Healthy Workplace Lunchtime Workshops

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Caring for aging parents



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Trusted Guidance for Aging Adults and Families

- Senior housing, transition & care navigation specialists
- EAP and workplace consultants

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- Caregiving and eldercare defined
- Caregiving stages and challenges
- Fraility scale and Isolation: invisible risk
- Resources and solutions





Caregiving - the act of providing **unpaid assistance** and **support** to family members or acquaintances who have physical, psychological, or developmental needs.

"Informal caregivers"

Eldercare – a subset of caregiving that **specifically** addresses the needs of **aging persons.**







Eldercare





Informal caregivers provide



Medication mgmt. Banking Transportation Meal preparation Shopping

Dressing Toileting Health care research Personal Care Decision making Care coordination Companionship Exercise Entertainment

Costs to informal caregivers:

*hard costs \$ *health and freedom

*depleted assets

*lost earning potential ***stress at work and at home**



Caring for an aging person can be rewarding



- Biological tendency to care for others
- Giving back makes us feel good
- "Vicarious happiness" at being able to help
- Greater appreciation of life and others
- Strengthens relationships
- Builds resilience

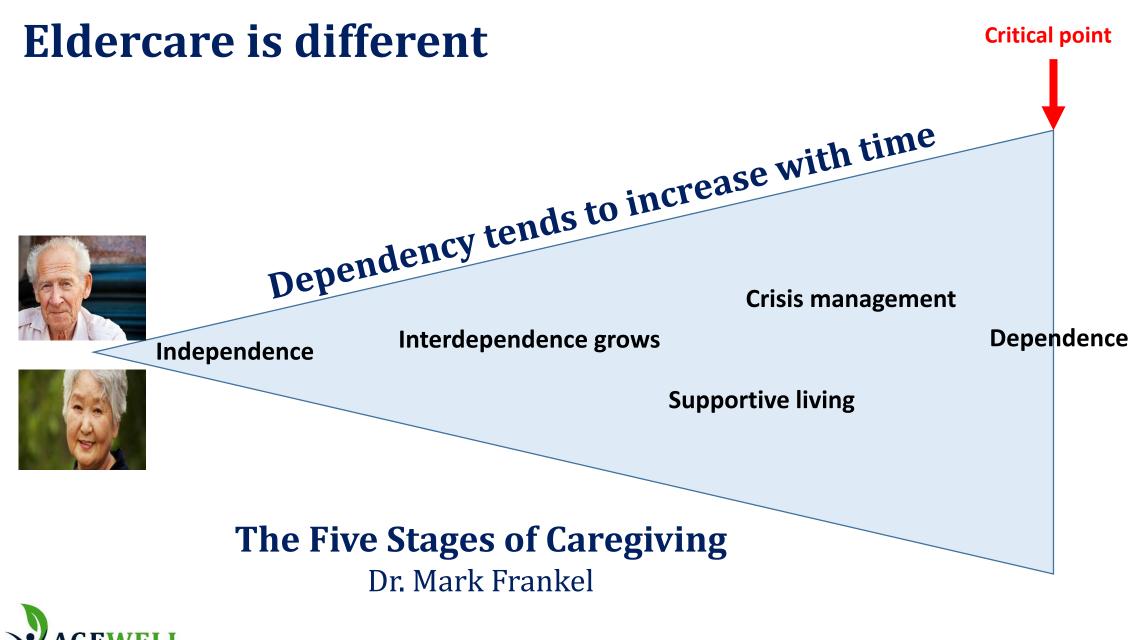
"Maybe giving back is biological...

Prof. William Haley

School of Aging Studies, U of South Florida



http://www.aarp.org/home-family/caregiving/info-2014/caregiving-happiness-confidence-compassion.html



1. Independence

Maintain regular contact and inquire about wellbeing and activities;

Create opportunities to spend time together and support intergenerational contact;

Support healthy lifestyles and activity;

Discuss future care wishes and legal documents.





2. Interdependence

Informal support accepted **(IADLs)**: banking, shopping, home maintenance, transportation, bill paying;

Learn about community living or resources to support independent living in the home;

Continue to encourage healthy lifestyles and activity;

Seek clarity on future care wishes and legal documents.







3. Supportive living

Close monitoring of the wellbeing of your loved one (and any caregivers) becomes critical;

Responsibility and risks of situation need to be fully appreciated;

Engage outside help if able; benefits of relocation should be considered;

Caregiver needs and health must be given priority.









4. Crisis Management

The responsibility for providing care starts to become overwhelming;

The health and personal care needs of a senior begin to outstrip the family's capacity to help;

Families express feelings of living "crisis to crisis";

Loved one may / may not be cooperative.









5. Dependence

Families are forced to admit their limitations in caring directly for an elder member of their family;

Viable scenarios evaluated: sharing or transfer of some care and responsibility to a third party.









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Challenges

Elderly person's right to choose. *Even if it may not seem like the right choice.*

Communication and building concensus.

Knowing where to start.



Time, effort, cost – monitoring, delivering, coordinating, researching.

Making decisions you feel confidant about.



Strategies

Discuss elder care concerns and preferences in advance. Ensure legal documents are in order.

Familiarize self with signs and symptoms of change.

Increase knowledge of resources. Who is out there? What do they offer? When would I call them? Is there a cost?

Make a plan: look forward, then work backwards.

Embrace a healthy and active lifestyle.





Fraility Scale: measure of physical function

- **1 Very fit** robust, active, energetic, motivated, exercises regularly
- **2** Well no active disease symptoms, active occasionally (seasonally)
- 3 Managing well medical problems are controlled, no exercise beyond routines
- **Vulnerable** not dependent on others but symptoms limit activities: <slowing> <tired>
- 5 Mildly frail more evident slowing, help with higher order IADLs, may use assistive devices
- 6 Moderately frail need help with all outside activities, housekeeping, inside stairs difficult, personal hygiene
- **7** Severely frail completely dependent for personal care due to physical or cognitive symptoms
- 8 Very severely frail completely dependent, approaching end of life; could recover from minor illness
- **9 Terminally ill** approaching end of life, life expectancy < 6 months.



Isolation – the invisible risk

Is someone you know becoming invisible ?



Source rise-cisa.ca / www.helpagecanada.ca



Risk Factors

- **Personal:** age, partner/not, education, childless
- Health: chronic illness, mental health, vision, hearing, dementia, disabilities, mobility, substance abuse
- Living situation: stable, caregiver present proximity to support network, access to social network and transportation



Changes in... physical health, mental/emotional health, personal hygiene, personality/routines, home management



Barriers: lack of transportation, loss of driver's license, lack of awareness of services, technology, limited help available

Resources

Champlain Healthline..... **champlainhealthline.ca** > a resource database East: 613.562.6362 / West: 613.721.0041 Alzheimer Society, Ottawa Renfrew County.....alzheimerottawa.ca / 613.523.4004 **NICE:** National Initiative for the Care of the Elderly.....nicenet.ca **Family Physician**, Pharmacists **Community Health Care Centres** Your EAP Program! Elder Care Consultants......Age Well Solutions



Thank you

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Other topics

Aging parents and cognitive change Aging parents and housing Aging parents and isolation

