

# Caring for Seniors

# TRAINING GOALS

- Achieving culturally competent care among the senior population.
- Considerations to think about when working with seniors.
- Understanding the burden of seniors who also happen to be caregivers.
- Gaining insights into managing seniors who have dementia, depression, or other cognitive impairments.

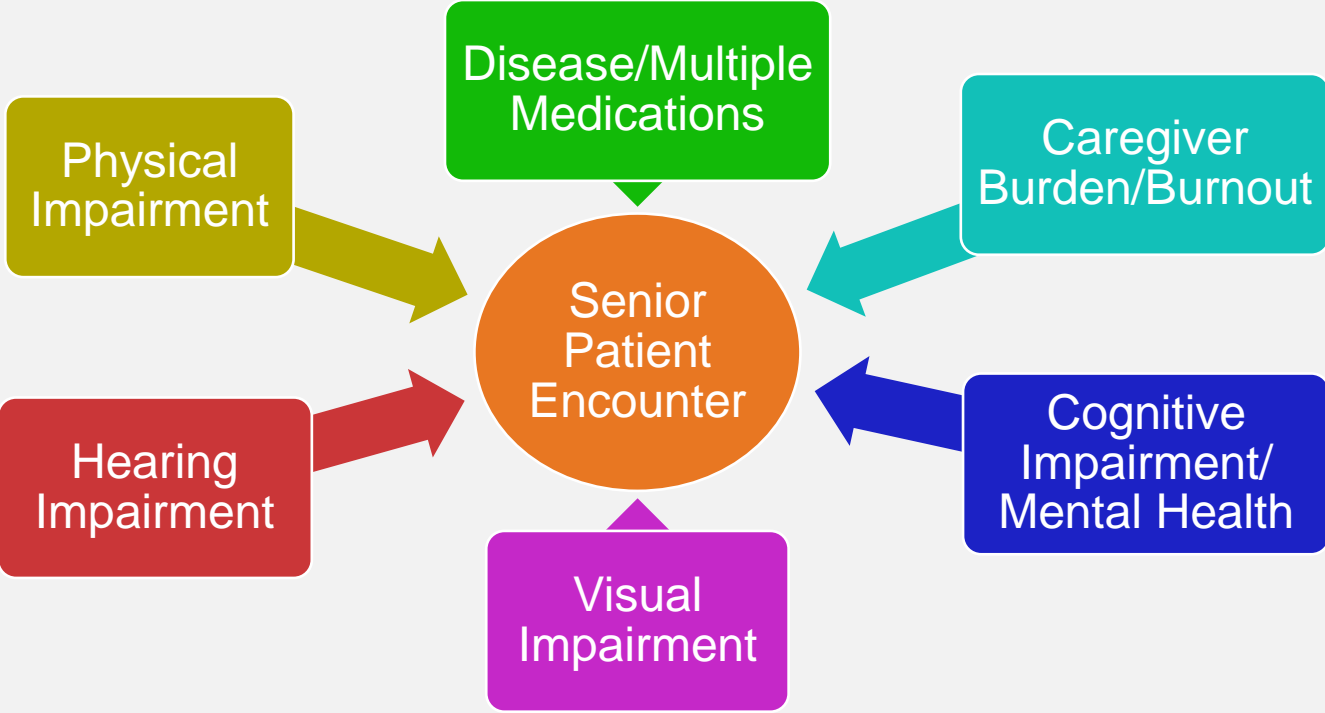


# SENIORS & CULTURALLY COMPETENT CARE

- As a group, seniors become more culturally diverse than other age sets as a result of the natural aging process, particularly those that have migrated.
- Culturally based health differences become more pronounced as people age due to different rates of assimilation and adjustment to U.S. health care delivery.
- In addition, certain ethnicities within the U.S. are more prone to chronic disease such as diabetes, arthritis, hypertension, etc., as they age.



# WORKING WITH SENIORS



# DISEASE & MULTIPLE MEDICATIONS

## Here's What We Wish Our Health Care Team Knew...

- Neuro-cognitive processing ability may be impaired
  - Pain
  - Stroke
  - Hypertension, diabetes
  - UTI, pneumonia
- Meds: can affect cognition
  - Pain medication
  - Anti-depressants
  - Interactions

## Here's What Your Team Can Do...

- Be aware
  - Slowdown
  - Speak clearly
  - Use plain language
  - Recommend assistive listening devices
- Obtain thorough health history



# CAREGIVER BURDEN

## Here's What We Wish Our Health Care Team Knew...

- While coping with our own limitations, we also may be caregivers
  - 12% active caregivers
  - 16% of working seniors are caregivers
- Caregivers report more stress, higher likelihood of depression

## Here's What Your Team Can Do...

- Ask about caregiver responsibilities and stress levels
- Offer caregiver support services



# COGNITIVE IMPAIRMENT & MENTAL HEALTH

## Here's What We Wish Our Health Care Team Knew...

- Patients with dementia may need a caregiver
- Older adults suffer more losses
  - May be less willing to discuss feelings
  - High suicide rates for 65+

## Here's What Your Team Can Do...

- Communicate with patient & caregiver
- Assess for depression, dementia/cognitive ability



# VISUAL IMPAIRMENT



**Macular  
degeneration**



**Diabetic  
retinopathy**



**Cataract**



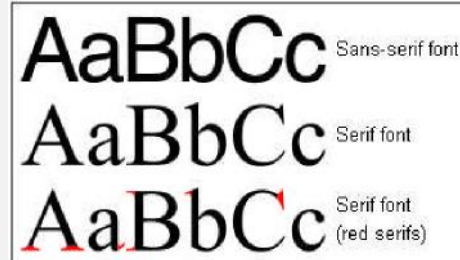
**Glaucoma**

## Problems

- Reading, depth perception, contrast, glare, loss of independence

## Solutions

- Decrease glare, bright indirect lighting, bright contrasting colors, LARGE non-serif fonts





# HEARING IMPAIRMENT

## Here's What We Wish Our Health Care Team Knew...

- Presbycusis: Gradual, bilateral, high-frequency hearing loss
  - Consonant sounds are high frequency
  - Word distinction difficult
  - Speaking louder does NOT help

## Here's What Your Team Can Do...

- Face patient at all times
- Speak slowly and enunciate clearly
  - Do not use contractions
- Rephrase if necessary
- Do not cover your mouth
- Reduce background noise:
  - Air conditioner, TV, hallway noise, etc.
  - Audible Solutions: offer listening devices



# PHYSICAL IMPAIRMENT

## Here's What We Wish Our Health Care Team Knew...

- Pain & reduced mobility is common due to:
  - Osteoarthritis
  - Changes in feet, ligaments and cushioning
  - Osteoporosis
  - Stroke

## Here's What Your Team Can Do...

- Keep hallways clear
- Lower exam tables
- Add grab bars/railings
- Use exam rooms nearest waiting area
- Offer assistance – transfers, opening sample bottles, etc.
- Recommend in-home accessibility assessment



# REFERENCES

- Cultural Competence: Seniors
  - Family Caregiver Alliance (FCA) (n.d.). Retrieved from [caregiver.org/caregiver/jsp/home.jsp](https://www.caregiver.org/caregiver/jsp/home.jsp)



**Thank you**

