



Geriatric Care Principles

Health care providers and nursing home staff should be trained in the basics of geriatric care to provide the best care possible. Below are some basic principles of geriatric care:

Increase Knowledge and Training in Geriatrics

- Health care providers should have competency/knowledge in geriatrics. Not all nursing home workers have experience with geriatric studies and principles. Clinical staff should be trained in geriatric care and all staff should have senior sensitivity training. One study found that nursing students working in a geriatric ward had more favorable attitudes towards older patients than those working in a general ward.
- Continued education in geriatrics is important. Literature shows that extensive and continued training is an important way of battling poor attitudes by staff against seniors. One study found that nurses trained in special education found older people with dementia to be "unique human beings" rather than one homogenous group.
- Training in geriatrics helps everyone. As more health care providers are trained in geriatric care, this may encourage more individuals to move into the field, which will help seniors today and in the future. Schools that educate health care workers have a challenge to present geriatrics as an exciting field of study; one where caring individuals can make a real difference. Nursing homes can be very exciting and stimulating places to work.

Nursing Home Residents Are Individuals

■ Be aware of ageism. Some health care professionals hold more ageist attitudes than the general population. A survey of nurses working with seniors found that they expressed "stereotypical views about old people." But ageism can work both ways—older people can take on stereotypes of old age, like suffering pain needlessly, "not wasting a doctor's time," or believing that "old age" is what's wrong with them.

- Create resident-centered care. Create an environment that makes residents feel at home by attending to their comfort and working to improve the overall quality of life and function of residents. Build a sense of community and bring a family atmosphere to the nursing home. Study culture change work (Eden, Wellspring, Pioneer Movement) and integrate the principles into the care provided to residents.
- Relate to the person, not the illness. When caring for residents, don't define them by their illness or disability. Providers should recognize that illnesses affect people differently and treat everyone as an individual. Sensitivity training about how elders experience care in your facility is also very helpful. One DON who needed surgery became a patient in her own sub-acute setting. After discharge, she ordered new mattresses for all residents.
- Expose health care workers to healthy seniors as well as residents. Encourage staff to seek out relationships with healthy seniors, not just patients, to help them have favorable attitudes about seniors. Studies have also shown that older health care workers or those that have grandparents as role models have better attitudes towards seniors.
- Uphold ethical principles, including autonomy and dignity. Evidence suggests that an elder's dignity and autonomy are often undermined by health care professionals. A health care provider's pessimistic viewpoint can negatively affect the quality of care and can translate into a loss of dignity and identity for seniors. Avoid negative interactions between staff and patients and insure that providers have regard for patients' privacy.



Geriatric Care Principles

Monitor Chronic Diseases and Provide Consistent Treatment

- Use multidisciplinary team of health care workers.

 Geriatric care involves attention to a patient's psychological, social, and functional needs. The team is responsible for developing and carrying out the plan of care. Regular meetings between health care workers are crucial, as well as completing documentation to maintain proper care.
- Track key clinical conditions including medications and preventive services. Health care workers should understand common senior complications, such as incontinence, falls, depression, and dementia. New patients should be screened for high risk of re-hospitalization and functional disability. Ongoing monitoring should include immunizations, pain control, end-of-life care, and prevention of chronic diseases.
- Provide consistent and conscientious diagnosis and treatment. Clear explanations of diagnoses are critical, otherwise residents may refuse treatment because they don't understand how their health can improve. Residents and caregivers should be encouraged to take an active role in managing chronic illnesses and be provided information on self-management whenever possible.

Encourage Positive Communication with Residents

- Good communication is important to good health.

 Effective communication can help prevent medical errors and help build relationships based on mutual respect.

 Ask questions about a resident's family or past in order to promote rapport. Acknowledge a relationship based on mutual respect, communication, and trust.
- Provide an engaging and meaningful environment. Residents receiving care should feel secure and comfortable. Activities and experiences should be positive and meaningful while being designed to support the resident.

References

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- 2. The American Geriatrics Society. Position Statement: Ambulatory Geriatric Care. www.americangeriatrics. org/products/positionpapers/ambltryPF.shtml.
- 3. Peach H, Pathy MS. "Attitudes towards the care of the aged and to a career with elderly patients among students attached to a geriatric and general medical firm." *Age Ageing*. Aug 1982;11(3):196-202.
- Lothian K, Philp I. "Maintaining the dignity and autonomy of older people in the healthcare setting." Bmj. Mar 17 2001;322(7287):668-670.
- Donald W. Reynolds Program in Geriatrics UoM-C. Ten Principles of Geriatric Care. www.fcm.missouri. edu/PDFs/TenPrinInsert.pdf.

Web links

The Eden Alternative www.edenalt.com
The Pioneer Network www.pioneernetwork.net
The Wellspring Institute www.wellspringis.org

■ Ensure end-of-life care, recognizing that decline of health, disability, and death are inevitable. Residents should be able to live well despite their illnesses. Be willing to discuss dying and other end-of-life concerns. Provide education for all staff on caring skills at the end of life. Work with residents and families on advance directives and engage with your local hospice provider.

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