, and contact the Health Promotion Board for information pamphlets as well as health education services in the community.

- Be organised about their medications (see “How to Manage Your Medications” on page 20).

- Pay attention to any changes in energy and cognition level. Older people can have significant infection and illnesses (e.g., heart disease) and manifest very little symptoms other than excessive fatigue, decreased mental alertness or confusion. Call the doctor immediately if the older person suddenly loses his or her ability to self-care, stop walking or become very sleepy.

- Make sure that the elder is immunised for flu annually and pneumococcal vaccine once every five years after 65 years of age.
• Compile and regularly update a health folder that includes a list of the medical conditions and related medications, laboratory reports, the doctors and their contact information, appointment schedule as well as any additional care plans and instructions such as special diet, etc. This not only helps the elder and the primary caregiver, but also if the caregiver has to be away, then someone else will be able to take over care responsibilities more easily, especially if the elder has a medical appointment or has to be admitted to the hospital.

• Pay attention to hydration, diet and nutrition. Check the elder’s teeth and make sure they can chew; adapt the softness of their food accordingly. Make sure they drink enough; older people do not perceive thirst as well and dehydrate easily; aim for 6 – 8 glasses of water each day.

• Monitor the bowel habit. Constipation is a very common problem due to inactivity, insufficient fluid intake and decreased fibre in the diet. Constipation can lead to poor appetite, lethargy and sometimes confusion, as well as to other health complications. Ask the doctor if constipation persists even with adequate fluids, fibre and physical activity. Acupuncture can be effective to complement lifestyle and western medical measure.

• Improve sleep. Many older people have difficulty with sleep, which can lead to day time fatigue, decreased memory, energy, and concentration and increased irritability (See “How to Deal With Sleep Problems” on page 23).

• Check and moisturise skin. Older people’s skin is thin and breaks down easily, particularly in areas where there is pressure, such as the buttocks and back. Do visually check (2 – 3 times a week) for skin break down to prevent pressure sores.
• Very importantly, do not overly focus on medical problems and leave no space for the elder to have a life! Health problems can be managed so the elder can pursue interests and enjoy their remaining years, such as spending time with their family, grandchildren and their friends, working on their spiritual pursuits, plant a new garden, etc.

Functional Independence and Mobility
One of the highest priorities in the care of the older person is to help them to be optimally independent within the
context of their frailty or impairments – to optimise their ability to walk and take care of themselves.

- Encourage and support seniors to do the things they normally do for themselves as long as it is safe. Don’t be overly protective and do for them what they can do for themselves. Older people some times become helpless because caregivers inadvertently encouraged them to be so.

- “Use it or lose it”. Help them to be as strong as can be by encouraging them to walk and exercise regularly. Excessive sitting and bed rest can lead to the loss of muscle mass and strength. Most frail elders have higher functional potential than they are doing because of disuse. Consider a rehab evaluation and programme to bring their strength and mobility to their optimal level (many senior day centres offer day rehab; see “How to Get Help on Community Support Services” on page 71). The more they can walk and do things for themselves, the less dependent they will be on others and the happier they will be (and their caregivers too!).

- Minimise handicap from disability and frailty by adapting the environment to compensate, such as using walking aids, adaptive devices, adding handrails to bathrooms, hallways and stairs; putting frequently used items in accessible places, etc. Again, rehab therapists can help to assess the elder, make recommendations for rehab, walking and functional aids as well as appropriate home adaptations.

- Check their hearing and vision. This is frequently neglected but its critical importance is self evident.

- Help seniors who wish to live in their own homes to do so. Their homes carry cherished memories, sense of belonging and self-mastery, and being uprooted from
one’s home, familiar neighbourhood and social network within one’s community is highly disruptive for anyone – but particularly for an older person. While it is often more convenient for family caregivers to move the elderly into their own home – occasionally sharing responsibility between siblings for care by rotating the elder from home to home, this is often distressing for many seniors. While moving sometimes cannot be helped, there are community services that can supplement what the family cannot do when the senior lives on his or her own and it’s worth exploring options to support the elder’s wish to live in his or her own home.

**Self Determination**

When older people become frail and need care, the common perception is that they become child-like – stubborn, uncooperative, and insistent on having their own way. The truth is that no one likes being told what to do, especially older people who have been making decisions for themselves and their families their entire lives.
Even when a father or mother needs help or care, the relationship is the same – they are still the father and the mother. Out of good intention, family members often assume they know what their father or mother wants and what is good for them without discussing with them, but that often is not true.

Taking away a person’s right to making decisions for him or herself compromises one’s dignity and ability to control one’s own life. It is critically important to support seniors to make their own decisions by providing appropriate information and discuss options. The elder may defer the decision to a family caregiver, but they have the opportunity to exercise their choice to do so. Always seek their opinions on what they like and how they would like to be cared for.

**Expressing Love and Support**

With the pressure of modern day life, one often forgets to express one’s love and affection for our elderly loved ones. Do update photos of grandchildren; frame family photos and place by bedside; if one cannot make time to visit, do pick up the phone to call and let them know that you are thinking of them; reminisce about happy times that were spent with the senior. Do talk to them even when they are bed-bound, appear to be quiet, with their eyes closed and seem uninterested in what’s happening around them.

You may also wish to tap on the many resources available in the community to support frail seniors. There are community aged-care specialists (care managers) who can help assess, plan and navigate the health-social support network for your older relatives.