KENDAL~CROSSLANDS Communities

Together, transforming the experience of aging.®

Sticking Points and Stumbling Blocks – A Primer on Navigating Conversations about Aging Sarah Matas

Goals for Today



- Reinforce the values underpinning these discussions, as well as the context in which these conversations occur
- Explore two common sticking points/stumbling blocks:
 - Getting help at home or moving to a more supportive living environment
 - Changing the Goals of Medical Care

Explore what might trigger these conversations

Practice



Starting with the Framework and our Reliance on Values

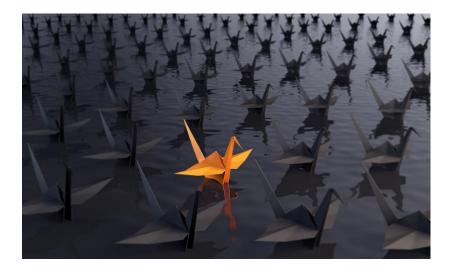


- Respect for the individual
- Self-Determination and Autonomy
- Dignity
- Collaborative Decision-Making
- Consensus-Building



Acknowledging the Context of our Discussions

- An exaggerated sense of individualism, coupled with the notion that nature can be brought under human domination
- Competing values:
 - Safety vs. Autonomy
 - Quality of Life vs. Respect for the Individual
- Risk Management
- The Need for Time and Space
- Role shifts: Friend/Colleague to Boss. Child to Parent.





Getting Help in the Home/Moving to a More Supportive Living Environment

What makes this so hard?

- Most "life moves" are due to an upswing of events. This move makes the world smaller. Deprives adult kids of the homestead.
- Losing a sense of mastery over the environment.
- "In the moment of crisis" decisions feel bad.
- Allowing help into the home impacts privacy
- Old routines are upended and possessions are moved around by others
- Losses on top of losses





What might Trigger this Conversation?

- Increased Falls
- Inability to access some areas of the home, including a full bathroom with a shower
- Failure to take medications correctly
- Bills going unpaid, appointments missed
- Housecleaning not happening
- Clothes not being changed frequently
- Concerns about safety, i.e. stove left on, house not being locked
- Unkempt appearance, odor
- Getting lost while driving. Having an accident or a near miss





How to Begin . . .

Start Small, and Start Early

Ensure that discussions are based on recent health assessments: therapy screenings, neuropsychological screening, physician appointments

Focus on feelings and needs . . . Whether you are broaching these subjects with someone who needs to change or you need to make a change and others are resistant

Be a support, offer help but back off and reapproach as needed

Be patient with the process, unless safety is truly compromised

Ask what information or resources you might be able to gather, or what you need others to gather for you

Talk about values and goals for this part of life – yours and those of the people who love you. Goals for End of Life. Risk Tolerance.

Talk about money!



Did you take your pills last night?

Are you taking your pills the way you're supposed to??



Say This Instead . . .

Can you remind me what you take each morning?

Can you remind me when you take your pills?

Can you show me how you've arranged your pills?

Do you have a way to get your pills delivered to you?



You've had the same clothes on for three days in a row!



Say This Instead . . .

What kinds of clothes are easiest to put on these days?

Do you need more? I'm happy to shop for you.



Your house/kitchen/bathroom is filthy. Let me come and clean it.



Say This Instead ...

If I had a magic wand and could bring anyone in here to do anything, what would your priorities be?

What might make your life easier, or better?



You almost hit that pedestrian! You're going to kill someone, or yourself!





Say This Instead

Do you feel less comfortable driving now than you did 5 years ago?

Have you stopped driving at night because of glare?

Do intersections bother you because of all the cars and activity coming at you from every direction?

Have you had any vision or hearing changes lately?

How would you feel about giving up driving if we came up with other ways for you to get where you need to go?

You just told me that five minutes ago!

Don't you remember that we talked about this last week?





Say This Instead

Has anyone shared tools with you to help your memory work better?

What's easiest for you to remember? Things that just happened or things from years ago?

Have you had a memory screening lately? Sometimes the professionals can give you techniques to compensate for the normal memory loss that comes with aging.

Relinquishing Curative Treatment – When is Enough Enough?

What might trigger this conversation?

- Repeated trips to the Emergency Room or the hospital, without overall improvement
- Treatment options are diminished, or are impacting quality of life in an overwhelming way
- Generalized "failure to thrive" or a sense that "this" – whatever that looks like – might be worse than being dead





How to Begin . . .

- Recognize that humans need to assist each other as coaches through the dying process
- Acknowledge the relationship between physical and emotional pain
- Identify spiritual pain. Follow the lead of Dame Cicely Saunders and ask "How are you within?" Take a spiritual pulse. Is it alienation, Ioneliness, separateness, abandonment, despair, meaninglessness, fearfulness, relatedness? Remember, forgiveness is the common cold of spiritual pain
- Recognize the healing power of death the spectre of death brings forth our priorities
- Listen rather than being concerned with doing
- Pay attention to changing priorities



Dad, you are going to be just fine!! Don't be glum!



Say This Instead ...

- Are there things you worry about?
- It must be really hard to come to terms with all of this.
- Can I just sit with you for a while?



What do Doctors know? You might live forever and I might be hit by a bus tomorrow!



Say This Instead . . .

- Do you think the doctors are right?
- What does your gut tell you?
- How does all of this seem to you?



There has to be something more to do! Don't give up – I need you here!



- Say This Instead
- Let's be sure that we get the best medical care we can find . . . But let's just be together when we have done all we can do
- I need you here and I will miss you terribly but we will get through this somehow.



Final Considerations

Switching from Child to Parent . . . Or Colleague to Caretaker

Take action when there is a genuine risk of injury due to:

- Medical mismanagement (appointments or treatments missed, medications taken incorrectly)
- Noticeable shifts in cognition that impair judgment and create risks of injury
- Physical frailty that prevents an individual from caring for self

Navigating Shifting Roles

- Acknowledge the shift
- Explore values and engage in frank discussions about priorities (what matters most?)
- Allow changes to happen gradually – exercise patience
- Do more listening than talking. Prepare to NOT take things personally.



Brief List of Resources

The Thoughtful Caregiver – Rebecca James Hecking

Handbook for Mortals – Joanne Lynn, Joan Harrold, Janice Lynch Schuster

When Reasoning No Longer Works – Angel Smits

Hard Choices for Loving People – Hank Dunn

<u>Tough Decisions in Care of Elderly Loved Ones – Mahesh Moolani, MD</u>

