

## Signs you should be preparing for a loving but awkward talk with a senior loved one.

### Introduction

Suggesting your senior loved one needs help is extremely difficult and awkward. It represents a change in your relationship. Previously you were the child or grandchild, they love you and you love them. However, this conversation represents a change in the dynamic, from being the cared for to being the care-giver. If it is difficult for you, imagine how much more difficult it is for your senior loved one. However, having this conversation is one of best expressions of love, it shows you want them happy and healthy for as long as possible. The correct care introduced at the right time will help stop a dramatic health event from occurring.

### When is the right time to think about having the conversation?

First look for the more obvious signs, use this check list. The family member might wish to complete this first, to convince themselves that it is time to have this conversation. Then complete a second version with the senior loved one. The senior might have some good coping strategies in place for the difficult areas. But are these coping strategies realistic and sustainable?

Weighting	Areas	Details	Score
<b>General</b>		<b>How many in the Last Year?</b>	
1		Falls	
1		Vehicle accidents	
1		Medical incidents other than annual check ups	
<b>Long term health</b>			
1		A recent medical condition that is not getting better or recovery is very slow	
1		A health condition that is getting worse	
<b>Activities of Daily Living (ADLS)</b>		<b>Score 1 for difficult, Score 2 for very difficult, 3 for impossible</b>	
1, 2 or 3		Eating	
1, 2 or 3		Toileting	
1, 2 or 3		Selecting proper clothes and putting them on	
1, 2 or 3		Grooming	
1, 2 or 3		Maintaining continence	
1, 2 or 3		Bathing	
1, 2 or 3		Walking	
1, 2 or 3		Transferring (such as moving from bed to wheelchair)	
<b>Instrumental Activities of Daily Living (IADLS)</b>		<b>Score 1 for each IADLS that is difficult, 2 for impossible</b>	

1 or 2		Managing finances	
1 or 2		Handling transportation (driving or navigating public transit)	
1 or 2		Shopping	
1 or 2		Preparing meals	
1 or 2		Using the telephone and other communication devices	
1 or 2		Managing medications	
1 or 2		Housework and basic home maintenance	

Results: Please note that this is indicative only, showing the relative importance of each activity. Any score on this check list, means you should have the conversation, between 1-5, it might be a neighbor or friend could assist, but at least discuss the coping strategies. A score of 5 or higher indicates regularly scheduled long term care is likely required. The higher the number, the larger the amount of care required. The actual level of care planned should involve advice from a care manager, Plan Life care ([www.planlifecare.com](http://www.planlifecare.com)) offers a full care plan and consult with a Registered Nurse free of charge.

### Look at the bigger picture

It is likely the senior has good coping strategies in place for difficult activities, but are these realistic and sustainable? There might be an element of denial about the seriousness of the problem. It is important to review other indicators about the aging loved one and around their house.

First give the senior a hug, tell you are thinking of their best interests, but also use the hug to assess the following:

- Any weight loss or gain?
- Feeling frailer?
- Strange body odors?
- Changes in appearance, clothes, facial expressions and grooming.

### Social factors

- Are they engaging with friends, neighbor and church, as before?
- Do they leave the house as often?
- Do they have someone that can assist / check up on them?

### Money Signs

- Is there an accumulation of unopened mail, both an indication of issues and a tripping hazard
  - Personal mail, social factor
  - Unopened bills, are these getting paid, overdue notices?
  - Other packages or unopened magazines, are subscribing or buying unneeded items?
- Are there any new financial relationships, new book keeper, insurance agent, financial consultant, lawyer etc?
  - What is the reason for the change?

- Is there anything the aging loved one doesn't understand about what is happening, be alert for fraud.
- Could you meet with the new person and stay informed? If that third-party refuses be very alert.

### Look around the house and especially the kitchen:

- Kitchen
  - Look for expired, stale, moldy food.
  - Multiple of the same items, are they repeatedly buying the same item?
  - Just TV Dinners? These are generally not healthy.
  - Broken appliances or signs of damage / fires?
- Other areas
  - Clutter?
  - Tripping hazards?
  - Dirt and lack of cleaning?
- Pets and plant care
  - Are any pets well cared for?
  - Look for dead or dying plants.
- House maintenance
  - Anything broken?
  - Leaks?
  - Dripping faucets?
  - Running toilets?
  - Newspapers in bushes / uncollected mail?

### Driving

If the aging loved one is still driving, suggest they drive to a restaurant, library etc. Take the time to look at the following:

- New nicks, dents in the car.
- Correct Seat belt usage.
- Tension, distraction, taking a strange route to avoid certain roads or junctions
- Are they driving safely? Very slow driving is not safer but might also be a sign of lack of control or ability.
- Does the vehicle seem maintained and safe?

If their driving is not safe, you must encourage them to stop driving. Tell them there are plenty of great options to going car free e.g., ride sharing, Uber specifically trains driver on senior passenger's needs. Point out this removes stress and increases their safety. For the occasional driver, it is cheaper to use ride sharing.

### Get other opinions

- Talk to other family members.
- Talk to their primary care doctor, you will need your loved one's permission.
- Talk to friends, neighbors.

### Bring in some professional help

If you believe the senior loved one needs help, there is often a resistance. It will help to bring in neutral third party. Plan Life care ([www.planlifecare.com](http://www.planlifecare.com)) offers free initial consultations using an Registered Nurse to “proscribe” a protocol of Home Care, if that is needed. Other services such a geriatric care manager may offer similar. If this situation is approached medically, then home care is more likely to be accepted. Home care is often a good starting point, because the aged loved one is able to stay in their house, the change is less dramatic then a recommendation to move to an assisted living facility (ALF).